

# **Working in private practice within the counselling professions**

**Good Practice in Action 004**  
**Commonly Asked Questions**

Updated September 2020

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Good Practice in Action Commonly Asked Questions Resource 004:  
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## Context

This resource is one of a suite of prepared by BACP to enable members to engage with the current BACP *Ethical Framework for the Counselling Professions* (BACP, 2018).

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## Using Commonly Asked Questions resources

BACP members have a contractual commitment to work in accordance with the *Ethical Framework for the Counselling Professions*. The *Commonly Asked Questions* resources are not contractually binding on members, but are intended to support practitioners by providing general information on principles and policy applicable at the time of publication, in the context of the core ethical principles, values and personal moral qualities of BACP.

Specific issues in practice will vary depending on clients, particular models of working, the context of the work and the kind of therapeutic intervention provided. As specific issues arising from work with clients are often complex, BACP always recommends discussion of practice dilemmas with a supervisor and/or consulting a suitably qualified and experienced legal or other relevant practitioner.

In this resource, the word 'therapist' is used to mean specifically counsellors and psychotherapists and 'therapy' to mean specifically counselling and psychotherapy.

The terms 'practitioner' and 'counselling related services' are used generically in a wider sense, to include the practice of counselling, psychotherapy, coaching and pastoral care.

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# 1 Introduction

This resource focuses on key legal, ethical, safety and business requirements for practitioners already working in or contemplating working in private practice in the context of the counselling professions. Neither the list of questions nor their answers are intended to be exhaustive but, hopefully, it will assist you in addressing some of the more important issues arising from working independently as a practitioner.

This guidance focuses on the provision of therapy services, and not clinical supervision, although some of the points are relevant to both. Please refer to BACP's GPiA resources on supervision for more information on supervision.

More useful information and support for private practitioners can be found in the Private practice toolkit; see [www.bacp.co.uk/bacp-divisions/bacp-private-practice/private-practice-toolkit](http://www.bacp.co.uk/bacp-divisions/bacp-private-practice/private-practice-toolkit) and the Ethics Hub; see [www.bacp.co.uk/events-and-resources/ethics-and-standards/ethics-hub](http://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethics-hub).

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# 2 What is private practice?

Private practice is when a practitioner is self-employed and, for a fee, offers therapeutic services directly to clients either through self-referral or via a third party such as an Employee Assistance Programme (EAP) provider and insurance companies. Private practice enables clients and therapists to decide when, where, with whom and for how long they have therapy. It is usually offered at a suitable venue, which could be situated within a practitioner's home, in rented premises or online. Private practitioners can be full or part-time self-employed and often develop a 'portfolio' income that might include activities such as private client work, statutory or charitable sector sessional counselling, clinical supervision of fellow therapists, and the delivery of training courses, workshops and lectures.

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## 3 Qualifications

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### 3.1 What qualifications and experience do I need for private practice?

BACP members are committed to working to professional standards with the *Ethical Framework for the Counselling Professions* (BACP 2018) stating that: 'we must be competent to deliver the services being offered at least to fundamental standards or better' (Good practice, point 13). Before going into private practice, practitioners therefore need to carefully consider, in consultation with their supervisor, whether they have both an optimum level of training and sufficient experience (particularly in the range and complexity of issues that can be brought by clients) to enable them to undertake the considerable challenge of working independently, running a business, and developing suitable policies to keep both themselves, and their clients, safe. Private practice is not appropriate for trainees on core qualification courses to undertake placements. Placement hours gained in this way are not accepted as placement hours on BACP Accredited training courses. Trainees can find out more about placements within Good Practice in Action 090 *Counselling placements – a trainee's guide*.

Registered membership of BACP represents the minimum level of training, supervision, continuing professional development and experience that practitioners should possess. To become registered, you should have passed a BACP-accredited course or completed the Certificate of Proficiency (BACP, 2019). Employers and agencies who refer clients to practitioners (such as EAP providers), and insurance companies offering cover to private practitioners, often go beyond membership of the BACP register, and see BACP accreditation as a benchmark of professional competence. Further information on accreditation can be found at: [www.bacp.co.uk/accreditation](http://www.bacp.co.uk/accreditation).

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## 4 Challenges

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### 4.1 What are the challenges and benefits of working for myself?

Being self-employed can be very rewarding, enabling the practitioner to develop a portfolio of work, to adopt flexible working hours, and if the setting is safe and appropriate, to work from home. It also enables the practitioner, once established, to specialise in a specific field of work and/or to concentrate on a preferred modality or therapeutic approach.

