

## **Ongoing Group Counselling Agreement**

Welcome to Life Linc Nelson. Please read through the following Agreement. You will be asked to sign a copy before your first group session. We will offer you a place in one of our one of ongoing groups as soon as a place becomes available.

**Commitment**: You undertake to join in group counselling. The effectiveness of the group depends upon your regular attendance – individual progress is greatly enhanced by regular commitment. This is an ongoing group, so we request an initial commitment of 6 weeks, with the hope that you will want to continue.

**Confidentiality:** Everything discussed in a counselling group is confidential. All information shared in the group by other members is to be respected and not shared outside the group. If the counsellor believes that your safety or the safety of others is at risk, they will discuss this with the relevant person before taking action or talking to any third parties. (see **Supervision** below).

**Person Safety:** Group members undertake not to cause physical harm to themselves or to any other members of the group, at all times.

**Supervision:** Your counsellor receives confidential supervision to ensure their clinical work is safe and of a high standard. Some issues that arise in group counselling may be discussed.

**Missed Sessions:** If you are unable to attend a session, please notify your counsellor, by text or phone on ...... as early as possible. Missed sessions are not refunded.

**Outcomes of Counselling:** The outcomes resulting from counselling may not be what you expected – you might come to decisions/conclusions you have never thought of before. Life Linc Nelson and your counsellor in particular, will not be held responsible for any decisions/conclusions that you come to as a result of counselling.

**Payments:** Your place in the group is conditional upon Life Linc receiving your full payment in advance of the group sessions.

**Complaints:** If you have any issues with this service, we recommend that you discuss this with your Counsellor. If you do not feel this is appropriate, please contact the Clinical Manager on 03 548 2400 to discuss your complaint. If you would like to make a formal complaint, the Clinical Manager will provide you with the formal complaint procedure.

Consent:	(Client Name) agree to this Counselling Agreement
I will pay \$ 120 at the beginning of each group block by the following method:	
Internet banking 03 1355 0826674 00 ref: su	rname & start date
Cash or cheque to the counsellor at the first set	ssion.
Client Signature:	Date:
Counsellor name:	
Counsellor Signature:	Date: