

## ACC CRISIS COUNSELLING SUPPORT SERVICE CLIENT CONTRACT

Contract between **COUNSELLORS NAME** and **CLIENTS NAME**

The following agreement reflects the commitment both of us have to the counselling process. Please read through it carefully and if you have any questions, we can discuss these.

Please confirm your acceptance by e-mail confirmation, or by post, or if neither of these options are not possible, we will verbally agree the contact and I will make a note of this for future reference.

1. In our first session we will explore your counselling needs and discuss how we may work together and whether on-line or telephone counselling are appropriate for you now. We will continue to review our work together as the counselling progresses. If at any point I determine that my training and experience are not sufficient for me to proceed with our counselling arrangement, we can explore other sources of referral for you.
2. The counselling service is provided by me on a voluntary basis (i.e. you will not be charged anything for this counselling) and can be for up to ten sessions depending on what we agree together. Sessions will normally be for up to one hour, unless agreed otherwise between the counsellor and the client
3. The service will be provided online and/or via the telephone and we will work out together the practical arrangements.
4. I will agree with you the means by which I would want you to contact me if you want to or need to arrange, cancel or amend an appointment and to resolve any technical difficulties we may have during an appointment. If you are unable to make an appointment, please contact me as soon as possible to advise me of this.  
**[Counsellor may insert their ideal notice period for cancellation of a session etc]**
5. Please be available to start the session at the time agreed ensuring that you have a space which gives you sufficient privacy.
6. I will keep our session time private so that we cannot be overheard or overlooked.
7. I will let you know in advance by the medium that we have agreed, if I have to miss a session giving you as much notice as possible

8. I will listen and consider all the information that you give me and will provide counselling services to the best of my professional ability and in accordance with the principles contained in the Ethical Framework and Practice Standards set by my professional organisation(s) which are listed here  
**Counsellor to insert relevant organisations**
9. I will treat the information shared by you during the counselling process as confidential and will not give that information to any other person unless (a) I am required by a court of law to do so (b) where I am legally required to do so (c) if I believe there to be an imminent risk of you inflicting serious injury upon yourself or others or (d) you disclose to me information about a child and/or a vulnerable adult being abused or at imminent risk of abuse when I shall follow safeguarding guidance and responsibilities.
10. Professionally all counsellors are required to have professional counselling supervision, and I will be talking to my supervisor about the counselling I undertake, however your confidentiality will be maintained.
11. I will agree with you the process by which I may contact your GP or other health professionals, in the event that it is needed or requested.  
**[Counsellor can insert any limitations that might apply here in relation to their normal practice]**
12. Either of us has the right to end the counselling at any time, but generally it is helpful to discuss wanting to end and agree a good ending process. Ending the counselling will not release me from the terms relating to confidentiality in this agreement.
13. Under this agreement I will keep brief notes of our sessions, which you are entitled to see. We have discussed my policy of keeping these notes confidentially. These will be kept for ..... **insert depending upon counsellor's insurance requirements, otherwise its 3 years** .....years after counselling has been completed. After this period of time has elapsed, they will be shredded or deleted.
14. I am required to follow the GDPR regulations and need your consent to hold your personal data, which will include any or all of the following: the information that you provide on the referral form, your email address, phone number(s), any electronic messaging, notes of our meetings, holding of your name in the assessment form and notes, holding of any writing/drawings you wish me to keep. **I am registered with the Information Commissioner. If it applies to the counsellor include otherwise delete**
15. If you as my client have a concern or complaint about the counselling, can your first raise this with me, if you feel that this would be appropriate, but if not or by doing so you do not feel that it has been satisfactorily resolved, you are entitled to use the complaints procedure set out by my professional organisation(s) which are listed in point 8 above.
16. I will inform ACC when our counselling has ended and how many sessions we had.
17. At the conclusion of our counselling you will be invited by ACC to complete a confidential feedback form or short survey to express your views about the counselling service



**COVID-19 Crisis Counselling Support Service**

Date:

Signed Counsellor:

Signed by Client:

[digital signatures and/or email confirmation by both or either party are acceptable for this agreement or a verbal agreement that is formally noted by the counsellor in their records]

[Please see also the addendum]

## Additions to the Contract

The counsellor may discuss and agree with you one or more of the following about the finer details of working together which they may provide to you either in writing or verbally

These will cover the following

1. questions they need to ask you, as you begin therapy together to assess the suitability of on-line or telephone counselling for you at this time. These questions can be about your current circumstances, family background and medical history including any mental health challenges
2. the contact information that they need to keep, together with your G.P. details in case they need to act under clauses 9 and 11 of the contract
3. guidance in relation to you knowing how to ensure the privacy and confidentiality of the space you chose for your counselling session
4. guidance as to what means will be used for on-line or telephone counselling sessions (Zoom, Skype, VSee, Whatsapp, Landline, Mobile) taking into account yours and the counsellor's preferences and limitations
5. guidance as to how to make connection, e.g. who initiates the call and whether a reminder message is sent, and through which medium messages will be sent (email, text etc)
6. the preferred means of communication prior to sessions (e.g. for reminders) and during a session if connection cannot be made or is lost
7. your preference as to how the sessions will be referred to e.g. if leaving a voice message or email to say 'our appointment or meeting' rather than our 'counselling session'
8. where applicable how the client and counsellor can share documents or images that need to be exchanged as part of the therapeutic process e.g. art- work or other images or information sheets etc
9. how each session will terminate and what you can do if you wish to terminate the session earlier than the scheduled end time (e.g. allowing time to discuss how the next session will be scheduled)
10. what the counsellor will do in an emergency in the very unlikely event that you became suddenly ill or incapacitated during a call (for example ringing an emergency contact)