

BELAKU

(ALVA'S COUNSELING CENTRE)

Policies and Procedures Manual
Adopted December 2017

Belaku(ACC) Policies And Procedures Manual

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Vision, Mission, Objectives and Values

Date adopted: December 2017

Our Vision:

As an experience inter disciplinary team to serve the institution through counselling to enhance the clients' growth and accessible to mental health and preventive services in campus and community.

Our Mission

ACC is to empower the individuals and families, regardless of income, caste, creed to improve their lives by offering qualitative, preventive services for promotion of mental health with full-fledged and qualified inter disciplinary team and infrastructure

We are privileged to walk alongside with our clients as they navigate the uncertainties and challenges of life in the present circumstances and challenges. We provide professional support to the clients with care and compassion. It is through our strong relational connection that clients become empowered to move ahead in healing and resilient ways.

Objectives

1. To promote student friendly environment in the campus
2. To provide comprehensive mental health and preventive services to every individuals.
3. To empower the student to make responsible and meaningful choices in their lifespan
4. Empower students' coping mechanisms
5. Connect the students' interest, values, skills and personality in accordance with the world situation
6. Act with expertise in individual, group and family counselling with diverse clientele having personal, social, emotional, career and educational issues that impact development in their life span.
7. To develop leadership ability and advocate to meet clients needs and to remove individual and environmental barrier to develop

Our Values

1. We believe that client's Health and best interest are of utmost importance.
2. Confidentiality is the most priority
3. We treat people with humane, respect and dignity
4. We believe that all individual has their own capacity to changes
5. We are sensitive, empathetic, virtue, integrity with our client

Policy on Ethical Standards and Confidentiality

Date adopted: December 2017

- Belaku (ACC) professional staff adhere to the ethical standards of their respective professions: National Association of Social Workers (NASW)
- Of critical importance to Belaku (ACC) mission is maintaining ethical standards relating to the confidentiality of our services. The standard from NASW's (1999) Code of Ethics relating to "Privacy and Confidentiality" (Ethical Standards) serves as a general standard for all Belaku (ACC) professional staff and interns.

Policy on Counseling Services' Hours of Operation

Date adopted: December 2017

- Generally, Counseling Centre is open Monday through Saturday from 9:00 am to 6.30 pm for all students of AEF. There are no scheduled walk-in hours. Appointments are recommended for all counseling sessions to be sure a counsellor is available.
- Counselling appointments are made in one day before but emergency counselling services are available without appointment. The actual length of time for a counselling session is 45 minutes but may vary depend on cases and follow-up counselling session is 15 minutes.

Policy on Eligibility for Services

Date adopted: December 2017

- Currently all students of AEF are eligible to receive services at Belaku (ACC)
- Although the families of AEF students may attend occasional consultations together with an AEF student who is in counseling at Belaku (ACC).
- Belaku (ACC) does not offer court-mandated or forensically oriented services to AEF students.
- If AEF student require counseling or psychological services beyond those offered by Belaku (ACC). Counsellors may help the client to find community resource to meet their requirement.

Policy on After-Hours Services

Date adopted: December 2017

- Belaku (ACC) emergency cell phone will be active in all days.
- When the cell phone isn't active, emergency counselling services can be secured by contacting counselors at home (personal cell phone)
- The cell phone will be carried by the counsellor-on-call at all times, so that emergency services can be secured even during working hours.
- Instructions on calling the cell phone along with counsellors' Cell numbers will be available at hostel office
- Documentation of any services or consultations provided in response to cell phone activity will be made in student treatment files (if applicable). Counsellors should also document their rationale for how they respond to any given emergency call
- A crisis involving multiple members of the campus (e.g., death of a student). As a rule, One to one session with individual groups on campus when the activities are requested by the client.