As discussed in question 3, practitioners contemplating private practice should be clear as to their competence to work in this way and should also be clear about their ability to earn enough to meet immediate financial commitments and ongoing lifestyle aspirations. Generating an income from private practice can be erratic, particularly when first setting up in business and finding clients. Private practice doesn't offer some of the benefits of salaried jobs, such as a pension scheme, paid sick leave or paid annual leave.

Proactive networking and marketing, backed up by an informative and professional website, should be extremely helpful. Technology is playing an increasing role in most people's lives and, indeed, gives the practitioner innovative opportunities to offer services, which include telephone, email, text, social media, video-conferencing, and online counselling.

The practitioner therefore needs to understand how to keep their clients' and their own information secure and private. See *Good Practice in Action 040 Commonly Asked Questions about social media* and *Good Practice in Action 047 Fact Sheet Working online* for more information.

Private practice can be a lonely occupation, especially when working from home. Practitioners will need to develop their own strategies and policies for dealing with ethical or administrative dilemmas without the peer or organisational support generally provided in a salaried practitioner role. Resilience, resourcefulness and self-motivation are important, and effective supervision is essential (see question 8 for more information about supervision).

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## 5 What should clients expect from me?

Client wellbeing and safety are paramount. BACP's *Ethical Framework for the Counselling Professions* (BACP 2018) states that we must as members 'put clients first' (Commitment 1) and that the practitioner must be trustworthy, have respect for the client's right to be self-governing, be committed to promoting client wellbeing, to avoiding harm, and be fair and impartial to all clients.

Practitioners are expected to make clients their primary concern while working with them, and to work to professional standards by practising within the bounds of individual professional competence and by keeping skills and knowledge up to date. The *Ethical Framework for the Counselling Professions* makes clear that we are committed to working to professional standards and that 'we must be competent to deliver the services being offered to at least fundamental professional standards or better...' (Good Practice, point 13). Our commitment to clients is defined further in the *Ethical Framework* with commitments to building an appropriate relationship (Commitment 4), maintaining integrity (Commitment 5), and demonstrating accountability and candour (Commitment 6).

Clients will expect to engage with their practitioner in surroundings that are safe and conducive to the therapeutic process, and to be actively involved in reviewing progress on a regular basis. This also applies to therapy conducted virtually. GPiA 047 *Working online* is a useful adjunct to this resource.

The therapeutic relationship should last no longer than necessary, and clients must retain the right to end whenever they feel it right or necessary. In accordance with the expectations of equality, diversity and inclusion (EDI), the practitioner should – within the bounds of competence and field of work – be available to a wide range of clients.

See Good Practice in Action 062 Commonly Asked Questions and 063 Clinical Reflections for Practice *Equality, diversity and inclusion*. (For a summary of key elements of the Equality Act 2010, see: [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/85017/individual-rights1.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/85017/individual-rights1.pdf)).

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## 6 Must I contract with my clients?

**Yes.** BACP's *Ethical Framework for the Counselling Professions* emphasises the building of an appropriate relationship and states that:

'we will usually provide clients with the information they ought to know in advance in order to make an informed decision about the services they want to receive and how these services will be delivered and how information or data about them will be protected...' (Good Practice, point 30)

and that:

'we will give careful consideration to how we reach agreement with clients and contract with them about the terms on which our services will be provided' (Good practice, point 32).

Although there is neither a legal obligation nor a BACP requirement to issue a formal written contract to clients, it is important that we provide clients '...with a record or easy access to a record of what has been agreed' (Good practice, point 32d). This agreement needs to be in language and a format that the client can easily understand and needs to include the client's express permission to keep records.

See GDPR FAQ at: [www.bacp.co.uk/about-us/contact-us/gdpr](http://www.bacp.co.uk/about-us/contact-us/gdpr) for data protection information, and Good Practice in Action 055 Fact Sheet and 039 Commonly Asked Questions *Making the contract in the counselling professions* for more information about contracting.

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## 7 How do I keep myself, and my clients, safe?

Boundaries are essential and can be ethical, administrative or an overlap of both, and can help to keep practitioners and clients safe. For example, contact between client and practitioner between sessions should ideally be limited to postponing or re-arranging an appointment. Where possible, clients should only have access to practitioners' professional contact details (email, telephone number), especially in the digital age where data from email address and telephone contacts are often automatically synched with social media profiles.

