**Counselling Agreement**

**An agreement to receive counselling from Mark Roussel. Mark Roussel Counselling 15 Barron Parade , Joondalup 6027. 0478 625 473. mroussel@iint.net.au**

**Education: 1997-1999 B.TH., 2003-2004 M Counselling**

**Employment: 2004 to current. Generalist Counsellor working in the area of couples, families, individuals**.

**Counselling methodology.** As I focus on you goals that we have agreed on, I will use various methods of counselling accepted within counselling circles such as existential psychotherapy, narrative therapy, solution focussed and other behavioural techniques. Please ask me about my methods of counselling if you have any questions.

**Fee Structure.**  A fixed fee of …….. per 50 minute session is payable prior to the beginning of each session. This can be paid in cash or by using my EFTPOS device. A cancellation fee of $20 will apply if giving less than 24 hours’ notice.

**Registration.**  I am registered with the Psychotherapy and Counselling Federation of Australia (PACFA). Visit this web site if you would like to clarify ethical standards and counselling practice.

**Confidentiality.** It is my goal to up hold the strictest ethical standards of confidentiality. There are exceptions to confidentiality. Examples of such cases include suicide risk, threats of violence where there may be immediate risk of safety, and child abuse and neglect. As we work together I may restate this central ethical principle around confidentiality and risk.

**Supervision.** I discuss cases of counselling with my supervisor, in order to gain the best outcomes for clients and for me to gain greater understanding in my practice. During supervision your identity remains hidden. Your signature below will grant me permission to speak about your case.

There may also be times where with your permission I video/audio record our counselling sessions in order to assist me with my ongoing professional practice.

I have read and understand this information and agree to engage in counselling with Mark.

**Client signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Client signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**