

LIFE-FORCE Counselling Service

Couple Counselling Contract

Private & Confidential

Ian Rattray



**Registered Member 39260
MBACP (Accred)**

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Dip. Counselling
Integrative Counselling and Therapy
Registered MBACP (Accred)

Couple Counselling Contract

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Welcome to the LIFE-FORCE Counselling Service.

My name is Ian Rattray and I am Team Member of the LIFE-FORCE Counselling Service which is a BACP Accredited Service. I also hold Membership of BACP and as such am bound by the Ethical Framework for the Counselling Professions upon which this counselling contract is based.

What is Couple Counselling?

Couple Counselling offers the opportunity for you both to explore the issues concerning your relationship with each other in a safe, confidential and supportive space without judgement. Exploring thoughts, feelings, actions and ways of communicating with a therapist can enable insight, understanding and change. I take an Integrative approach, through which I bring together several therapeutic approaches fitting the therapy to you. This is based on Humanistic philosophy and Systems approach. As such the therapy is client-led with a focus on patterns of relating.

Initial Session and Type of Contract

Our first session(s) together, will be assessment session(s), where all 3 of us will decide if we feel we can work together. As part of the assessment process, I may meet with you both individually for an equal number of assessment sessions before meeting together to decide if a couple counselling contract can be offered.

The Process of Couple Counselling

After the assessment session(s), should we decide to work together then this will usually be for joint sessions on a weekly basis with an initial contract of 6 sessions, followed by a review of our work together, after which the option of an open-time contract will be offered. This means wherever possible we will all commit to on-going therapy until one or both of you feel the work is complete or wishes to close the contract.

While the sessions are usually on a joint basis sometimes it may be beneficial to meet you both separately on an individual concurrent basis. If this is the case, then in order to maintain a fair balance within the couple counselling relationship, I will meet with you both for the same number of agreed concurrent weekly sessions. If we do work in this way, then I will need to meet with each of you for all these agreed sessions before meeting together again for a joint review session or for resuming ongoing joint sessions. During the couple counselling process if one or both of you feel you would benefit from individual on-going counselling then I will refer you back to the LIFE-FORCE who will find you a different counsellor.

Counselling Sessions

For joint sessions we have agreed to meet me together weekly on _____ at _____ for an initial contract of ____ sessions, which will last for 50 minutes each. Should concurrent sessions be agreed then I will arrange your appointment times with you both individually.

The cost per session is £ _____ and this will need to be paid at the start of each session. If you are unable to attend then please give 50 hours cancellation notice, without which a fee of £20 will be charged regardless of the circumstances.

If a contract for joint sessions is in place and one of you is unable to attend then the session cannot go ahead and the full session fee will be due. Any requested letters will be at the above agreed session fee.

If we are meeting for joint sessions, the session will not start until you are both there. We will also finish the session if one of you needs to leave before the end of the session. In either case the full session fee will be due.

Unless you have cancelled a session by leaving a message on my mobile number 07973 427488 then I will usually remain on LIFE-FORCE premises for 30 minutes in case one or both of you have been held up.

Contact Details

Counsellor's Contact Details

Name Ian Rattray

Mobile Number 07973 427488 Email Address ian@ianrattray.com

Should you need to contact me between sessions to cancel/rearrange an appointment then phone or text me on 07973 427488 and if needed we can arrange a time to speak, however I am unable to offer counselling sessions on the phone.

First Client's Contact Details

Name _____

Phone Numbers Home _____ Mobile _____

Email Address _____

I agree you can contact me by home phone / mobile phone (and leave a message with your name and number) or by letter (please circle to confirm), but would prefer to be contacted by _____

Second Client's Contact Details

Name _____

Phone Numbers: Home _____ Mobile _____

Email Address _____

I agree you can contact me by home phone / mobile phone (and leave a message with your name and number) or by letter (please circle to confirm), but would prefer to be contacted by _____

Reasons for Coming

Whilst I am happy to work with what you both chose to bring to the sessions, it can be helpful to know your reason for coming including any areas you would especially like to work on, plus any specific aims or goals you may have in mind so that these can be taken into account.

Identified Areas for the Counselling Work:

First Client _____

Second Client _____

Specific Goals and Hopes for the Outcome of the Counselling Work:

First Client _____

Second Client _____

The above areas may change as the therapy progresses, so I will regularly review our work together every 6 weeks

Boundaries & Limitations

In order to create a safe space for the therapy are there any specific boundaries and limitations you would like to agree upon? If any behaviour becomes unsafe it would be necessary to end the session.

Joint Agreement _____

Confidentiality & Supervision

As a counsellor I will provide the highest level of confidentiality possible according to the law, the BACP Ethical Framework for the Counselling Professions and LIFE-FORCE Counselling Service. However some situations could result in one of the following disclosures:

- In situations of concern regarding your emotional/mental wellbeing, I would encourage you to self-disclose in order to access further appropriate support. However if you prefer, and with your written consent, I could do this on your behalf e.g. a mental health condition, risk of suicide or self-harm.
- In situations where you do not have the capacity to self-disclose, then I may have to disclose confidential information without your consent. However I would always aim to inform you prior to taking any such action, e.g. a severe mental health condition or learning disability.
- In situations of public interest I would have a legal obligation to disclose information without your consent and also would not be able to inform you prior to taking any such action e.g. some illegal activities, acts of terrorism and child protection issues.

The first point of contact in disclosure situations would be your GP. However, depending on the particular circumstances, and whenever possible, I would always aim to discuss this with you both first and gain your individual explicit written consent as applicable before taking any action. Please be aware feedback to the Service is kept to a minimum and your personal information is only shared in order to provide you a counselling service.

Client's GP Details _____

In order to support any medical or physical disability needs either of you may have, it could be necessary to conduct a risk assessment together for one or both of you, and gain your individual permission to disclose personal and sensitive information as deemed necessary at the time.

If you are adopted or adoption issues become the focus of the work, I will notify Barnardo's Adoption Services with whom I am a registered therapist, as it is a legal requirement for any adoption related therapeutic work to be undertaken through a registered adoption agency.

All professional counsellors are required by BACP to have regular supervision to support professional practice. I will make brief case notes at the end of all couple counselling sessions in order to monitor my work. However all cases are discussed using a pseudonym and as no identifying details are used, your privacy would therefore always be maintained. Should you request that I do not write and keep case notes, or do not wish to sign this Counselling Contract, then you will need to sign a Client Waiver Form before the sessions can proceed.

Client Waiver Form completed – YES / NO

Complaints

If you are unhappy with the therapy sessions you are whenever possible encouraged in the first instance to talk your concerns through with me, your counsellor. Alternatively if you are dissatisfied with the Counselling Service provided you can discuss it with Nicole Joyce Centre Director or Alison Scrutton Counselling Service Manager on 01206 791661. Finally should you still be dissatisfied you can contact BACP as I am subject to their professional misconduct procedure.

Closure of Counselling Contract and Referrals

Together you may choose to end our work together whenever you wish, alternatively you may both find the work draws to a natural ending. In either case it is important to have a closing session(s) to say goodbye, as this is an integral part of the therapeutic process.

It is important to be aware that once the couple contract is closed, should one of you wish to continue seeing with me for individual counselling sessions then a period of 4 weeks would be needed before I could offer this service. Also, if this was the case then I would not be able to provide you both with further couple counselling sessions again at any time in the future.

Occasionally it may be necessary for me to refer you back to LIFE-FORCE for referral onward to a different couple counsellor; this could be for a number of reasons such as:

- We don't seem to have connected and are therefore not working well together.
- Your needs could be better met by a different counsellor.
- Yours or my situation changes making the contract untenable.

First Client

As the client, I have read and agree to the contents of this couple contract, and confirm I am not attending couple counselling elsewhere. If I am currently attending individual counselling then I confirm I have already informed them that I am attending couple counselling as well. Should this be the case then anything I discuss in my individual counselling that relates to the couple work I agree to bring back to the couple sessions.

In signing below I give my explicit written consent for my personal and sensitive data stated within this couple contract to be safely stored by my counsellor, along with our case notes, for a period of 7 years after closure of the couple counselling contract, and then for this to be destroyed by shredding.

First Client's Signature _____ Print Name _____

Second Client

As the client, I have read and agree to the contents of this couple contract, and confirm I am not attending couple counselling elsewhere. If I am currently attending individual counselling then I confirm I have already informed them that I am attending couple counselling as well. Should this be the case then anything I discuss in my individual counselling that relates to the couple work I agree to bring back to the couple sessions.

In signing below I give my explicit written consent for my personal and sensitive data stated within this couple contract to be safely stored by my counsellor, along with our case notes, for a period of 7 years after closure of the couple counselling contract, and then for this to be destroyed by shredding.

Second Client's Signature _____ Print Name _____

Counsellor's Signature _____ Print Name _____

Date of Contract Commencement _____

Practising at: LIFE-FORCE Centre, 3 East Hill, Colchester, CO1 2QL
Counsellor's Telephone Number: 07973 427488
Abiding by the BACP Ethical Framework for the Counselling Professions

LIFE-FORCE Counselling Service

Client Data Protection Agreement

Sharing Information

As your counsellor I adhere to current legislation and LIFE-FORCE Data Protection Policy by ensuring all your Personal and Special Categories Information including: case notes, printed emails, letters, reports and referral documents, will not be shared without first obtaining your explicit consent, unless I am subpoenaed by a court of law.

Storage of Information

All your Personal and Special Categories Information will be stored in a locked filing cabinet. I am the only person who will have access to this information. However, in the event of my unfortunate demise I have a Living Will where an appropriate person, who has been appointed as my Contingency Counsellor, would take ownership of your Personal and Special Categories Information. If this comes into force they would notify you accordingly and would manage the safe storage and destruction of your information as per this agreement.

Retention

All your Personal and Special Categories Information will be retained within a locked filing cabinet for a period of seven years after closure of our counselling contract. After the seven years your information will be destroyed safely and securely with the use of a double cross shredder.

Electronic Records

Any electronic records and information such as emails will be kept for a period of seven years after closure of our counselling contract after which all your electronic information will be deleted.

Text Messages

Your contact details will be added into my work mobile phone for the duration of your counselling sessions and will be deleted 3 months after our contact has been closed. All text messages that you send directly to my mobile number will be deleted from my mobile device within 3 months.

Client's Rights

The Personal and Special Categories Information I retain about you under GDPR needs to be accurate and kept up to date. Should any of your information be incorrect or require amending please notify me as soon as possible and I will amend and update your information accordingly. You have the right at any time to revoke your consent and for your information to be erased/destroyed at any time. I am duty bound to ensure I abide by your request unless there is any other residing legislation preventing me from doing so at the time.

Subject Access Request

You have the right to access and request copies of any Personal or Special Categories Information that I currently retain about you. Should you require a copy of this information you can request this verbally or in writing to me and I will respond within 30 days of your request.

Breach of Confidentiality

If for any reason you feel that I have breached your confidentiality, then in the first instance you are encouraged to discuss this with me first before taking any action. If you are unhappy with my response you can write to the Centre Director at LIFE-FORCE via e-mail: info@lifeforce-centre.co.uk or you can contact the Information Commissioners Office (ICO) on 0303 123 1113

Client's Consent

I the client, have read and understood the information above and by signing below I hereby give my consent for my counsellor to follow these procedures.

First Client's Signature:

Print Name:

Date:

Second Client's Signature:

Print Name:

Date:

Counsellor's Signature:

Print Name:

Date: