

Julia Samworth

Feeling Free, Being Me Psychotherapy & Ecotherapy

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ECOTHERAPY – ADDITIONAL COUNSELLING TERMS

You must be over 18 years old (at the time sessions start)

These additional terms apply alongside my In-Person Counselling Terms and do not replace them.

Ecotherapy can offer therapeutic and wellbeing benefits through working outdoors. Initial counselling sessions (following assessment) will take place indoors or online to establish therapeutic aims and consider suitability, weather, time, and health factors.

By signing below, you agree to the following:

- Ecotherapy involves working outdoors and carries inherent environmental risks. I will take reasonable care; however, you remain responsible for your own safety and wellbeing during sessions.
- You are responsible for bringing any medication you may need (e.g. inhaler, EpiPen, sunscreen) and for informing me of any relevant health issues before our first outdoor session.
- You agree to dress appropriately for weather conditions and terrain and to bring your own drink.
- Please let me know of any specific considerations (e.g. allergies, accessibility needs, fear of dogs).
- If we encounter someone known to either of us, we will follow the approach agreed between us; I will prioritise confidentiality and offer no more than a brief acknowledgement.
- Sessions may involve walking, pausing, sitting, and engaging with the environment at a pace appropriate to you, while maintaining therapeutic focus.
- Following an initial outdoor session, we will review whether you wish to continue outdoors or work indoors or online. I may alter or relocate sessions if weather or environmental conditions present a safety risk. I will contact you beforehand to discuss alterations to the session.

If I am seriously concerned about your safety and cannot establish your wellbeing during an outdoor session, I may use your emergency contact or GP details in line with my confidentiality policy.

Your personal data will be processed in accordance with the Privacy and Confidentiality section of my main counselling contract and relevant data protection legislation.

This agreement is fully understood and agreed upon and is signed as it stands by:

Client Name.....

Client SignatureDate DD/MM/YYYY.....