Policy on Mandated Services

Date adopted: December 2017

- In as much as genuine counseling requires voluntary engagement on the part of clients, mandated counseling is largely untenable. When a mandated counseling session of evaluation is helpful to find risk behaviour of the client. There are some occasion, some unwilling students required to undergo an evaluation of risk to harm themselves or harm others. Due to safety of the students and their health, mentalhealth service may required. but mandated counselling session may leads to voluntary participants in counselling.
- Having stated this, it must also be emphasized that mandated psychological evaluations should be considered a last resort. Infact that counseling session become available at a place where students are easy to come for intervention treatment. The main vision of BELAKU is to providing counseling facility for the students will be foundationally undetermined. Circumstances under which mandated counseling at Belaku (ACC) does and does not occur
- Belaku (ACC) does not provide services to students who are required to receive mental health treatment or assessment by a court of law. Students seeking such services will be referred to the professionals in surrounding communities.
- Belaku (ACC) only accepts mandated evaluation cases from the AEF Student.
- As a rule, Belaku (ACC) only accepts mandated evaluation cases that can be completed over the course of one or two sessions. The only exception occurs when a student returns to AEF after a medical leave (or leave of absence) that comes about because of a suicide attempt or self-harm gesture. In such cases, the AEF Student may mandate that such students participate in ongoing evaluations of their danger to themselves over a period of several weeks but that may continue to till end of the course.

- Belaku (ACC) only accepts mandated evaluation cases for which the staff has the expertise and resources to offer competent evaluation. An example for which Belaku (ACC) cannot provide competent evaluation is one that requires expertise in forensic psychology. When Belaku (ACC) staff lack the necessary expertise or resources to offer competent evaluation, staff members may help to find appropriate resource or the student to identify any viable community resources. Communication between Belaku (ACC) staff and the AEF authority about students participating in mandated evaluation sessions
- Belaku (ACC) staff only provides information relating to students' mandated evaluation sessions to the AEF authority when students provide their written consent. The only exception occurs when a student presents a clear and imminent danger to self or others then BELAKU (ACC) staff actively work with the AEF authority to address the potential danger.
- When students give written consent to Belaku (ACC) staff to relay to the AEF authority information about their mandated sessions, the only information the authority insist on receiving relates to students' attendance for the counselling assessment sessions and information that has a significance on students' danger to themselves or others.
- Any communication between Belaku (ACC) staff and the AEF authority about students' mandated evaluation sessions will also involve the student in question. Thus, for example, the communication may take place during a face-to-face meeting with a authority that also includes the student,
- Any students mandated by the AEF authority to participate in an evaluation session(s) at Belaku (ACC) are also afforded the alternative of securing evaluations from appropriate mental health professionals in the community.

Policy on Services to Imminently Dangerous Students

Date adopted: December 2017

- In managing cases where imminent danger to a student or someone else is at issue, Belaku (ACC) staff will act to minimize the danger in consultation with their professional colleagues
- In keeping with professional ethics codes and legal requirements, maintaining the safety of students and others takes precedence over maintaining the confidentiality of clients. Even so, when the necessity reveal of confidentiality of the client information only the information crucial to contribution safety of client will be communicated to concern authority.
- In most circumstances, Belaku (ACC) and the families of significantly suicidal or self harm students will be notified of the situation so that they can provide support and help in making decisions about the student. The rationale for notifying or not notifying the concern authority and families in these circumstances will be carefully documented in students' files. The Concern authority will contact families of suicidal or self harm students unless the counsellor involved has a previous relationship with the family.
- Careful and prompt documentation will be made of consultations secured and steps taken to minimize danger.
- Counselors will follow the appropriate protocols of the College when a student has made a serious suicide threat or self-harm attempt.

Policy on Supporting Student Medical Leaves

Date adopted: December 2017

- Belaku (ACC) staff support student medical leaves from AEF when significant psychological problems (e.g., clinical depression) or personal concerns (e.g., serious illness in family) have markedly undermined a student's ability to function academically. The decision to grant a medical leave, however, is ultimately the responsibility of the Concern authority.
- Belaku (ACC) staff will document their support of a student's medical leave in the student's counseling folder. With the student's written permission, this documentation may be shared with the Concern authority.
- Whenever appropriate, Belaku (ACC) staff may recommend that a student who is granted a medical leave participate in treatment with a mental health professional before returning to AEF. The student may be asked by the Concern authority to provide evidence of having successfully participated in treatment when requesting to return from a medical leave of absence. There is a protocol of display information and format for client seeking to return from a medical leave.

