**CP FORM 1**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**Client initial Assessment Form**

**Student counsellor’s name…SHEIKH ABDULGHANI NOOR Reg no…CP/30/19**

**Case Number…1 Date of intake…30/01/2024**

**Client Code… A1 Practicum Site…MTRH**

1. **Client’s demographic information (gender, age, number of siblings, marital status etc. Allow the client to share what s/he is comfortable with).**

**Gender:** Female **Age:** 21

**Marital status:** Married

1. **Relevant history concerning previous counselling treatment( if any)**

- The client has not had any previous counselling experience.

This is the client's first time seeking counselling services.

1. **The current situation (allow the client to share whatever has brought him/her for therapy).**

The client was diagnosed with an abscess in the breast. She declined treatment due to a past experience where one of her relatives, who was suffering from the same issue, succumbed to death after undergoing treatment. She is afraid that she will also die if she undergoes treatment.

The client is currently dealing with a serious health issue and has fears and anxieties related to the treatment due to a traumatic past experience. This fear is causing her to decline potentially life-saving treatment.

1. **What is your initial assessment of the client; cognitively, emotionally, socially and physically in relation to his/her concerns?**

- Cognitively: The client appears to understand her medical condition and the implications of not receiving treatment. However, her fear is overpowering her rational thinking.

- Emotionally: The client is showing signs of fear and anxiety due to her diagnosis and the unfortunate incident with her relative. These emotions are intense and are affecting her decision-making process.

- Socially: Information not provided. It would be beneficial to gather more information about the client's social support system as it can play a crucial role in her treatment and recovery process.

- Physically: The client is currently dealing with a medical condition (breast abscess) that requires attention. Her physical health is directly linked to her current emotional state.

**CP FORM 2**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**Individual Treatment Plan Form**

**Student counsellor’s name...SHEIKH ABDULGHANI NOOR Reg. No...CP/30/19**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Client code** | **Date of Session** | **Time of session** | **Session number** | **Duration of session** | **Practicum site** |
| A1 | 30/01/204 | 8.30 am | 1 | 1 hour | MTRH |

**Client’s Concerns (Issue bringing him/her for therapy)**

The client has been diagnosed with a breast abscess. However, she has declined treatment due to a traumatic past experience. A relative of hers, who was suffering from the same medical condition, unfortunately passed away after undergoing treatment. This event has instilled a deep-seated fear in the client that she might meet the same fate if she opts for treatment. The fear is so profound that it is preventing her from seeking necessary medical intervention for her condition. This fear and the resulting avoidance of treatment are the primary issues bringing her to therapy.

**Goal(s) for therapy**

1. To help the client manage her fear and anxiety related to her medical condition and treatment.

2. To assist the client in making informed decisions about her health.

**Interventions (state theories used)**

In the sessions I attended, I utilized Psycho-education as an intervention strategy. This approach involved educating the client about her condition and the importance of treatment. It also includes providing information about the nature of fear and anxiety, and how these emotions are processed in the brain. The goal is to empower the client with knowledge, which can help reduce fear and improve her sense of control over her situation. As a counselling psychology student, this approach has allowed me to bridge the gap between the client’s fears and the medical realities, thereby facilitating a more informed and less fear-driven decision-making process.

**Plans for next session**

In the next session, we will continue to explore the client's fears and anxieties. We will work on strategies to manage these emotions and discuss the importance of medical treatment for her condition.

**Student Counsellor’s signature……………………………………..Date……………**

**CP FORM 3**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**Student counsellor’s name...SHEIKH ABDULGHANI NOOR Reg. No...CP/30/19**

**CLIENT LOG FORM**

**SUMMARY OF CLIENT CONTACT HOURS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **CLIENT CODE** | **DATE:**  **FROM** | **DATE:**  **TO** | **NUMBER OF SESSIONS** | **NUMBER OF HOURS** | **PRESENTING CONCERNS AND MAIN ISSUES EXPLORED** |
| A1 | 30/1/24 | 30/1/24 | 1 | 1 | The client, diagnosed with a breast abscess, declined treatment due to fear stemming from a relative’s death post-treatment for the same condition. The therapy aims to manage her anxiety and aid her in making informed health decisions. Psycho-education is employed to help her understand and manage her fears by identifying negative thought patterns and fostering healthier responses. Future sessions will continue to address her fears and anxieties, strategise emotion management, and emphasize the importance of medical treatment. |
|  |  |  |  |  |  |

**TOTAL HOURS… 1 COLLECTIVE HOURS… 1**

**STUDENT COUNSELLOR’S SIGNATURE……………………………..DATE…30/01/2024**

**SITE SUPERVISOR’S NAME…………………………….SIG…………………DATE………………..**

**UNIVERSITY SUPERVISOR’S NAME………………………SIG……………………DATE…………...**

**CP FORM 4**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**BSc Counselling Psychology**

**Initial Assessment Form for Groups**

**Student counsellor’s name...SHEIKH ABDULGHANI NOOR Reg. No...CP/30/19**

**Case Number………………………….. Date of intake…………………………….**

**Group Code………………………………. Practicum Site…MTRH**

**Group demographic information (type of group)**

**The current situation (allow the group to share whatever brought them for therapy).**

**What is your initial assessment of the group; cognitively, emotionally, socially and physically in relation to their concerns**?

