

Select Healthy Mind Psychotherapy

WINDSOR PRACTICE

CHILD/ADOLESCENT THERAPY



Select Healthy Mind
 Psychotherapy & Counselling
 for Adults, Children & Adolescents

website. selecthealthymind.co.uk
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 Office email selecthealthymind@gmail.com (admin)

Select Healthy Mind Ltd
 59-60 Thames St,
 Windsor,
 Berkshire,
 SL4 1TX

**Please complete the form fields requested and then print to pdf to flatten and save before emailing back to us.*

Please complete all sections below and sign and return to us <u>prior to initial assessment/first session:</u> (you can request a pdf copy of your signed document via email at no charge)					
Child's Name: (IN BLOCK CAPITALS)		Child/Adolescent date of birth:			
Mother's Name: (IN BLOCK CAPITALS)		Father's Name: (IN BLOCK CAPITALS)			
Mother's Signature:		Father's Signature:			
*(Please note: in order to treat minor(s) under the age of 16 both parents/guardians if necessary must give permission.)			Today's date:		
Child's Home Address (IN BLOCK CAPITALS)	street		Parental mobile contact number (please state mum or dad)		
	town/city				
	postcode		Adolescent mobile no. for appt. reminders if old enough		
Parental email address (in lowercase please)					
Child/Adolescent email address for therapy work (if old enough)					
Please state your preferred method of contact: (please tick the appropriate box)			telephone		or email
Child's G.P. (Name/Address) (IN BLOCK CAPITALS)	Practice name		Please list any medication/prescription drugs currently taking and/or medical conditions that may affect your treatment:		
	street				
	town/city				
	postcode				
G.P./Surgery telephone number (if known)					
Name of School/College attending				Current Year Grade	

Total Fee agreed per session (payable after each session – Private fee)¹

£ **90.00**¹ per session

Or Health Ins. company & authorisation number for treatment if provided ²

Insurer name²:

authorisation no:

To be signed by client on event of early discharge:

Discharge date:
(on completion)

Terms and Conditions of Therapy

Select's therapists are bound by the Code of Ethics, Practice & Standards of industry recognised disciplinary bodies: Barbara Paczkowska is a fully accredited member of **British Association of Behavioural and Cognitive Psychotherapists (BABCP)** (babcp.com/Files/About/conduct-ethics.pdf) and **EMDR Europe** (emdr-europe.org/wp-content/uploads/2017/12/EMDR-Europe-Code-of-Ethics-October-2010.pdf)



The British
Psychological Society

Confidentiality will be maintained within strict accordance with these codes and subject to current GDPR requirements and the Data Protection Act (2018).

Circumstances where this may be breached include when I consider there is a risk you may harm yourself or others; or in a situation where we may be placed in a position of breaking the law or where withholding such information means we breach the aforementioned codes of ethics and practice. Disclosure of information purporting to potential acts of terrorism, indicative of any vulnerable adult or child protection issues or drug trafficking would mean information being passed onto the relevant authority without delay. Due consideration should be exercised before disclosing anything of a previously unreported criminal nature, as we are obligated by law to contact the relevant authorities.

Subject to us being satisfied that your problem is one that can be alleviated by Counselling/Psychotherapy/CBT/EMDR, we agree to offer you personal therapy. This is our commitment to you

You (as my client) accept to abide by the following Therapy Contract Terms:

- To attend on time for any pre-booked appointment.
- ¹Payment must be made at the end of each session. cash, credit/debit card, cheque or BACS payment are all accepted.

Please note for BACS (Bank Transfer payment) Please make payment to Select Healthy Mind Limited's bank account as follows:

account name:	SELECT HEALTHY MIND LTD
account no.:	00686360
sort code:	20-45-45
your payment reference:	YOUR SURNAME (and/or invoice no.)

- In the event that a Private Health Care plan is used to fund treatment, therapy can commence when approval in writing has been received from the **company² nominated or you are able to provide the relevant authorisation code and/or proof of cover.**
- Frequency and times of sessions will be discussed and agreed upon and will normally be weekly or fortnightly. The normal duration of each session is 50 mins/55 mins, although we reserve the right to amend that time for therapeutic reasons.
- If for any reason you are late for a session, I will try my best to see you for the duration of the remainder but will be unable to work beyond the allotted time as this will disrupt the clinic for other patients who may be kept waiting.
- **Please give at least 48 hours* prior notice to cancel any appointments that you are unable to attend in order not to avoid a charge.**
- **Cancellations within 48 hours* of will be charged at 50% of the agreed rate. Cancellations within 24 hours* of must be paid in full as it leaves your therapist unable to offer the time slot to another client.**
**It is understood that sometimes sudden events, such as emergencies, happen, that may make it necessary for patients to cancel their appointment last minute or fail to attend and are unable to provide notification. On these occasions it is at the therapist's discretion if a fee will be charged. In general however, if you fail to give less than 24/48 hours' notice of your intention to cancel or postpone an agreed therapy session or if there is a repeat pattern of cancellations/DNA's I reserve the right to charge in full for that session.*
- As a client you present yourself fit to engage in a psychological therapy by not being intoxicated or affected by drugs/medication.
- Select Healthy Mind operate zero tolerance of all forms of abuse; therapists and/or clients reserve the right to end treatment in the event of any abusive behaviour or other exceptional circumstances.
- Notes may be taken during and after each session, which will be kept in strict accordance with GDPR and the Data Protection Act (2018). These notes will be securely stored and Select Healthy Mind Ltd is ICO certificated.

Please note that any correspondence, documents, letters or emails requested and agreed to be written for use outside of regular therapy sessions need to be charged for - with an administration fee starting at £50 but agreed mutually between the client and your therapist dependant on nature and content required.

A PDF COPY OF THIS CONTRACT CAN BE PROVIDED BY REQUEST VIA EMAIL AT NO CHARGE

