**CP FORM 1**

**CLIENT INITIAL ASSESSMENT FORM**

**Case Number…2 Date of intake…31/01/24**

**Client Code… A2 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:** Male **Age:** 21

**Marital status:** Single

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

The client has not had any previous counselling experience.

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

The client, suffering from a septic foot wound, is scheduled for a Below-Knee Amputation (BKA). He has been informed about the procedure, its risks, and post-operative realities, including the use of walking aids. He has consented to the operation, demonstrating understanding and acceptance of his condition. The plan includes ongoing psychological support and post-operation counselling to help him cope with the emotional impact of his condition and the changes post-amputation. Despite facing significant changes to his physical health and lifestyle, the client’s insight and willingness to undergo the procedure are positive indicators of his resilience and coping abilities. These strengths will be crucial as he navigates this challenging time towards recovery and adaptation.

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 have a good understanding of his condition and the necessary treatment. He has demonstrated insight into his situation, indicating a high level of cognitive functioning.  
Emotionally: The client’s willingness to undergo the procedure suggests a certain level of emotional readiness. However, the impending amputation could potentially cause emotional distress, and it will be important to monitor his emotional state closely.  
Socially: Post-operation, his ability to navigate social situations might be impacted due to mobility issues. It will be important to explore this further in subsequent sessions.  
Physically: The client is dealing with a significant health issue, which has led to the need for a BKA. This will undoubtedly have a major impact on his physical capabilities in the short term. Long-term physical outcomes will depend on the success of the operation and the client’s adaptation to using walking aids.

**CP FORM 2**

**INDIVIDUAL TREATMENT PLAN FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Client code** | **Date of Session** | **Time of session** | **Session number** | **Duration of session** | **Practicum site** |
| A2 | 31/01/2024 | 9.00 am | 1 | 1 hour | MTRH |

**Client’s Concerns (Issue bringing him/her for therapy**The client is dealing with a septic foot wound that has necessitated a Below-Knee Amputation (BKA). The impending surgery and the subsequent lifestyle changes are the primary issues bringing him to therapy. Client is required to consent for the procedure to be performed thus needing to be psycho-educated about his current condition before proceeding with BKA procedure.

**Goal(s) for therapy**The primary goal for therapy is to help the client cope with the emotional impact of his condition and the upcoming surgery. The therapy will also aim to equip the client with strategies to adapt to his new physical reality post-surgery.

**Interventions (state theories used)**The interventions will incorporate elements of Cognitive-Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT), and Psycho-education.  
  
CBT will be utilized to help the client identify and manage any negative thoughts or feelings associated with his condition and the impending surgery. This approach can empower the client to challenge cognitive distortions and develop healthier thought patterns.  
ACT will be employed to foster acceptance of his current situation and commitment to making necessary lifestyle changes post-surgery. This therapeutic approach can help the client live in accordance with his values despite the challenges posed by his physical condition.  
Psycho-education will be a crucial part of the intervention process. The client will be educated about his medical condition, the surgical procedure, and the recovery process. This will include information about the use of walking aids and potential lifestyle changes post-surgery. The aim of psycho-education is to enhance the client’s understanding of his situation, thereby promoting informed decision-making and effective coping strategies.

**Plans for next session**In the next session, we will continue to provide emotional support and begin to explore the client’s feelings about the upcoming surgery. We will also start discussing strategies for coping with the changes that will come post-surgery, including the use of walking aids. The client’s feedback and progress will guide the specific topics and strategies discussed.

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