Contents

Types of information

Depending on the context of the service, individuals may choose to be dealt with anonymously (or by providing a pseudonym) in which case their details will not be subject to privacy laws. If a person does identify themselves, the following will be collected: name, age, sex, contact details, some medical history, their symptoms (if applicable), ethnic background, sexual practice (if applicable), demographic information, language requirements, next of kin or emergency contact details and other items including referral information. This information will be recorded in the organisation's case history record.

Collection methods

Information is usually collected directly from a person when they use the service, or when they send an email or letter, or complete an online or hard copy form. They may sometimes collect personal information from a third party, such as a residential care facility that is managing a person's care, or from family members contacting the organisation on a person's behalf. If someone calls on behalf of a person in need of support, then the caller's name and contact details must be collected and be authorised.

Recording information

All consultations within an organisation must be recorded in a manual or electronic database. Any information collected as a result of a person contacting the organisation is considered personal information.

Maintaining records

Organisational processes should be in place to ensure that records of personal information remain accurate, complete and up to date, including by verifying the information with the service user each time they use the services, or from other sources. The records are retained for up to 25 years. The specific length of time varies across organisations and is usually determined by the funding body.

Using personal information

Personal information is collected, stored, used and disclosed:

▶ for the provision of information on, and supporting access to, relevant support and care services for individuals

▶ for maintenance of a central service-user record to improve service delivery

▶ for management of the aged care system by the Commonwealth government

▶ to assist government departments to provide health services or address issues raised by service users

▶ to match service delivery data with health information for service improvement

▶ for compilation and analysis of statistics relevant to public health and safety

▶ for compliance with legal obligations.

Seating

Where possible, try to sit in reasonably close proximity to the person if the referral information indicates this is safe. If there are risk issues, consider positioning yourself close to the door. Make sure there are no barriers between you and the person; for example, a large desk between you may intimidate the person. Make sure the chairs are the same height so you do not look down on the person. Chairs should also be positioned to ensure eye contact can be made comfortably. There should be enough room for several people to sit comfortably, which is important in cases when the person requires a support person present, such as an interpreter or other advocate.

Recording the session

Notes need to be taken of the session, and your supervisor can give you guidance on the accepted practice of how and when to take notes. A clipboard or notepad can be used and balanced on your lap if a small table it not available. Alternatively, and with the person's permission, you may choose to record the session and write up the case notes after the person has left.

Example

Analyse existing client information prior to commencement of the counselling session

Sally is preparing to meet a person who has been referred to her service for counselling. Sally is a support worker in the disability sector and part of her role is to provide counselling services to people with disabilities and their families.

Two days before the appointment, Sally reviews the records that have been sent from a service that specialises in housing support for people with disabilities. Sally is unfamiliar with the current practice of funding arrangements for housing mentioned in the report, so she speaks to a colleague and he suggests a particular website that may be useful to read about current funding details. Sally finds the information she wants on the internet and feels well prepared for the counselling session booked for the following day.

Codes of conduct and practice

A code of conduct is a set of principles, standards or rules of behaviour that guide the decisions, procedures and systems of work in a workplace. A code of conduct should promote the welfare of people by protecting their rights and ensuring ethical practices are followed.

Codes of conduct may vary between community services workplaces; however, most community services will have a code of conduct that promotes ethical behaviour, accountability, transparent sharing of information, bestowing dignity and respect, and upholding confidentiality.

Codes of practice also provide guidance on effective ways to work based on the code of conduct guidelines. They are generally the way to do something, such as working in a safe manner with a person who is demonstrating hostile behaviour.

It is important to comply with your workplace code of conduct whenever you take part in workplace communication.

Your workplace code of conduct may include:

▶ a statement of purpose

▶ related legislation

▶ disciplinary action for breaches of the code

▶ a summary of the workplace values

▶ roles and responsibilities of accountable persons named in the code

▶ worker rights and treatment under the code

▶ general applications of the code

▶ application of the code to specific work circumstances.

Privacy and confidentiality

Privacy refers to a person's ability to control access of others to themselves, their space and their possessions, including information about them. Privacy also means taking steps to avoid embarrassment and humiliation.