Policy on Documentation of Services and Files

Date adopted: December 2017

- All counseling services provided to AEF students will be documented in student counseling files. Small book of case sheets copies of documents will be maintained.
- All “hard copy” documentation of services and other confidential information will be kept in filing cabinets in a locked room in Belaku (ACC). No case sheet will be removed and carried from the belaku office unless necessary of the legal proceedings or court order or other exceptional situation.
- Students will read the Consent form and if in agreement, will sign and date the form at the time of their first session.
- Recovery note will be finished with in 2 days of services. Recovery notes will include subjective and objective observations, assessment of need, and a plan for future services.
- Documentation of couples counselling will be made in each student’s individual file. References to a student’s romantic partner in such documentation should be limited to a nonspecific substitute(i.e., “partner,” “boyfriend,” etc.) or to the partner’s first name, so that the partner’s identify will be kept some level of confidentiality in the event of the client’s intervention treatment document is disclosed.
- Documentation of emergency or other services provided after regular working hours (including any services or consultations accessed by means of the emergency cell phone) will be completed as soon as practically possible, using the “follow-up” form.
- Documentation of any student’s permission to release confidential information will be made using Belaku (ACC) release form. The original will be kept in the student’s counselling file Copies of any correspondence (including e-mail messages) with or about clients will be included in student counselling files.
- All documentation of services completed by counsellors will include a signature block with the documenting counsellor’s name, degree.
- File should be maintained in a safety places and organized monthly order and most recent document will be on top.

Policy on Making Counselling Appointments

Date adopted: December 2017

- AEF students may make appointments to see the counsellor of their choice by going to orgiving call to Belaku (ACC). Students are required to give a name, section, batch no. and name of the hostel.
- Wardens are need to bring the students in right time , given appointment time and should not bring more student at a time without making appointment.Counsellor make effort to take the student for counselling session in given time.

Policy on Clients' Missed Appointments

Date adopted: December 2017

- Any student who misses an appointment will typically be encouraged to reschedule the appointment, usually by phone call. Any exceptions to this practice will be documented in the case file.
- In fairness to students wanting to secure timely services from Belaku (ACC), students require to keep their appointment in right time

Policy on Evaluation of Services

Date adopted: December 2017

- Students attending counselling sessions at Belaku (ACC) will be invited to complete an anonymous or with name paper-and-pencil feedback form.

Policy on Referrals to Health Services for Psychotropic Medicines

Date adopted: December 2017

- All referrals from the BELAKU (ACC) for higher treatment will be enabled using the referral form(sample form will be observed in the manual) A copy of these referral form will be maintained in case sheets and help to communication between hospitals staffs and counselors.
- As a rule, evaluations for psychotropic medications will be scheduled with Health Services' consulting physician. The physician's/ psychiatrist appointments typically are 10 minutes in length, and are not appropriate for a thorough psychiatric evaluation. The most common counseling referrals to the Health Services' physician/psychiatrist are for medications for depression and/or anxiety.
- In the event that a student requires a more thorough evaluation for psychotropic medication, the student will be referred to either a psychiatry practice in the community .The client should pay for their medical charges and doctor consultation fee in community based hospital settings.
- Urgent or emergency evaluations for psychotropic medications that cannot be accommodated using the procedures just described will be referred to the local hospital emergency room.
- When Belaku (ACC) refers a student to the Health Services' physician for psychotropic medications, the student is expected to continue to see the referring counselor. Number of counseling session during the period will be decided by the

counselors. The student will be asked to sign a Release of Information to the provider so the counselor can report that the student is continuing in counseling, and can report any concern doctor about clients using medication. The student has the option to see a counselor/therapist in the community instead of the AEF counselor who made the referral. In this case the client may requested by staff of hospitals to sign a release information with community related Service provider, permitting the community service provides to inform the concerns and attendance to the hospitals and other concern service providers.

Policy on Psychiatric Referrals in the Community and Psychiatric Hospitalisation

Date adopted: December 2017

- Students who need more intense services than can be provided by Belaku (ACC) will be referred to community mental health providers. Counsellors will make every effort to match the student with an appropriate community provider, and will provide any assistance needed to set up an initial appointment, although students are encouraged to make the initial contact. Client who safe services in the community is liable to pay of consultancy fees
- Most community providers, Some have a some fee structure for consultation for mental health services. A list of community mental health services providers is available in the community. Students who are in crisis typically will be transported to the local hospital emergency room by AEF van for safety and liability reasons. if intervention or treatment in the casualty room physician may decide that hospitalisation is required the client will encouraged to give consent to a voluntary hospitalization, if client does not give consent or unable to give consent to voluntary hospitalization, a 24 hours immediate hospitalization or a 72 hours emergency hospitalization will be follow in order to confirm the safety and well being of the client. The office of the hostel/ wardens/ student welfare officer will contact the family member/s in the event of a hospitalization as per their policies and procedures.

Policy on Maintaining Belaku (ACC) Website Page

Date adopted: December 2017

- Given the important and growing role Belaku (ACC) website plays in informing students, parents, faculty, and staff about services, the coordinator/ In charge of Belaku (ACC) will maintain website page. Belaku (ACC) aspires to have a comprehensive website page <https://alvascollege.com/student-corner/counselling-center/>. The coordinator/ Incharge of Belaku (ACC) also maintains information on the Counselling channel.

Policy on Research Projects

Date adopted: December 2017

- Research projects initiated by the Belaku (ACC) staff or conducted in partnership with other entities must meet the relevant AEF guidelines and be approved by the concern authority. Research projects should not be unduly time-consuming to either students or counseling staff, and should not interfere with the normal operation of Belaku (ACC) .

Policy on Assessments of Danger to Self or Others

Date adopted: December 2017

- Belaku (ACC) staff often plays an important role in assessing a student's danger to self or others. Such assessments may also be secured from qualified mental health professionals in the community, at the discretion of the involved or request of the student.
- Whatever the source of the assessment, its viability hinges on the student's active cooperation. A student who refuses to come to Belaku (ACC) or who is not forthcoming with Belaku (ACC) staff, effectively nullifies the possibility of a meaningful assessment.

Belaku (ACC) SCOPE OF PRACTICE

- Belaku (ACC) provides short-term/briefsupportive individual counseling , family counselling for AEF Students. Group counseling services also available as per their needs. Services will be provided by counselors of BELAKU.This services are made for student with a number of session and to increase their ability to be effective and successful in their educational personal and family lives. Due to limited resources, a model of brief, goals-oriented counseling is used in Belaku (ACC) . A student is seen by number of sessions. these sessions decided by counsellor and it depend on intensity of the case . Students are liable for the payment of charges of outside camus services. Referrals will be made with students’ needs in mind, after meeting with Belaku (ACC) counselor, who will follow up with students to assure that a good referral was made. All students are eligible for Belaku (ACC) crisis interventionservices.
- Belaku (ACC)provides the following Crisisintervention services.
 - Short-term/Long-term counseling for such matters as: anxiety, depression, loneliness, identity, stress management, time management, disorderedeating concerns, alcohol/drug use/abuse, relationship concerns, grief and loss, family stress, sexual orientation, homesickness, developmental issues, and personal growth and development.
 - Help the student who have been diagnosed with one or more long term mental ill health conditions for referrals to community resources, work on short term focused goals and crisis.
 - Skills enhancement for educational success like self-esteem, time management, stress management,coping skills, anxiety management,motivationalskills. Brief counseling and support counseling forthe client recovering from interpersonal violence or/ and sexual violence.
 - Assessments and referrals to other campus resources, such as Health Services referral to community resources, particularly for students whose presenting concerns are beyond Belaku (ACC) scope of practice.
 - Mental healthout reachprogramme consultation, and education programs for students, staff and faculty. Limited Service Belaku (ACC) does not provide long-term intensive counseling and psychotherapy. It is beyond Belaku (ACC) scope of practice to provide ongoing counseling and psychotherapy for students who may be diagnosed with a variety of serious, long-term psychiatric conditions, and individuals who appear to be a recurring high risk to themselves or to the AEF community.
 - Belaku (ACC) does not provide treatment services for substance use/abuse. Counselors will attend the client’s requirement, such intervention for a short time session for provide emotional support to assess the clients requirement and referral to community services.
- Belaku (ACC) does not prescribe or monitor psychotropic or any other medications. At students’ request, counselors will make a referral to Alva’s Health Services or a community health service provider for medicalevaluation.

Standard on Privacy and Confidentiality from NASW's Code of Ethics, Privacy and Confidentiality

1. Social workers should respect clients' right to privacy. Social workers should not disclose private information from clients unless it is essential to providing services or conducting social work evaluation or research. Once private information is shared, standards of confidentiality apply.
2. Social workers may disclose confidential information when appropriate with valid consent from a client or a person legally authorized to consent on behalf of a client.
3. Social workers should protect the confidentiality of all information obtained in the course of professional service, except for compelling professional reasons. The general expectation that social workers will keep information confidential does not apply when disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client or other identifiable person. In all instances, social workers should disclose the least amount of confidential information necessary to achieve the desired purpose; only information that is directly relevant to the purpose for which the disclosure is made should be revealed.
4. Social workers should inform clients, to the extent possible, about the disclosure of confidential information and the potential consequences, when feasible before the disclosure is made. This applies whether social workers disclose confidential information on the basis of a legal requirement or client consent.
5. Social workers should discuss with clients and other interested parties the nature of confidentiality and limitations of clients' right to confidentiality. Social workers should review with client's circumstances where confidential information may be requested and where disclosure of confidential information may be legally required. This discussion should occur as soon as possible in the social worker-client relationship and as needed throughout the course of the relationship.
6. When social workers provide counseling services to families, couples, or groups, social workers should seek agreement among the parties involved concerning each individual's right to confidentiality and obligation to preserve the confidentiality of information shared by others. Social workers should inform participants in family, couples, or group counseling that social workers cannot guarantee that all participants will honor such agreements.
7. Social workers should inform clients involved in family, couples, marital, or group counseling of the social worker's, employer's, and agency's policy concerning the social worker's disclosure of confidential information among the parties involved in the counseling.
8. Social workers should not disclose confidential information to third-party payers unless clients have authorized such disclosure.
9. Social workers should not discuss confidential information in any setting unless privacy can be ensured. Social workers should not discuss confidential information in public or semipublic areas such as hallways, waiting rooms, elevators, and restaurants.
10. Social workers should protect the confidentiality of clients during legal proceedings to the extent permitted by law. When a court of law or other legally authorized body orders social workers to disclose confidential or privileged information without a client's consent and such disclosure could cause harm to the client, social workers should request that the court withdraw the order or limit the order as narrowly as possible or maintain the records under seal, unavailable for public inspection.

11. Social workers should protect the confidentiality of clients when responding to requests from members of the media.
12. Social workers should protect the confidentiality of clients' written and electronic records and other sensitive information. Social workers should take reasonable steps to ensure that clients' records are stored in a secure location and that clients' records are not available to others who are not authorized to have access.
13. Social workers should take precautions to ensure and maintain the confidentiality of information transmitted to other parties through the use of computers, electronic mail, telephones and telephone answering machines, and other electronic or computer technology. Disclosure of identifying information should be avoided whenever possible.
14. Social workers should transfer or dispose of clients' records in a manner that protects clients' confidentiality and is consistent with state statutes governing records and social work licensure.
15. Social workers should take reasonable precautions to protect client confidentiality in the event of the social worker's termination of practice, incapacitation, or death.
16. Social workers should not disclose identifying information when discussing clients for teaching or training purposes unless the client has consented to disclosure of confidential information.
17. Social workers should not disclose identifying information when discussing clients with consultants unless the client has consented to disclosure of confidential information or there is a compelling need for such disclosure.
18. Social workers should protect the confidentiality of deceased clients consistent with the preceding standards

Forms & Handouts

BELAKU

ALVA'S COUNSELLING CENTRE
NEW P.G. BUILDING, VIDYAGIRI, MOODABIDIRE
Contact No. 91 7353311573, Off. No. 08258 236385

Email: alvascounsellingcell@gmail.com website: www.alvascollege.com

CONCENT FORM

Students come to Alva's Counselling Centre (ACC) for a variety of problems and concerns. Typically, a client will be take for an counselling intake/evaluation process that may take a 1or 2 sessions. During that time the student and a counsellor will work together to determine what might prove most helpful to the student. In most cases, this will involve brief individual or group psychotherapy at ACC. Students need ongoing, weekly therapy, or specialized care are assisted in finding appropriate referrals to other settings.