The *Ethical Framework* states that we will 'establish and maintain appropriate professional and personal boundaries in our relationships with clients by ensuring that these boundaries are consistent with the aims of working together and beneficial to the client' (Good practice, point 33a) and 'any dual or multiple relationships will be avoided where the risks of harm to the client outweigh any benefits to the client' (Good practice, point 33b). Friendship can potentially be detrimental to the client and practitioner. 'Befriending' clients online or on social media can also compromise safety. GPiA 077 *Dual relationships within the counselling professions* provides further information.

With regard to sexualised behaviour towards clients and sexual relationships with them, the *Ethical Framework for the Counselling Professions*, Good practice, points 34-37 state 'we will not have sexual relationships with or behave sexually towards our clients...' nor people close to them, nor former clients. The *Ethical Framework* also requires practitioners not to sexually exploit or abuse clients.

A private practitioner needs to give serious consideration to matters of personal safety, or the safety of any other persons, especially when working at home. It is important for practitioners to develop their own guidelines and procedures to keep them safe. This could be, for example, checks being made periodically by a third party or by having a process by which urgent assistance can be sought (see GPiA 106 *Safe working in the context of the counselling professions*).

The Suzy Lamplugh Trust also offers useful guidance and information for lone workers: [www.suzylamplugh.org/Pages/Category/personal-safety-and-lone-working](http://www.suzylamplugh.org/Pages/Category/personal-safety-and-lone-working).

An initial assessment session (some practitioners offer a free first half-hour or longer) is advisable so that the practitioner and the potential client can consider how they may be able to work together. This initial assessment should include an assessment of the risk of harm to the client, therapist, other individuals or property.

Consideration should be given to how clinically risky situations, such as work with suicidal clients or those who self-harm, will be managed in lone-working. Robust risk management procedures should be in place for the safety of the client and therapist. For online or telephone counselling, any risk assessment(s) should factor in the absence of in-person/face-to-face contact with the client.

Unlike in salaried jobs, where practitioners are covered by organisational safeguarding policies, private therapists should be familiar with their legal, statutory and ethical duty of care to safeguard clients. This is especially important if offering therapy services to victims of abuse or violence.

See:

*GPiA 030 Safeguarding vulnerable adults within the counselling professions in England and Wales*

*GPaCP 002 Safeguarding vulnerable adults in Scotland*

*GPiA 031 Safeguarding children and young people within the counselling professions in England and Wales.*

You may also find the following useful when thinking about safety: *GPiA 115 Working with unhealthy dependency within the counselling professions* (in press), *GPiA 117 Practitioner self-disclosure as it applies to the counselling professions* (in press) and *GPiA 119 Managing attraction within the counselling professions* (in press).

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## 8 How much supervision am I required to have?

Supervision is seen as 'essential to how practitioners sustain good practice' *Ethical Framework for the Counselling Professions*, Good practice, point 60). The amount of supervision needed will be dependent on the setting in which the practitioner works, their level of experience and caseload. Accredited counsellors are committed to having 1.5 hours per month as a minimum.

It is important that clients are made aware that their case may be taken, within the bounds of a confidentiality agreement, to a professional supervisor so as to maintain the quality of service they are receiving and to ensure the development and good practice of the practitioner. Further *Good Practice in Action* resources in respect of supervision are:

008 Commonly Asked Questions: *How to choose a supervisor (practitioners)*

009 Fact Sheet: *How to choose a supervisor for your service*

010: Fact Sheet: *Monitoring the supervisory relationship from the supervisor's perspective*

011 Commonly Asked Questions: *Monitoring the supervisory relationship from the supervisee's perspective*

032 Legal Resource: *Supervision within the counselling professions in England, Northern Ireland and Wales*

084 Clinical Reflections for Practice: *Ethical mindfulness in supervision and training*

093 Fact Sheet: *Using the Ethical Framework in supervision (in press).*

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## 9 Concerns

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### 9.1 What must I do if a client voices concern about the therapy he or she is receiving from me?

The *Ethical Framework for the Counselling Professions* commits members to a duty of candour, which means that we will be diligent in '...being open and honest about anything going wrong and promptly inform our clients of anything in our work that places clients at risk of harm, or has caused them harm, whether or not the client(s) affected are aware of what has occurred by:

- a. *taking immediate action to prevent or limit any harm*
- b. *repairing any harm caused, so far as possible*
- c. *offering an apology when this is appropriate*
- d. *notifying and discussing with our supervisor and/or manager what has occurred*
- e. *investigating and take action to avoid whatever has gone wrong being repeated*

(Good Practice, point 52).

It is important that the practitioner listens carefully to a client's concerns and acts upon them as required. If it is an issue arising from therapeutic modality or a sense of disconnectedness with the practitioner or process, then the practitioner should discuss remedial action or, if necessary, signpost the client to ways in which another therapist can be found.

Clients should be informed at the start of therapy, about their rights to raise concerns or make a complaint against a practitioner, as well as the appropriate channels for doing so. If a client has a complaint or grievance about their therapist as a practitioner, then they should be told about BACP's Professional Conduct Procedure, which can be found and downloaded at: [www.bacp.co.uk/about-us/protecting-the-public/professional-conduct/professional-conduct-complaints-procedure](http://www.bacp.co.uk/about-us/protecting-the-public/professional-conduct/professional-conduct-complaints-procedure) and also the 'Ask Kathleen service' where clients can discuss any concerns they have which can be accessed at: [www.bacp.co.uk/about-therapy/ask-kathleen](http://www.bacp.co.uk/about-therapy/ask-kathleen).

It is the responsibility of all BACP members to fully understand the Professional Conduct Procedure and its associated protocols.

It is also important that practitioners discuss any possible complaint with their supervisor and notify their insurance company.

More information on accountability and candour can be found in GPiA 073 and 113.

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## 10 Payment

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### 10.1 What should I charge private clients, and how should clients pay?

Brown (2019) discusses various aspects of setting a fee for services. A practitioner's fee will probably, after some local research, reflect the 'going rate' in any given geographic area but – in acknowledging the long-haul to qualification and beyond – should also reflect a practitioner's individual experience and expertise.

Practitioners should consider their business overheads when setting fees, and also if they wish to offer clients a sliding fee-scale or charge for missed appointments. Clear contracting around fees is a must.

BACP, in July 2015, surveyed members of the BACP Private Practice division and, out of the 427 respondents, 49% charged between £36–45 per session for therapy, with 27% charging more than that. As Martin Hogg points out, 'many counsellors charge more for corporate work, for work in private medical centres, or where they provide niche services' (Hogg, 2015).

*Therapy Today* has published various other articles on client fees; see [www.bacp.co.uk/bacp-journals/therapy-today/archive](http://www.bacp.co.uk/bacp-journals/therapy-today/archive). See also GPiA 118 *Managing money within the counselling professions* (in press).

Most private therapists increase their fees at regular intervals, to account for inflation. Any planned and regular increases in fees should, as far as possible, be part of the counselling contract, and clients given sufficient notice of these.

Chunn (2017) looks at different ways of paying for therapy. There are several ways for clients to pay, and as more therapists conduct their business online, digital and cashless methods of payment are gaining popularity. Research and experience should lead to what works best for both the practitioner and their clients. Payment methods might include cash, cheque, bank transfer, smart phone apps facilitating bank payments, debit or credit cards, and card payments using an online payment tool such as PayPal. Note that card payments will often incur a fee to the practitioner. If using a business bank account, be aware that charges can be made for individual transactions in and out of that account, so check with your bank. Some practitioners accept payments on a 'per session' basis, whereas others may charge for a block of sessions at once. Payments can also be made before or after the session, based on preference.

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## 11 Employment Assistance Programmes

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### 11.1 Is Employee Assistance Programme (EAP) work a useful option?

EAP work can be a useful option. An EAP helps businesses and employers to support employees who have personal or work-related issues that are impacting on productivity. Support to an employee can comprise face-to-face or telephone counselling, usually short-term work of perhaps four to eight sessions – and signposting to sources of information and advice, and other EAP services such as workplace mediation.

Most EAP providers in the UK Employee Assistance Professionals Association (EAPA) require their network of counsellors to be BACP accredited or equivalent, and familiar with the workplace context. You can find more information about EAPA on their website: [www.eapa.org.uk](http://www.eapa.org.uk). Documentation, record keeping and other protocols will differ with each provider, as will the number of sessions offered to clients. Fees to practitioners tend to follow regional variations. Further information about EAP providers and workplace therapy can be found on BACP Workplace website see: [www.bacp.co.uk/bacp-divisions/bacp-workplace](http://www.bacp.co.uk/bacp-divisions/bacp-workplace).

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## 12 Business overheads

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### 12.1 What business overheads might there be, and is it better to work from home or elsewhere?

At a minimum, business overheads for practitioners in private practice will include: public and professional indemnity insurances; professional membership fees; and supervision costs. Other costs may include: room hire; accountancy fees; equipment such as telephone, computer, secure filing cabinet, stationery, credit card reader; marketing; website design and maintenance; motoring and travel; CPD and training courses.

Annual costs can be substantial and Rye (2011) has compiled a table illustrating the average number of weekly counselling sessions at different rates needed to generate a desired annual income after deduction of overheads. Rye notes that, 'we need to have an idea of what the costs of running our business are [and] how much we are paying out in order to be a counsellor' (Rye, 2011).

Renting premises or working from home is a decision based on personal preference, individual circumstance, and being able to offer a client an appropriate consulting room.

The advantages of working from home can include lower overheads, flexibility in use of time between appointments, and being able to offset elements of household bills against taxable earnings, while disadvantages might include intrusiveness into home and family life, unexpected disturbances from family members, visitors or pets, and the need for a dedicated clutter-free counselling room. If considering working from home, it is important to check the provisions of home and contents' insurance policies to ensure that you are still covered, and to check whether there is an infringement of any mortgage or tenancy agreement.

Some of the advantages of renting a room might include informal support from others working in the same premises, a tidy and ready-furnished room for clients, and a clear separation of work from home-life. Disadvantages might include greater cost, having to pay rental for a whole or half day regardless of number of clients, and being tied to longer-term tenancy agreements.

Increasingly, for practitioners delivering therapy virtually, online or by telephone, the digital realm should be viewed as the 'space' in which therapy is conducted. The benefits this offers include flexibility, and ease of access if clients live far away or are unable to travel. The disadvantages include loss of in-person contact, and long hours spent at a desk in front of a screen. It is the practitioner's duty to ensure that virtual therapy is supported by an appropriate environment where requirements, such as confidentiality, are met and that there is a robust contract in place.

Working online requires practitioners to be aware of specific legislation and issues. See GPiA 047 *Working online* for more information.

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## 13 Self-employment and tax

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### 13.1 How do I register as self-employed and what are my obligations as regards payment of income tax?

Consult the HM Revenue and Customs (HMRC) website and register as self-employed to ensure payment of the correct Income Tax and National Insurance.

As a 'sole trader' (there are options too to become a partner in a business partnership or to set up a limited company), a practitioner is required to keep records of business income and outgoings and to pay tax each year.

While engaging the services of an accountant will add to overheads, the fee is itself deductible against taxable earnings and many practitioners find that the expertise, guidance and absence of 'hassle' when submitting an annual tax-return more than offset the outlay. If going down this route, shop around because fees will vary. The HMRC website gives details, among many topics, of tax-deductible business expenses.

Business development advice is often available from a variety of sources including borough councils, banks and local business clubs.

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## 14 Must I have insurance?

**Yes.** The *Ethical Framework for the Counselling Professions* commits members to being '...covered by adequate insurance when providing services directly or indirectly to the public' (Good practice, point 19). Professional liability insurance is essential, comprising both public liability – or third party – cover in case of injury to a client while visiting a practitioner, and professional indemnity cover in the event of being sued for malpractice.

If working from home, some providers of household insurance will add public liability cover to an existing domestic insurance policy but they must be made aware of the number of clients likely to be seen at home, and your insurance premium may rise. Practitioners working online through text-based or video-conferencing facilities, or by phone, must ensure that their insurance policy covers this type of work.

A number of companies specialise in insuring the work of those within the counselling professions and it is advisable to obtain a number of quotations and to look carefully at the details of the cover offered (for example, some companies offer a legal helpline and others do not) before purchasing.

It is worth mentioning that car insurance cover that includes business usage is advisable, covering a practitioner when travelling to a workplace or a business or supervision appointment.

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## 15 Record keeping

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### 15.1 What is required of me with regard to record keeping and data protection?

Practitioners are required to keep records of clients and their sessions (Commitment 2e., Good practice, point 15). Information about what data you will store, how you will store them and how you will do this securely must be included in the therapy contract. It is also important to have a privacy notice (see [www.bacp.co.uk/media/6208/bacp-privacy-notice-guide.pdf](http://www.bacp.co.uk/media/6208/bacp-privacy-notice-guide.pdf)). The General Data Protection Regulation (GDPR) sets out the main principles and responsibilities organisations (this includes sole traders such as private practitioners) have when handling personal data.

It protects individuals' personal information and improves their control over how it is collected, stored, shared and used. In most cases, private practice practitioners will act as a 'data controller'.

For the latest information, see the Information Commissioner's Office (ICO) website; <https://ico.org.uk>, which has lots of resources from basic tools to detailed guides, including whether you are required to register with the ICO and how to manage a data breach. It's worth checking back regularly as GDPR information is still being updated.

See also: FAQs about Data Protection at: [www.bacp.co.uk/about-us/contact-us/gdpr](http://www.bacp.co.uk/about-us/contact-us/gdpr) and Good Practice in Action 105 about GDPR in the counselling professions.

Cyber security is a significant consideration in the digital age and the ICO offers helpful guidance in its publication *10 practical ways to keep your IT systems safe and secure*. This can be downloaded at: [https://ico.org.uk/media/for-organisations/documents/1575/it\\_security\\_practical\\_guide.pdf](https://ico.org.uk/media/for-organisations/documents/1575/it_security_practical_guide.pdf).

The GDPR is complex and you may wish to seek professional advice from a legal expert in data protection. They will be able to clarify the finer points of the GDPR requirements and what they mean for your practice.

The *Ethical Framework for the Counselling Professions* commits members to '...protect the confidentiality and privacy of clients' (Good practice, point 55). See also Good practice, points 55a-g for more detailed information.

Further Good Practice in Action resources are available in respect of record keeping:

GPiA 065 *Clinical Reflections for Practice: Confidentiality and record keeping*

GPiA 066 Commonly Asked Questions: *What do we mean by records and record keeping?*

GPiA 067 Fact Sheet: *Practical aspects of record keeping*

GPiA 068 Fact Sheet: *Record keeping within organisational settings*

GPiA 071 Legal Resource: *Ownership and storage of records.*

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## 16 Continuing professional development

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### 16.1 What is expected of me as regards continuing professional development (CPD), and must I do it?

All BACP registrants need to complete CPD, and the minimum expected standard is 30 hours per annum. Accredited BACP members have to renew accreditation annually and this also commits them to both CPD and supervision. It should be noted that a percentage of BACP registrants will, each year, be selected for audit when renewing and will be asked to provide details of how their CPD meets the requirements of the BACP Register. The Register defines CPD as: 'any learning experience that can be used for the systematic maintenance, improvement and broadening of competence, knowledge and skills to ensure that the practitioner has the capacity to practise safely, effectively and legally within their evolving scope of practice. It may include both personal and professional development'.

Further guidance about a BACP registrant's commitment to CPD and supervision can be found at: [www.bacp.co.uk/membership/registered-membership/guide-to-cpd](http://www.bacp.co.uk/membership/registered-membership/guide-to-cpd).

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## 17 Clinical wills

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### 17.1 What is a clinical will, and do I need one for private practice?

A clinical will, or therapeutic will, is a document detailing arrangements to be implemented in the event of a practitioner's death or serious incapacity.

The aim of a clinical will is to minimise problems for clients, colleagues, referring agencies and supervisees in the event of a personal crisis, where therapeutic contracts are disturbed or ended prematurely.

The *Ethical Framework* commits members to ensuring that:

*'In the event of death or illness of sufficient severity to prevent the practitioner communicating directly with clients, we will have appointed someone to communicate with clients and support them in making alternative arrangements where this is desired. The person undertaking this work will be bound by the confidentiality agreed between the practitioner and client, and will usually be a trusted colleague, a specially appointed trustee or a supervisor.'* (Good practice, point 42)

Consequences arising from such a crisis can be considerable and cause extreme difficulties for clients. By putting in place a plan whereby a trustworthy individual such as a supervisor can notify others as required, disruption can be minimised as far as is possible.

More information can be found in GPiA 104 CAQ: *Clinical wills and digital legacies* and in Despenser (2008).

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## 18 What support is there for private practitioners?

The practitioner's supervisor will be a vital support for the private practitioner, and careful contracting will be needed to ensure that the practitioner is well supported.

BACP assists members in several ways including running conferences and networking events throughout the UK. New *Good Practice in Action* resources, Competence Frameworks and other guidance are available on the website. BACP also has an Ethics Helpdesk that can offer perspectives on ethical issues and signpost to relevant resources.

As practitioners in private practice can feel isolated, they may find that peer support from other private therapists is helpful. There are a number of independent peer support and mentoring groups.

See the BACP Private Practice website for more information [www.bacp.co.uk/bacp-divisions/bacp-private-practice](http://www.bacp.co.uk/bacp-divisions/bacp-private-practice). BACP's calendar of conferences and network events, regularly updated by the BACP events team, also has events of interest. Practitioners in private practice will also find the *Private practice toolkit* supportive.

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## About the author

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