Confidentiality is about data or information, not people, and refers to managing access to private information. Confidentiality provisions restrict an individual or organisation from using, storing and disclosing information about a person that is outside of the scope for which the information was collected. Maintaining confidentiality is part of respecting a person's privacy and individual rights. In practice, confidentiality means not discussing an individual's personal information unless they have given their consent for this to occur. There are exceptional circumstances that do enable disclosure of private information but this is generally only when someone is at risk of harm. A person's informed consent must always be obtained before disclosing confidential information to a third party.

The applicable Commonwealth Act is the *Privacy Act 1988* (Cth), which protects all personal information handled by businesses. Most states and territories have laws designed to regulate how information is managed in both the private and public health systems. Some states have also incorporated information privacy principles and human rights principles into law.

To research anti-discrimination legislation you can use the Australasian Legal Information Institute database at:

▶ www.austlii.edu.au

For additional information on equity and discrimination in Australia visit the Australian Human Rights Commission website at:

▶ www.humanrights.gov.au

Mandatory reporting legislation

Mandatory reporting describes the legislative requirement imposed on certain people to report suspected cases of child abuse and neglect to government authorities. These people interact with children and young people in the course of their work and include doctors, dentists, nurses, midwives, teachers, police officers, counsellors, coordinators of home-based care for children and public servants who deal directly with children.

In the case of counsellors in the community services sector, it is the supervisor's responsibility to report, but workers need to report their concerns to their supervisor. If the person being counselled communicates concerns regarding any abuse or neglect, then it must be reported to a supervisor or manager. In such circumstances the duty to report overrides any legal obligations to maintain confidentiality. It is important to explain this to the individual in the first session and to answer any questions or concerns they may have about this issue.

Community services organisations are required to have policies, procedures and training in place to guide workers to identify, assess and report harm, to meet legislative requirements.

Mandatory reporting requirements

As a support worker, you must be aware of the specific statutory reporting requirements relevant to your area of work and for your state or territory.

Mandatory reporting for suspected abuse or neglect of a child

Each state and territory has their own child protection legislation that contains varying requirements for who is mandated to report child abuse and what type of abuse must be reported. For example, in the ACT, sexual and physical abuse must be reported, but not neglect or emotional abuse. In NSW, all forms of abuse, including exposure to family violence, must be reported.

Managers, including both paid workers and volunteers, who supervise those providing direct services to children are mandated to report. Reports are made to the relevant child protection authority in each state or territory.

You can read more about this at the Australian Institute of Family Studies website at:

▶ www.aifs.gov.au/cfca/pubs/factsheets/a141787/

Elements in the communication process

All these factors influence how communication takes place and how effective it is.

Factors influencing how communication occurs
Participants The sender encodes and sends a message The receiver receives and decodes or interprets the message
Message Content – facts, feelings, opinions, attitudes
Environment Physical – quiet and calm setting with no disturbances Social setting – occasion, relationships, cultural factors
Participants' characteristics Age, sex physical status, emotional state, prior experience of services (positive or negative)
Purpose The purpose of the communication influences what is communicated and how it is communicated

Communication techniques

To communicate effectively in the community services environment you may need to use a range of communication techniques. These can be used to optimise the exchange of information by meeting the communication needs of each person and by expressing empathy and respect.

Different communication strategies can elicit different information from people. It is important to be aware of the different strategies and to practise them in order to elicit the information required from a person. For example, face-to-face communication, like in an interview, can still involve variations and different methods of communication, as described in the examples below.

Three types of face-to-face communication
Visual Physical appearance, manner of dress, eye contact, facial expression, body movements, touch and proximity (distance between speakers)
Vocal Pitch and tone of voice, intonation (where speech rises and falls in pitch and tone), rate of speech, accent and pauses – vocal mannerisms communicate emotion, attitude and more
Verbal The actual words chosen and spoken

Summarise

Summarising is a form of reflective listening where the listener condenses the main points of the communication to ensure they have not missed any important information. This technique can be used to ensure information is interpreted accurately, and also to close off one topic and lead into the next.

A summary of a session is a brief statement of lengthier information taken from the session. It includes taking note of the person's verbal and nonverbal communication, taking the key information and restating them. It is also a way of checking the accuracy of the information, where you repeat to the person, in a few words, the overall ideas raised in the exchange. This is usually the final step of active listening that confirms to the person that you understand what they are communicating. They can also tell you if you have not summarised what they have tried to communicate correctly.

By providing a forum where the person can talk without being interrupted, ask questions and have someone understand their issues, you often allow them to work towards their own solutions.

Reframing

Through reframing, the person is encouraged to perceive their experience in a more positive fashion. The counsellor encourages this shift by offering alternative ways of viewing their experience. This strategy neither changes the facts of a situation, nor does it trivialise the hurt or pain the person may be experiencing. For example, a person who is upset about having to move away from home is likely to be focusing on the loss of their support network and the familiarity of their community. The counsellor, while acknowledging the person's loss, could reframe the event to be perceived as an opportunity to experience new places, people and things – or an opportunity for growth.

Reframing encourages the person to view life situations from an alternative frame of reference. People take meaning from how they perceive things from their beliefs and values. Reframing requires the person to look at an issue another way.

Examples of reframing could be to identify:

▶ a problem as an opportunity
▶ a weakness as a strength
▶ an impossibility as a near possibility
▶ unkindness as lack of understanding.

Speech impairment

Speech impairments can be due to a physical disability such as a stroke or other physical causes such as Alzheimer's disease, acquired brain injury or congenital disorder. Speech impairment can also be due to an emotional or psychological disturbance causing stuttering.

Strategies to address speech impairment:

▶ When speaking to someone who has difficulty speaking, it is important to take an encouraging and non-corrective approach.

▶ Be patient and allow time for reflections and confirmation of the person's message.

▶ Don't ever pretend to understand if you don't. Instead, repeat questions and break them down into short questions.

▶ Pay careful attention to body language and reactions to help your understanding.

▶ Do not attempt to complete the verbal communication.

▶ Use clarification and paraphrasing to ensure understanding of the verbal message.

Mental health issues

Mental health conditions include depression, anxiety, psychosis, dementia and other conditions that affect a person's ability to understand information and how it applies to them.

It is important to remember that sometimes people with cognitive impairments won't be able to tell you what they need or that they don't understand.

Strategies to address mental health issues:

▶ Make sure you use consistent verbal and nonverbal communication.

▶ Watch the person's body language and make sure they feel safe, comfortable and unhurried in their attempt to communicate with you.

▶ Due to the uneven nature of mental illness, ask the individual if this is a good or bad day for them to tailor your time with them accordingly.

Mobility impairment

When communicating with a person who has a mobility impairment, be aware that their mobility aid is a continuation of their personal space. Moving a person's mobility aid away from them can create a sense of disempowerment and distress.

Offer the person a seat and sit to match the person's body language and talk to them at eye level.

Behavioural barriers

A person's behaviour may be influenced by medications, mental illness, stress and cognitive impairments. Sometimes a person's behaviour will negatively impact upon their ability to comprehend information and make important health-related decisions.

Considerations for the observer

While it is important to look for all the verbal and nonverbal signs during the interview, avoid making assumptions, labelling the person's behaviours or making judgments based on your own values.

Under the *Privacy Act 1988* (Cth), a person has the right to access all personal information kept about them by your organisation, including any notes of observations about them made during a counselling session. For this reason observations you record need to be accurate and language may need to be tentative, such as 'appears to …', 'presented as …' or 'is possibly …'.

Safety or reporting issues

Community sector workers, including people providing counselling services, work in a wide variety of settings. While a certain level of risk can be found in any context, community sector work sometimes involves a greater likelihood of encountering people whose issues may affect their behaviour. This may present an increased risk of harm to themselves or others. Organisations are required to have policies and procedures in place (that meet legislative regulations including work health and safety) to guide workers in identifying, assessing and reporting harm.

Consider the following information.

Limitations of the job role

▶ If during the counselling interviews the counsellor identifies a risk of harm, they must immediately report and discuss this with their supervisor. The counsellor needs to be aware of the limitations in their job role in dealing with high-risk behaviour, and their responsibilities to everyone including the person, and to work health and safety practice.

Employer responsibilities

▶ When delivering counselling services, the employer should take reasonable steps to provide an environment that facilitates personal safety. Such steps may include using duress alarms; ensuring other people are present, or nearby if needed; and ensuring alternative avenues of exit. This information should have been explained during the induction program. Always refer to a supervisor for clarification and the organisation's safety policies and procedures.

Record incidents

▶ When harmful behaviour is reported or observed during an interview, the counsellor should make detailed notes, including the wording of any threats, the context in which the behaviour arose, known information about potential victims and then report this to their supervisor. The workplace should have a procedure for reporting and recording such incidents.

Mandatory reporting

▶ Mandatory reporting requirements require that if during the interviewing process or at any time after, the person communicates their concerns regarding any abuse or neglect, then it must reported to a supervisor or manager. Remember that in such circumstances, duty to report overrides any legal obligations to maintain confidentiality.

Topic 2

In this topic you will learn how to:

2A Provide information that assists clients to understand the nature of the counselling service on offer

2B Clarify, confirm or modify client expectations of the counselling service

2C Identify client anxieties about the counselling process and explore them with clients

2D Acknowledge and show respect for the client's immediate concerns

2E Clarify both expectations and commitment to the counselling relationship and confirm with clients

2F Identify indicators of client issues beyond the scope of your own role and report or refer appropriately

Establish the nature of the helping relationship

Identifying certain important information before the counselling service begins is an important first step in the initial interview and establishes the nature of the counselling service. The counsellor needs to provide accurate information to the person to clarify the purpose of counselling and the rights and responsibilities of all parties. They also need to indicate how the counselling process will work and what is required of them.

The person's expectations of the process and its outcomes may require clarification or modification. Once expectations have been determined, the counsellor can clarify the nature of counselling services and then work with the person to identify any anxieties they may have. At this stage it is important that the counsellor acknowledges and shows respect for the person's concerns. This may require dispelling any myths or misunderstandings the person may have regarding counselling and the processes involved.

Confirming expectations and the commitment to the counselling relationship means that the nature of the counselling relationship has been clarified and understood by both parties. Complex or coexisting issues may become obvious in this early phase. Dealing with these may require the assistance of a supervisor, and they need to be reported. A referral may also be required, so an understanding of the requirements and process for referral is critical. As is an understanding of the counsellor's job role and scope of practice, so the person seeking counselling receives the best possible service to meet their needs.

Other helping services

Here are some other services and agencies that can offer specialised support and help to people who require it.

Services and agencies that can offer support:

▶ Translation and culture-specific agencies

▶ Housing services

▶ Criminal justice services

▶ Employment services

▶ Mental health services

▶ AOD services

Example

Provide information that assists clients to understand the nature of the counselling service on offer

This table compares two different approaches to disability support taken from the person-centred approach and a traditional (medical) approach.

You can find information more about exploring and implementing person-centred approaches at:

▶ www.adhc.nsw.gov.au/__data/assets/file/0005/228290/DADHC_PersonCentred201208.pdf

Person-centred approaches	Traditional approaches
Focuses on individual's unique interests and preferences	Focuses on the individual and their disability or issues that 'need fixing'
Builds on strengths and high expectations that everyone can and should enjoy the 'good life'	Commences from a deficit and needs basis with low expectations
Offers beyond what is currently available and works towards the future	Looks to what is currently available from a service
Focuses on organising individualised, natural and creative supports and reduces reliance on the service system	Planning assumes the person will spend most of their time grouped with other people with disabilities or the same issues
Situates power and control with the person and their allies	Situates power with the professionals
Tailors supports to achieve the person's future goals	Fits the person into the service
Aims for social inclusion, valued roles and community participation	Largely limits the person to disability or specialist programs and centres

Rights of individuals receiving support services

People seek counselling or other services because they have a need. The task of the support worker is to help them meet their needs and, in doing so, respect their rights as individuals. All workers should ensure they understand the person's rights and responsibilities and support them to exercise their rights.

The following outlines the individual's rights and how a worker can help uphold them.

Individuals' rights

▶ To be treated with respect and dignity

▶ To have their personal information maintained in a confidential and secure manner

▶ To receive effective, quality services in a safe environment

▶ To be able to access services that are equitable and free of discrimination

▶ To have their individual needs addressed including social, cultural and other issues such as mental health or disability taken into consideration

▶ To be fully informed of the available services and be provided with options

▶ To participate in making decisions that affect them

▶ To be informed about the process for making complaints and to be assisted in this process if necessary

▶ To use the services of an advocate if necessary

Respect the individual's rights

▶ Maintain and respect the independence, privacy and dignity of the person.

