

## Online Counselling Agreement

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Before the beginning of our work together it is necessary for us to have a working agreement, so that we both know what is required of us.

***Please carefully read the following information to find out what's involved.***

### **Counselling with me**

My name is Hazel Hill and I am a qualified registered (045039) Counsellor and an Accredited Member of the British Association for Counselling and Psychotherapy (BACP). I work to BACP's 'Ethical Framework for Counsellors' and hold professional indemnity insurance. I hold a DBS certificate.

### **Online Counselling**

Online counselling may be able to help with a wide range of issues including, abuse, anxiety, bereavement, cultural issues, depression, eating difficulties, loneliness, relationship problems, self-esteem, sexual orientation, sexual abuse, work related issues and many more.

Not all types of issues can be resolved through online counselling and I will advise you if I feel face to face counselling would be more appropriate. If I consider that online counselling would not be the most suitable means of support I will endeavour to assist you in a referral to a suitable alternative source of support in the area you live in.

### **Services available**

Online counselling is offered by email, instant messaging or video call. I recommend instant messaging and video call is carried out using skype. A weekly time can be booked for our instant messaging or video call.

Therapeutic email exchanges are generally one for each week for an agreed period. Please allow up to 48 hours for a response to your e-mail. If you miss your time slot or fail to send an email then your payment will be kept. The only exception will be if a technical failure has prevented the email exchange or our skype meeting and I have been advised of this via telephone.

### **Confidentiality**

All my counselling work is confidential. The only time that I may break confidentiality is:

- if you are at serious risk of causing harm to yourself or others
- child abuse is disclosed
- you share information about proposed act of terrorism
- when I am compelled to do so by law.

If any of the above situations occurred, I will discuss with you beforehand on how I will disclose this information. If at any point during our counselling arrangement I felt that you were in need of emergency support, I may ask for your consent to contact your GP.

Neither of us must communicate the content of emails to a third party, which includes not putting anything we do together on any social media or blog. Please refer to my social media policy.

Counsellors are ethically required to have supervision and I may discuss your case but your identity will never be revealed.

### **Session**

Counselling sessions last for 50 minutes. Fees are per session not per hour.

Sessions are normally weekly but may be fortnightly or at other intervals by agreement – often weekly is best at the beginning as we are getting to know each other and gaining some understanding of the issues.

### **Fees and Payments**

Individual Skype sessions per session are £45 and couple counselling is £55. Payment charges can be found at <http://inyourcommunity.org.uk/sessions-and-prices/>.

You are asked to pay in 48 hours in advance of the first session to confirm your booking. Where there is not time to do this, please come to your first session with your first payment in cash.

Payment may be made electronically either by PayPal (through my website [www.inyourcommunity.org.uk](http://www.inyourcommunity.org.uk) ) or direct bank transfer. Bank transfer to: 30-93-17, A/c No: 02476828. Please use your first name as a reference and let me know by email or text that you have made the payment. All subsequent sessions need to be paid 48 hours in advance.

### **Security**

Please ensure that you secure your computer and emails against unauthorised viewing by third parties. It is recommended that you only use a private computer and not a work or public computer. Please ensure you keep your anti-viral protection up-to-date and I will undertake to do the same.

### **Technology breakdown arrangements**

Should you experience a technical breakdown which prevents you from emailing or skyping as agreed, please contact me by mobile (07814 363855) so that we can discuss how to re-arrange our email exchange. I also undertake to contact you by telephone should I experience a technical breakdown.

### **Personal crisis procedures**

I cannot provide an emergency service for clients. If you find yourself in a major crisis and were considering serious self-harm it would be vital to get immediate help. This could include contacting your GP, or going to your nearest accident and emergency department (A & E). You could also call the Samaritans on 08457 909090 or visit their website [www.samaritans.org](http://www.samaritans.org)

### **Cancellation Policy**

Please give as much notice as possible for cancellations/postponement (text 07814 363855). A cancellation fee of your normal payment will be charged for sessions cancelled with less than 48 hour's notice. Rearranged appointments with more than 48 hours notice will not attract a cancellation fee. Other cancellations will be charged at 50% of your normal payment.

### **What next?**

- If you are happy to proceed with online counselling on this basis, please complete the details about yourself set out below, and confirm by "signing" at the bottom.
- Attach this document to an email and email it back to me at [counselling@inyourcommunity.org.uk](mailto:counselling@inyourcommunity.org.uk)
- We will arrange a mutual time and date, and I will ask you to pay for your first session.
- We can then continue working together for as many sessions as you find helpful.

**Personal details**

Name	
Age	
Gender	
Country or area you live in	
Email address	
Mobile phone number	
Type of counselling (email, Skype chat, Skype video)	
Please explain briefly what issues you would like to explore in counselling	
Please describe any counselling or similar help that you have received or are receiving	
Please describe any times that you have considered suicide or serious self-harm	
(Optional) Name and phone number of your GP	
Where did you find out about my services?	

Please type your name and the date below to confirm that you accept this agreement, then save the completed document and return it to me as an email attachment.

**Name:****Date:**