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Counselling and Psychotherapy
GDPR Data Protection A8709768

CONTRACT FOR PSYCHOTHERAPY & COUNSELLING

Cancellation: Please give 24 hours' notice if you are cancelling or rescheduling an appointment; cancellation within 24 hours of the session means that the full fee will be payable. The 24-hour period starts one day before your appointment, at the appointment time. For example, a Friday 10am appointment will be charged for if it is cancelled any time after 10.00am on Thursday.

Confidentiality: The content of all sessions is in strict confidence. This applies to any and all conversations and records, except in the following circumstances:

- * Where you consent to the confidentiality being broken
- * Where I am compelled by law, or where information is so grave, I am concerned that you may harm yourself or others. In these cases, and wherever possible, I will first seek to obtain your consent or agree with you an appropriate course of action.

We will also discuss the possibility of accidental meetings outside of the therapy room and agree an appropriate response.

Supervision: My practice is supervised regularly, and confidentiality applies as above. To provide the best possible service and for my work to be supervised thoroughly I may wish to discuss some sessions, by prior agreement with you.

Number and Frequency of sessions: Sessions are normally weekly, though we may agree additional sessions if appropriate. If you prefer less sessions this is acceptable.

Review: We will regularly review our aims and achievements. Any changes to aims will be mutually agreed in advance.

Ending: Please provide at least one session notice of your intention to terminate our contract and allow for a further final session to conclude and summarise the therapy.

Ethics: I abide by the Code of Ethics of the United Kingdom Association of Transactional Analysis, the European Association of Transactional Analysis and the British Association for Counselling and Psychotherapy. In addition, I subscribe to the United Kingdom Association of Transactional Analysis Diversity and Social Responsibility Policy

I agree to pay the fee of £ as agreed at the end of each session.

Client Signature:

Date:

Therapist Signature:

Date: