

## **Cognitive Behavioural Therapy Diploma Course**

**CBH Student Name:**

### **Case Study Agreement**

#### **Case Study Participation**

I (Insert Student Name) am currently training as a Cognitive Behavioural Hypnotherapist with the UK College of Hypnosis & Hypnotherapy. As part of my course I am required to conduct and submit case studies. When conducting a case study I will be putting into practice techniques learnt on the course. At no point will I practise any techniques not yet covered as part of the course, or from different modalities. By agreeing to participate as a case study you recognise that I am still learning and developing my skills as a CBH therapist.

#### **Sphere of competence**

I will be asking you to complete documentation relating to your health and wellbeing and the extent of your issue and how it is affecting you. If it becomes clear at the start or during our sessions that your issue is more complex and therefore outside of my sphere of competence, I will discuss this with you and suggest other options which could include referral to your GP or a more qualified therapist, if you choose to seek further help for your issue.

#### **Confidentiality**

All information, whether verbal or written in notes, is treated as strictly private and confidential.

The CBH Student has responsibility both to the case study participant and to the community at large. Some moral and legal limitations therefore apply to confidentiality. These limitations mainly concern risk of serious self-harm, harm to others and child protection issues. If a situation arises in which the moral or legal limits of confidentiality are exceeded, the reasons will be explained by the CBH Student and discussed with the client at the time.

#### **Supervision**

As part of my training I undertake regular supervision. Your case will be discussed with my supervisor as part of my ongoing development. A reference number will be used in the place of your full name and all of your personal details will remain completely confidential. Therapist confidentiality extends to the supervision relationship.

All college supervisors are trained.

On signing this agreement, you agree to the submission of your case study as part of my training and qualification.

#### **Insurance**

I carry student professional indemnity and public liability insurance / I have researched professional indemnity and public liability insurance and it is not possible to arrange this in my country of 'state name of country'. Delete the appropriate option.

**Privacy**

I have provided you with a separate document detailing my privacy policy and compliance with GDPR

**Code of ethics**

Once qualified I will be joining one of the professional registers. During my training I accept and follow the principles set forth in the Code of Ethics of NCIP. Copies of these documents are available to clients on request.

Insert CBH Student Name & sign

I agree to participate as a case study for (insert student therapist name) and understand how my personal information will be treated and shared during this process.

I acknowledge that (insert student therapist name) has been unable to arrange insurance cover (delete if this doesn't apply)

Case Study Participant Name:

Signed:

Date: