**CP FORM 1**

**CLIENT INITIAL ASSESSMENT FORM**

**Case Number…** 12 **Date of intake…** 27/02/2024

**Client Code…** A12  **Practicum Site…MTRH**

**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:** 24 **Marital status:** Single **Relevant history concerning previous counselling treatment( if any)**Has had previous counselling experience.

**The current situation (allow the client to share whatever has brought him/her for therapy).**The client, diagnosed with bipolar mood disorder, is currently admitted to an in-patient ward for individuals with mental illnesses. Two days ago, her medication was changed by the doctors without her being informed. She reports experiencing headaches as the main side effect of the new medication. She expresses feelings of sadness and anger for not being informed about the medication change and feels uncomfortable in the current ward, desiring a transfer to another ward.

**What is your initial assessment of the client; cognitively, emotionally, socially and physically in relation to his/her concerns?**Cognitively, the client appears coherent and aware of her surroundings.   
Emotionally, she exhibits signs of distress, including sadness and anger.  
Socially, her interaction with others may be affected by her emotional state and discomfort in the current ward environment.   
Physically, aside from experiencing headaches as a side effect of the new medication, there are no apparent physical concerns.

**CP FORM 2**

**INDIVIDUAL TREATMENT PLAN FORM**

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| --- | --- | --- | --- | --- | --- |
| **Client code** | **Date of Session** | **Time of session** | **Session number** | **Duration of session** | **Practicum site** |
| A12 | 27/02/2024 | 9.10 am | 1 | 45 minutes | MTRH |

**Client’s Concerns (Issue bringing him/her for therapy)**The client seeks therapy due to a lack of communication regarding her recent medication change and discomfort within the in-patient ward environment. This absence of communication about medication adjustments induces distress and uncertainty about her treatment plan. Additionally, discomfort within the ward environment evokes anxiety and frustration. She aims to address the communication gap, alleviate discomfort, and enhance her overall well-being and treatment experience.

**Goal(s) for therapy**1. To address and manage the client's emotional distress stemming from the lack of communication regarding medication changes.  
2. To explore coping strategies to alleviate the client's discomfort and facilitate adjustment to the current in-patient ward environment.  
3. To empower the client to advocate for her preferences regarding her treatment and environment within the in-patient setting.

**Interventions (state theories used)**1. Client-Centered Therapy: Utilized to provide the client with a supportive and empathetic space to express her concerns and emotions freely. By validating her experiences and facilitating self-exploration, client-centered therapy promotes insight and emotional healing.  
2. Psychoeducation: Offered to enhance the client's understanding of her medication regimen and the importance of effective communication with healthcare providers. Providing information about medication changes and the treatment process can empower the client to actively participate in her care.

**Plans for next session**In the next session, we will focus on exploring the client's emotional responses to the lack of communication regarding her medication change and identifying coping strategies to manage her discomfort in the current in-patient ward environment. Additionally, we will discuss strategies for effective communication with healthcare providers and advocate for the client's preferences regarding her treatment and environment. The session will prioritize providing the client with support, validation, and practical tools to navigate her current challenges effectively.

**Student Counsellor’s signature… Date…** 27/02/2024