

Psychotherapy contract

Subject of contract

This contract delineates the professional engagement between a therapist and a client, outlining clear boundaries essential for ensuring the safety and efficacy of the therapeutic process. It is designed to uphold the well-being of both the client and the therapist, and the integrity of clinical practice. All activities under this agreement fall under the jurisdiction of the laws governing the United Kingdom

Confidentiality

I maintain strict confidentiality with all clients as an essential foundation for fostering trust and facilitating productive work. However, it's important to note that confidentiality may be breached under specific circumstances: in compliance with a court or law enforcement order concerning information related to preparations for terrorist acts, money laundering, or cases of child abuse or neglect. Furthermore, confidentiality may be waived if, in my professional judgment, your condition poses a threat to your own life or health, or to the well-being of others.

Conditions

The following conditions are necessary for successful work:

1. The client must disclose any previously diagnosed or current mental disorders and/or past or present addictions to the therapist.
2. The client and the therapist undertake not to come to the meeting under the influence of substances that change consciousness, not prescribed by doctors.
3. Each of the parties has the right to end the work and terminate this contract. It is important to tell about such intentions in advance.
4. It is important that the client takes care of own safety and health during the work with the psychotherapist.
5. In the absence of the client at two or more meetings without prior notice (or with a break in work for more than 3 months), the professional relationship between the client and the therapist and the validity of this contract are automatically terminated.
6. It is important that the client and the psychotherapist discuss possible contacts outside the sessions when possible (including mutual friends and events attendance).

Payments and cancellations

The fee for each session is _____. An invoice will be provided post-session, with payment expected within 5 working days. I reserve the right to adjust session fees (typically not more than once annually), with a commitment to notify clients at least one month in advance of any changes. Clients may cancel or reschedule appointments without incurring fees up to 24 hours before the scheduled meeting. For sessions cancelled or rescheduled within this window, the client agrees to pay in full.



The frequency of meetings and breaks

By prior arrangement, meetings will be held_____.

Each session is 50 minutes long.

I may plan breaks in our sessions due to my annual leave or when attending continuous professional development events. Typically, I take approximately 6 weeks of annual leave, often in longer periods during the summer months. I will provide advance notice of at least one week before any scheduled breaks.

Clients are entitled to scheduled breaks or missed sessions, provided they give advance notice, up to a maximum of 6 sessions annually. Should you wish to schedule additional breaks beyond this allowance, I may request payment for missed sessions. Alternatively, continuing therapy during your vacation or rescheduling sessions for available dates could be beneficial options.

I don't work on the UK bank holidays unless we specifically agreed about the date.

Supervision and recording

I engage in a regular supervision and other professional development events. I may show recorded sessions and therapy notes or discuss clients for the purpose of professional development, learning, or illustrating my work. Rest assured, when discussing cases, I uphold strict confidentiality and refrain from disclosing any personal details to protect your privacy.

Force Majeure

Both parties shall be exempt from liability for partial or complete failure to fulfill obligations under this Contract if such failure is caused by force majeure. Examples of such events include natural disasters (fires, storms, floods, pandemics), governmental or societal actions (wars, invasions, civil unrest, labor strikes), and infrastructure failures (power shortages). It's important to note that illnesses or vacations do not qualify as force majeure events.

In any such event, both parties are required to promptly notify each other of these circumstances.

Contact details

Both the client and the therapist commit to providing accurate information about themselves, including relevant contact details, upon signing this agreement. Furthermore, both parties agree to promptly report any changes to this information throughout the duration of this agreement.

Client:

Full name

Email address

Phone number

Emergency contact phone number (next of kin)

Date

Signature

Therapist: Hanna Konoplianyk

Email address:

ganna.konoplianyk@gmail.com

Phone number:

+447480558223

Date

Signature