▶ Provide quality services.

▶ Deliver services to the person in a safe manner.

▶ Respond to the diverse social, cultural and physical experiences and needs of the person.

▶ Inform individuals about available services and options.

▶ Inform individuals about their right to make complaints and use advocacy services.

▶ Inform individuals about their responsibilities as a service user.

Client responsibilities

People in need of support from the service you provide have legal and ethical responsibilities they must adhere to in order to access and use services. They also have a responsibility to uphold the rights of workers and others in an organisation.

The following are examples of a client's responsibilities.

Providing information

▶ A person has a responsibility to provide correct and necessary information to the best of their ability. If the worker feels a person has not revealed adequate or complete information, it should be explained to them why the information is required and they should continue to ask questions until they are confident (to the best of their ability) that accurate information has been obtained.

Example

Clarify, confirm or modify client expectations of the counselling service

Here is an example of a case management record with required checklist and signatures to be completed on the initial meeting.

Case management record

Case worker: _____

I have explained the following information to: _____

Signed by case worker: _____

Date: _____

Information to cover in induction/initial interview:

☐ Information on the rights and responsibilities of the client

☐ Information on the rights and responsibilities of the organisation

☐ Information on complaint and advocacy procedures

☐ Information and support that can be offered to assist individuals using the service

☐ A description of how the service works

☐ Support that will be provided; how the support will be delivered

☐ Privacy and confidentiality policy and procedures in relation to the use of, and access to, personal information held about the individual accessing the service

☐ Procedures for release of personal information to another party and the requirement for informed consent for release

☐ How the individual accessing the service can participate in decision-making processes to assist the service to improve

The above information has been explained to me.

Signed by individual:_____

Date: _____

Signed by nominated support person: _____

Date:_____

2D Acknowledge and show respect for the client's immediate concerns

Once the person has voiced their anxieties and any other concerns they have about the counselling process, it is important to acknowledge these concerns. A concern or issue should never be trivialised, and the person needs to feel that their concerns are valid and important. Everyone has the right to be spoken to and treated with respect for their concerns and feelings.

Showing respect and acknowledging a person's concerns is also important for building rapport and trust, which is central to the initial interview. By encouraging the person to voice and explain their concerns, there is acknowledgment that their issues need to be explored further.

Show respect for concerns

Maintaining respect means not talking down to the person and having regard for their concerns without expectation or judgment. Displaying respect and empathy demonstrates to the person that they are understood and that the support worker empathises with their feelings and situation. It means having consideration for their rights and feelings as a person.

The concerns and anxieties felt by the person are real to them and the counsellor must be genuine and authentic in response to the concerns. The counselling process can be intimidating, so an honest response to any concerns about the counselling process should be given, without pretence.

Positive regard means showing that the person is valued and respected no matter what their circumstances. This means accepting them as a person and that what they have to say is important and valued. Communication techniques are useful for maintaining respect and acknowledging concerns; for example, active and reflective listening skills can be used to maintain a respectful relationship and empower the person by valuing what they say.

2F Identify indicators of client issues beyond the scope of your own role and report or refer appropriately

After an initial discussion with the person being counselled, it may become clear that they have needs beyond the scope of practice of the counsellor. It may be that the person has a number of issues and perhaps requires the support of other professionals from within the organisation or outside the organisation. Understanding the scope of a job role and confirming with a supervisor is an essential part of providing a counselling service. It ensures the best possible service is provided to support and meet the needs of the person seeking counselling.

Issues outside the scope of your role

Some people will present for a counselling session with a variety of issues that need to be addressed. Some issues require the skills and knowledge of specialised and experienced staff who are experts in particular areas of support, and may be beyond the expertise of support workers who provide counselling.

Here are some examples of issues that may fall outside the scope of expertise of a counsellor and should be reported to a supervisor and referred as required.

Issues or services outside the scope of your role
▶ Assisting clients to access welfare payments
▶ Assisting clients with AOD issues
▶ Giving advice to people who are at risk or are experiencing domestic and family violence
▶ Giving the client legal or financial advice
▶ Assisting with other lifestyle concerns such as gambling
▶ Addressing mental health concerns
▶ Providing health advice or health services
▶ Providing assistance to seek housing or address homelessness
▶ Treating clients who are aggressive or violent or have other behaviours on concern
▶ Offering employment or career advice

Summary

1. The person seeking counselling needs to be informed about the scope, purpose and benefits of the sessions they will be undertaking.

2. Counselling encourages the person to become more aware of their thinking, feelings and behaviour, and to develop alternative coping strategies for difficult situations.

3. The humanistic approach developed by Carl Rogers in the 1970s uses client-centred therapy where the counsellor provides opportunities for the person to determine his or her own direction.

4. Gerard Egan used the term 'skilled helper' to describe the role of a counsellor.

5. Person-centred practice (PCP) is a service model that places the person at the centre of their own care.

6. During the initial meeting it may become clear that the person requires clarification of their expectations or perhaps some expectations modified with additional information.

7. It is important that the person and the counsellor have a shared understanding of the counselling service and the rights and responsibilities of all people involved.

8. It is important to explore with the person receiving counselling any anxieties they may have about the counselling service.

9. Showing respect and acknowledging a person's concerns is important for building rapport and trust, which is a vital part of the initial interview.

10. Establishing role expectations and relationship guidelines is an essential foundation to establishing and maintaining a sound working relationship.

11. If a person does not have the skills, knowledge, qualifications and authorisation to conduct a task, then they are in breach of their duty of care.

12. After discussion with the person being counselled, it may become clear that they have needs beyond the scope of practice.

13. Refer to organisational guidelines to manage the referral process.

14. Work with the advice of your supervisor and always inform the person of their options and reasons for referral.

Physical barriers

Barriers that may limit understanding or attendance may include:

- limited hearing or vision, or an inability to speak
- an age-related condition such as dementia
- an inability to access a location due to a physical disability.

Strategies to address physical barriers include to:

- use pictures to represent words or an electronic device that speaks for them
- select an accessible location for a person with limited mobility
- include a carer, interpreter or support person in the discussion if appropriate.

Psychological barriers

A person may be emotionally impaired and unable to 'hear' or understand what you are saying.

Strategies to address psychological barriers include to:

- reassure a person who is sad, angry, upset, confused or fearful of the results of discussions
- give the person time to adjust
- speak slowly and clearly
- arrange to have someone with them to support them
- check on the person's wellbeing following discussions.

Environmental barriers

The place you have chosen to conduct the session may have background noise, distractions, other people in the area, flickering lights, excessive heating or cooling, or be an inaccessible or uncomfortable location.

Strategies to address such environmental barriers include to:

- consider the environment before beginning to communicate, and think about what factors may affect communication
- ask the person if a specific factor is a problem for them, and find a location that is appropriate.

Listening blocks

People may not listen carefully because they are:

- only hearing what they want to hear
- not paying attention
- too busy thinking of a reply
- distracted by emotions
- trying to speak over you.

Strategies to address listening blocks include to:

- be aware of listening blocks so you can identify when they are occurring
- concentrate on obtaining the person's attention
- speak concisely so the person doesn't lose their concentration and the flow of the discussion.

Childhood

▶ Play begins to occur with others.

▶ Play occurs with a wider range of people.

▶ Experiences are less-controlled by adults.

▶ Experiences occur in a wider range of settings.

▶ The individual begins to see themselves as a participant in a variety of settings and situations.

▶ Interactions should encourage choices, a wider social network and a focus on developing early friendships and social interaction with peers.

Adolescence

▶ The peer group is of greater influence.

▶ Tendency to take risks and experiment with behaviours.

▶ The individual is focused on themselves and their role in the world.

▶ Friendship groups are formed based on similar views, ways of expression and interests.

▶ The influence of family decreases, but there is still a need for boundaries, rules and parenting by negotiation.

▶ Interactions should involve the person in planning activities, having a say in what happens around them and promoting independence.

Adulthood

▶ There is a strong set of moral beliefs.

▶ Wide social networks are drawn from people known through work, family, social and sporting activities.

▶ Multiple roles are taken in life; for example, parent, worker, friend and partner.

▶ Time needs to be balanced across multiple responsibilities and roles.

▶ Interactions should focus upon providing relevant and realistic choices and support to suit the person's current needs.

Elderly

▶ There is an increased risk of social isolation and decreased contact with other people in social situations.

▶ Greater time is available for their own activities.

▶ There is an increase in the possibility of a partner's death and decreased contact with other family members.

▶ Roles taken in life may be reduced; for example, the person may no longer have work or parenting roles.

▶ Interactions should support the person at times of significant or changing need, and be respectful to the persons' specific needs.

3B Agree on priorities and develop a plan for counselling in collaboration with the client

A counselling plan is built around the person's goals and priorities, and outlines the main issues as identified in the initial or early appointments. Once clear priorities have been established, the person is more likely to be motivated to work towards achieving their goals. When goals are clearly stated, and priority decisions made, both the counsellor and the person can agree that this forms the basis of their work together, and can be formalised in the person's counselling plan.

Before agreeing on the counselling plan, the person needs to be able to ask questions to clarify understanding and the counsellor should use their communication skills to confirm this. Remember, the counselling plan is the road map for the future counselling sessions.

The counselling plan template

Here is the sample counselling plan from topic 1. It includes the information gathered from the initial interview and allows for a list of priority goals, along with actions to be taken to achieve those goals. Goals and priorities may switch and change or require modification from one appointment to the next to accommodate changing circumstances and resources. Part of the evaluation process is to assess the degree to which the person's goals have been reached and whether they require adjusting.

Details of discussions from future counselling sessions will be recorded in the person's case management notes and be kept with other confidential documents in the person's file, which will be kept secured as per legislative and organisational policies and procedures.

Initial Counselling Plan	
Background information	
Name and personal details of client:	
Rebecca Wise, aged 35 years, 2 birth children (female ages 10 and 12 years), living with de facto partner	
See file re contact details: Mobile phone only	
Start date: 9/3/16	Start time/finish time: 9.15–11.00
Referral notes: See attached letter	
Reviewed by supervisor 7/3/16. Community Housing Services (CHS) – accommodation wait list	
Special needs:	Safety or reporting issues assessed:
▶ Slight hearing disability on LH side ▶ Provide quiet office and sit opposite in conversation	▶ None

Agree to the plan

When determining priorities and developing a counselling plan, the person must be fully informed about the plan they are agreeing to. They need to confirm that the goals and priorities in the plan reflect the person's needs and that they are prepared to continue working with the counsellor to achieve those goals.

It is the responsibility of the counsellor to check that the person understands what will occur and the rights and responsibilities of each party during the process.

Informed consent

Informed consent is an important legal process that helps to ensure people requiring support understand the reasons behind certain procedures. People need to know what to expect from the process before it takes place. Consent assumes an understanding of the benefits and limitations of the counselling service.

Personal questioning

The person needs to understand that they may be asked personal questions. You can prepare them for these sorts of questions by explaining that they have the right to refuse to answer questions they consider too personal. Not obtaining this type of information may affect the support the counsellor can offer, but issues can be revisited in several ways using a variety of questioning and communication techniques, to gain the information required.

Use a checklist

Show the person a copy of a checklist that indicates the information that is required to be provided at the induction or initial interview. A checklist may include specific references to:

▶ how the counselling service works

▶ important information about confidentiality policies and procedures

▶ the purpose and process of the counselling service

▶ expectations about client behaviour

▶ rights and responsibilities of all parties including the person, the counsellor and the service provider/organisation.

Example

Agree on priorities and develop a plan for counselling in collaboration with the client

When Steve and Mary married, they often spoke of having children but first wanted to ensure they were financially secure. In the years that followed, they established a home, enjoyed holidays together and both worked hard to develop successful careers. Steve and Mary wanted children, but they found that neither of them wanted to compromise their career to do so. Over a period of time they stopped talking, and began leading separate lives. Eventually, they moved into separate bedrooms.

Mary arranges for counselling to discuss the discontent she feels about her life and her relationship with Steve. Together, Mary and the counsellor identify the primary issue for Mary is that she would still love to have children. They discuss her goals and objectives and agree on a plan to work on together, and with Steve, to achieve Mary's goals.

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