



Sandra Wines

COUNSELLING

[Counselling Contract with Sandra Wines](#)

07443417932

This is our Counselling Agreement. I ask that you please take some time to read it carefully as it will help to assist in our work together. If there is anything that you are not sure about or anything you feel I may have missed please let me know.

Services:

I offer Face to face counselling for adults/young people 12 yrs + also the following services are available:

Online Counselling for adults/young people 12 yrs +.

This includes:

Telephone

Videoconferencing or text chat via VSee. Webcam options to turn camera off or on (or Audio).

Email

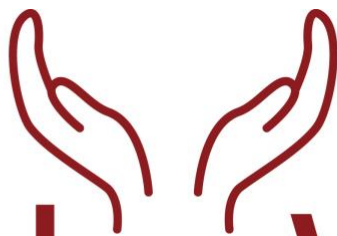
Please see separate technology information for sending and retrieving files.

We will arrange an agreed number of sessions, which will be reviewed regularly, sessions are 50 mins.

You as the client understand that face to face counselling and online therapy are different experiences. You may want to consider the following when making your choice of service. These differences include the lack of visual and audio cues and the lack of immediacy in responding. How comfortable you feel as the client with using differing technologies. We will discuss on our first session confidential data, an assessment of your needs and agreement of this contract.

Cancellations and or late emails:

On the basis that you give at least 24hrs notice prior to the time of your session there will be an alternative appointment offered. If there is a total of 2 missed appointment consecutively, I will assume these are no longer needed. If I do not hear from you within 48hrs (unless we agree otherwise) I shall send a brief prompt. If I do not hear from you again



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within 24hrs I will assume you feel that our counselling work is complete for now and that you do not wish to continue.

Professional Code of Ethics:

As a Member of the British Association for Counselling (BACP), National Counselling Society (NSC) and Association of Counselling Online Therapy (ACTO) I abide by their Code of Ethics and Principles of Practice. Details of these can be found on the BACP, NCS & ACTO website.

Payment:

Please read below:

Fee: £40 to be paid on the day.

Please can you ensure your payment is paid before the session.

Please email for account details.

Confidentiality and information sharing:

It may be necessary to break client confidentiality if it is felt that you or someone else could be a risk of serious harm. I will speak to you about how best I can support you in this unless to do so would put you or someone else at greater risk.

We will discuss this further and a consent form which I will ask you to sign to confirm you agree this being shared.

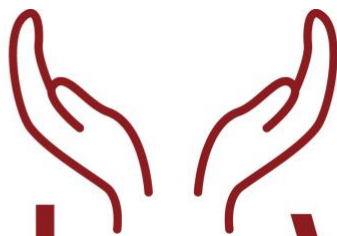
There are times when I can share information without your consent this is in the interest of your and the public safety such as the Terrorism Act, The Children Act, Proceeds of Crime and Road Traffic Act

I will discuss our work with a supervisor who will check I am working to the expected standards, your name, age and details of difficulties you are experiencing are discussed, no other information unless this is discussed with you in session as and when the need arises to break confidentiality.

Privacy:

My devices are password protected and virus and software are regularly updated. I would advise you to do the same.

I use a platform service called VSee for any video calls by downloading and adding my email address will access this. This comes with a business associate agreement in line with Privacy Rule of the Health Insurance Portability and Accountability Act.



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Technology: Please see separate additional information and sending and retrieving of files.

If the session is interrupted by a technology fault, we will refer to a second device whether this be from videoconferencing to telephone.

Please ensure all devices are fully charged.

In the event I deem the setting to not be sufficiently private, the session will be terminated and a fee will apply. Recording sessions without the explicit consent of both therapist and the client/s will be considered as breach of this service agreement.

[Circumstances that are unforeseen:](#)

Other considerations:

If I am unable to support you with your difficulties then I will do my best to support you access other help.

In the event of my death or sudden illness if I was unable to practice, I have a therapeutic executor and you will be contacted by them.

I ask for you to be in a confidential space when it is quiet, where you will not be disturbed.

If you are experiencing a crisis or having suicidal or homicidal thoughts. As stated previously, if a life-threatening crisis should occur, you agree to contact a crisis helpline, call 999 or go to a hospital A&E department. Alternatively, you can contact Samaritans online or by

telephone 08457909090. Also, befrienders for outside the UK. <https://www.befrienders.org/>

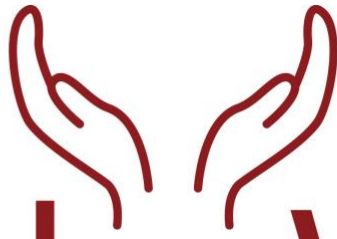
Note taking and general data protection regulations.

Note taking:

I will make notes short factual notes during the counselling period which will be encrypted and stored securely on a USB this will then be stored appropriately, you can ask for your notes at any time please apply for this in writing and email.

IMPORTANT NOTICE

My professional indemnity insurance and professional bodies cover me to work remotely and within the UK.



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Please see separate information regarding the privacy policy

I am 18 years of age or over, I have read the above contract for online counselling with Sandra Wines and agree to its terms:

Date..... Name.....

Consent to contract.....

Young people under 18 yrs in regards to online counselling, you are agreeing to the use of a third-party internet use (be this your parent(s)/guardian(s) internet. This will mean parental consent needs to be sought for us to work online together.

Please see my website for Policies regarding safeguarding young people in the UK and my separate document for Online Safety advice and tips for parents of young people 12yrs and over.

Date..... Name.....

Parental consent.....

I have read and understood the consent to contract: Signature.....

Contact details.....

Emergency contact details.....

GP details.....