

Counselling Agreement with the Pearl Exchange

Name _____ Date of birth: _____
Address _____
_____ Phone: _____ Email _____
GP's name _____ Tel No _____
Practice address _____

The one off counselling session is a time for you to talk about and explore feelings or problems in your life with a trained professional.

Confidentiality

The counsellor will not share any information about you or what you say in your counselling sessions. There are two important exceptions to this:

- 1) If you are at risk of harm from another person, serious self-harm or harming another person. This can be physical, sexual or mental harm.
- 2) If you know of or are involved in serious illegal activities, particularly to do with terrorism.

This will mean we need to talk to your G.P. or another agency. As much as possible, this will be done with your knowledge and consent but please note that we have a legal obligation and a duty of care to your safety that means that the information will be passed on. Please note this only happens in very few situations.

Your contact details and a brief record of the session will be kept securely by your therapist.

Covid-19 To limit the risk of passing on infection we will both:

Follow the safety systems set up for this in the room including using sanitiser provided before entering and keeping 2m distance from each other where possible.

Tell the other, before meeting, about any covid symptoms being experienced or recent contact with someone with covid-19.

Professional Practice

Each therapist agrees to work according to the code of ethics of their professional body

Agreement

Please sign this page to indicate that you understand how we will work together, how your personal information will be held for the purposes of counselling and that you accept the Covid-19 risk.

I agree to our working together in this way,

Signed,
Client _____ Counsellor _____ Date: _____