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## 1 Location of Therapy

Sessions are held at: (Delete location that does not apply)

Holden Natural Health Clinic, Lewes Road, Forest Row, East Sussex, RH18 5AF

The Gestalt Centre, 15-23 St Pancras Way, London, NW1 0PT

I also offer sessions on the telephone or via video call using Skype or Face Time.

On rare occasions I may need to change the location of your therapy session.

For health & safety management purposes you agree to your name and address being held confidentially at the premises. You understand that for cleanliness reasons, you may be required to remove shoes before entering the therapy room.

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## 2 Session Time

Your psychotherapy appointment time is agreed with you and is normally conducted once every week on the same day and time unless otherwise agreed. Each psychotherapy session will last 50 minutes unless otherwise agreed. No additional time can be given at the end if you are late for the session. I will keep strictly to the time. It is important to end your session promptly because I use 10 minutes between appointments to write and review notes and refresh myself for the next client.

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## 3 Fees and Payment

Your session fee is £\_\_\_\_\_ per 50 minute appointment. Initial sessions, or sessions required from time to time can be booked and paid for using my on-line booking system. However, it is more cost-effective and benefits therapeutic outcome to commit to a course of therapy. My preference is for an initial commitment to a minimum of 6 sessions paid in advance. After your 4th session, if you want to continue, you can book further sessions in blocks of 4 and the final 2 are held in a retainer for the closing sessions when our work finishes. The retainer is non-refundable should you choose not to use it. Bank details are as follows: Co-Operative Bank, Sort Code 08-93-00, Account N° 82363833. Invoices or receipts can be given on request. Charges will be made on a pro-rata basis for any reports that I may be required to write or to read in connection with your therapy, or for any telephone support between sessions or in any contact with your GP or psychiatrist. Fees are reviewed periodically with advance notice of any increase.

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## 4 Cancellation Policy 4 Weeks

Please give notice of 4 weeks to cancel or change an appointment. Your appointment time is assigned to you and reserved for your use. You are responsible for it however you choose to use it. All missed or cancelled appointments, for whatever reason, are charged as usual unless prior notice is given at least 4 weeks in advance. You will not be charged for sessions that I need to cancel or for sessions missed due to my holidays. (Please see Section 5 below).

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## 5 Holidays and Sickness

I will take holidays during the year and will inform you of the dates in advance. If I have any sickness and cannot carry out a session with you, I will inform you by text or email unless I am not well enough to do so, in which case you will be contacted by a colleague or my professional executor.

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## 6 Contact

You agree that I may contact you by email, telephone or text using the preferred details you give me. You undertake to ensure that such communications can be received privately by you.

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## 7 Confidentiality

Your sessions with me are strictly confidential and nothing of what you say is ever divulged to anyone else accept my supervisors and in the situations indicated below. On the following rare occasions you agree I may give information.

- 1) Where there is an imminent danger of harm to yourself, to others or to me
- 2) Where I am compelled by a court of law
- 3) Where I deem it important for me to consult other professionals such as your GP or a psychiatrist in the course of your therapy.

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## 8 Process Notes and Supervision

You agree to me keeping personal process notes of our sessions. Process notes do not identify you and are strictly for my own use to help me with my work. I may use process notes when I see my supervisor. The professional regulatory bodies of which I am a member (BACP, AHPP, COSRT) require that my clinical practice is supervised in order that my clinical competence and ethics are monitored. Your full identity is never divulged in supervision sessions. My supervisor is bound by the same codes of confidentiality as I am.

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## 9 Records and Professional Executor

Your records are kept electronically and securely with password protection for a period of 7 years after you finish your therapy. No one except me has access to your records. In the event of my death or sudden cessation of my practice due to disability or other unforeseen circumstances, a professional executor bound by the same codes of conduct as myself will take responsibility for my affairs and your welfare. My professional executor will have access to your records for safekeeping purposes.

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## 10 Ethical Standards

I abide by the ethical code of practice of the British Association of Counsellors and Psychotherapists (BACP), the United Kingdom Association of Humanistic Psychology Practitioners (AHPP) and the College Sexual and Relationship Therapists (COSRT). These standards are available at [www.bacp.co.uk](http://www.bacp.co.uk), [www.ahpp.org](http://www.ahpp.org) and [www.cosrt.org.uk](http://www.cosrt.org.uk)

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**11 Psychotherapy**

*The psychotherapy and relationship therapy offered includes psychosexual, psychodynamic and humanistic modalities depending on your needs. Psychotherapy is most effective when there is a good therapeutic relationship between client and therapist, irrespective of the modality used. In any event, psychotherapy will vary according to the personalities of the psychotherapist and client and the nature of the circumstances bringing you to therapy. Different models and techniques may be used in helping you with the issues you present. Successful therapy usually depends on your willingness to commit to attend appointments regularly and to engage actively, adopting an inquiring attitude to yourself.*

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**12 Risks and Benefits of Psychotherapy**

*Psychotherapy has benefits and risks. Since therapy may involve discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, psychotherapy often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress and anxiety. There are no guarantees of what you will experience. However, most people benefit and feel empowered by regular psychotherapy work. You are responsible for your own well-being and health physically, emotionally and psychologically during sessions and afterwards.*

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**13 Therapeutic Relationship**

*The therapeutic relationship is intended to be healing, supportive and sometimes challenging. There may be times, as in any human relationship, when things feel difficult and it seems hard to persevere. These times, if worked through in the sessions, can promote growth and enhance life. You accept the need to have the intention of seeing things through in such circumstances.*

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**14 When Therapy is Inappropriate**

*You agree not to attend an appointment under the influence of non-prescribed drugs or alcohol, or to bring children or pets with you. In such cases the session will most likely be terminated and charged as usual. Additionally, if you pose a threat to my wellbeing the session will be terminated and charged.*

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**15 Finishing Therapy**

*Ending your engagement in psychotherapy is an important process in itself. If either you or I think it is an appropriate time to end your therapy we each agree to discuss fully in session and give notice of at least two sessions depending on how long you have been in therapy with me. The final sessions are used to review the work done and draw the therapeutic process to a conclusion.*

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**16 Couples Counselling**

*You understand that if you are currently in Couples Counselling with your partner, it may not be possible for either you or your partner to engage concurrently in individual sessions with me in the same period. After you have concluded Couples Counselling with me, individual therapy with either of you, but not both, can be discussed. If, for any reason, you cannot attend a Couples Counselling session with your partner, the session will most likely be cancelled and charged.*

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**17 Spouses, Partners, Children and Family Members**

*You may discuss the possibility of inviting your spouse, partner, child or family member into one or more of your sessions. However, you accept that it may not be possible for your spouse, partner, child or family member to engage in concurrent individual psychotherapy with me. If at another time your spouse, partner, child or family member would like individual psychotherapy with me, that can be discussed.*

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**18 Social Media and Internet**

*I will not engage with you, or any former client, on social media and will not normally conduct any internet searches on you, unless, in extreme circumstances I am unable to find you in a situation in which there may be danger or risk. This is a policy decision to respect your privacy and maintain a healthy boundary around my working life.*

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**19 Changes to the Contract**

*I reserve the right to vary these conditions when necessary.*

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**I / We agree to the above Terms & Conditions**

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Signed by the Client(s):

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Name(s) (block capitals please):

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Date:

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