**CP FORM 5**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**Group Treatment Plan Form**

**Student counsellor’s name...SHEIKH ABDULGHANI NOOR Reg. No...CP/30/19**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Group Code** | **Date of Session** | **Time of session** | **Session number** | **Duration of session** | **Practicum site** |
|  |  |  |  |  | MTRH |

**Group’s Concerns(Issue bringing them for therapy)**

**Goal(s) for therapy**

**Interventions (state theories used)**

**Plans for next session (If any)**

**Student Counsellor’s signature……………………………………..Date……………**

**CP FORM 6**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**Student counsellor’s name...SHEIKH ABDULGHANI NOOR Reg. No...CP/30/19**

**GROUP LOG FORM**

**SUMMARY OF GROUP CONTACT HOURS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **GROUP CODE** | **DATE:**  **FROM** | **DATE:**  **TO** | **NUMBER OF SESSIONS** | **NUMBER OF HOURS** | **PRESENTING CONCERNS AND MAIN ISSUES EXPLORED** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**TOTAL HOURS…………………………….. COLLECTIVE HOURS……………………….**

**STUDENT COUNSELLOR’S SIGNATURE……………………………..DATE……………….**

**SITE SUPERVISOR’S NAME…………………………….SIG…………………DATE……………….**

**UNIVERSITY SUPERVISOR’S**

**NAME………………………SIG……………………DATE…………...**

**CP FORM 7**

**MOI UNIVERSITY**

**Department of Sociology, Psychology and Anthropology**

**BSc Counselling Psychology Evaluation Form**

**SITE SUPERVISOR’S ASSESSMENT TOOL**

**Supervisee’s Name………………………………………….Reg no……………………………..**

**Agency…………………………………………………………………………………………….**

**\*\*This section is scored out of 30 with each question having a maximum of 1mark**

|  |  |  |
| --- | --- | --- |
|  | **PROFESSIONAL CONDUCT** | **Marks** |
| 1 | Maintains confidentiality of client’s records |  |
| 2 | Manages time effectively |  |
| 3 | Operates within areas of expertise and refers where applicable |  |
| 4 | Is aware of legal issues affecting clients |  |
| 5 | Consults with colleagues on ethical issues |  |
| 6 | Demonstrate respect for the individual and authority |  |
| 7 | Protects the client at all levels |  |
| 8 | Demonstrates integrity by adhering to professional values |  |
| 9 | Displays professional demeanour and language |  |
| 10 | Operates within organizational guidelines |  |
|  | **Sub-total** |  |
|  | **REFLECTIVE PRACTICE** |  |
| 1 | Reflects on practice and mindfully recognizes impact of self on others. |  |
| 2 | Maintains appropriate therapist-client boundaries. |  |
| 3 | Understands own impact on clients in a therapeutic relationship. |  |
| 4 | Is willing to admit mistakes with minimal defensiveness. |  |
| 5 | Provides helpful feedback and critique to others |  |
| 6 | Is sensitive to the needs and strengths of peers. |  |
| 7 | Demonstrates awareness of competencies and self monitors own performance |  |
| 8 | Identifies areas for further improvement |  |
| 9 | Completes case documentation accurately |  |
| 10 | Takes appropriate care of self and is aware of own needs. |  |
|  | **Sub-total** |  |
|  | **INTERPERSONAL RELATIONSHIPS** |  |
| 1 | Is eager to benefit from others in skills development |  |
| 2 | Solicits feedback from supervisor |  |
| 3 | Forms and maintains productive and respectful relationships with peers, colleagues. Instructors and supervisor |  |
| 4 | Conveys counselling atmosphere of trust and safety. |  |
| 5 | Works effectively with colleagues and resolves conflicts effectively |  |
| 6 | Presents case conferences adequately |  |
| 7 | Demonstrates acceptance of the client and expresses empathy to them showing a non-judgmental attitude |  |
| 8 | Demonstrates knowledge of the supervision process including one’s own roles and responsibilities as trainee. |  |
| 9 | Communicates clearly using written skills. |  |
| 10 | Communicates clearly using verbal skills and non-verbal communication matches verbal content. |  |
|  | **Sub-total** |  |

**Grand Total =**

**Further comments about the student counsellor (if necessary) .……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………................................................................................................................................................................................................................................................................................................**

**Do you think the student counsellor is well prepared for the job market? Explain**

**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………....**

**How can our counselling program be improved? (Feel free and comment on this)**

**………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**

**Site supervisor’s Name……………………………Sign…………………………..Date………….**

**Official stamp**