At ACC, individual sessions are 30-45 minutes long and group sessions ranges from 1 hours. Please attend with your appointment of counselling on time we are unable to extend the counselling session due to shortage of time. Students are expected to make every effort to cancel appointments 24 hours in advance so that another student in need of an appointment can use that time.

Involvement in Administrative Actions:

Students sometimes come to ACC requesting intervention on their behalf in response to academic or disciplinary difficulties. As a matter of policy, ACC does not intervene in related administrative decisions regarding individual students

Staff Supervision and Consultation:

The staffs of ACC is comprised of professionals with differing areas of expertise, and includes those who work under the supervision of senior staff. To provide you with the best service possible, we may discuss your situation with other staff members of ACC. In addition, some information is gathered and used to takeout for administrative tasks. All collected information shared with the professionals is kept confidential.

Privacy of Information and Confidentiality:

ACC will release information regarding a student's use of the services or personal information only if the student signs a written authorization that meets certain legal requirements, or in certain rare situations which legally essential us to reveal this information without concern of the client's consent. A client may authorize ACC to release records or to disclose other information to individuals of the client's choosing. The following circumstances do not require the consent of the client.

Child Abuse: If we find a minor child is suffering from physical or emotional damage resulting from abuse which is harmful and notable risk of harm to child physical and psychological health or welfare include child sexual abuse, malnutrition or neglect. We believe that we must report to the concerned state department of social services.

Health Oversight: The licensing authorities of the professions represented in ACC have the power, when necessary, to subpoena relevant records should any counsellor be the focus of an inquiry.

Judicial or Administrative Proceedings: We will not disclose any kind of information without written consent from the client or court order or legal appointed representative by the client. If the client is involved in any legal proceedings.

Serious Threat to Health or Safety: If you communicate to your counsellor an explicit threat to kill or inflict serious bodily injury upon an identified person and the concerned authority will take necessary precaution such as warning the potential victims and arranging for hospitalisation of the client must be done by the concerned authority when there is a threat by the client to others or threat by the himself/herself.

Professional Records: ACC is required to keep records of your contacts with us. Counselling records include reasons for consulting with ACC, diagnosis (if appropriate), client's social and medical history, any past treatment records received from other providers, notations of any professional consultations. Clients may examine and/or receive a copy of their clinical record, if requested in writing, unless the Counsellor believes that such access might be harmful to the client. In those situations, clients have a right to a summary and to have the record sent to another mental health provider or to a designated legal representative. Due to their authorisation, clinical information can be misinterpreted to untrained readers. Accordingly, we may determine that clients should review their records in the presence of their counsellor.

Your signature below indicates that you have read Information about Services and agree to the conditions it describes.

Students ID:

Birth date:

Name:

Residence or hostel address:

Preferred phone number:

Email:

May ACC contact you by email? Please check: Yes No

May ACC send you text message appointment reminders?

Please check: Yes No

Signature: Date:

Signature of the support Person: Date:

Relationship:

Case History

1. Socio-demographic profile :
 - a. Name of the client :
 - b. Age :
 - c. Sex :
 - d. Marital status :
 - e. Educational qualification :
 - f. Occupation :
 - g. Income/ family income :
 - h. Religion :
 - i. Permanent Residence (With Contact no.) :
 - j. Present Address (With Contact no.) :
2. Referred by :
3. Informant :
4. Emotionally attached with :

5. Relationship towards :

A	Teachers	Cordial	Uncordial Mild/Moderate/Severe
B	Peers	Cordial	Uncordial Mild/Moderate/Severe
C	Wardens	Cordial	Uncordial Mild/Moderate/Severe
D	SWO	Cordial	Uncordial Mild/Moderate/Severe

6. Habits :

7. Hobbies/interests :

8. Family type :

Nuclear(), Extended (), Joint ()

9. Family history :

Sl. No	Name	Age	Sex	Relationship with Client	Educational qualification	Occupation	Health
1							
2							
3							
4							
5							
6							

10. Family Tree :

11. Childhood history :

12.Chief complaints :

13.History of present illness :

14.History of physical Illness (If any):

15.History of Psychiatric Illness (If any) :

16.Pre-morbid personality :

17.Mental Status Examination :

a. General appearance and behavior :

b. Mood :

c. Perception :

d. Thought :

e. Memory :

f. Judgment :

18.Emotional reaction of the client :

1	Shock		2	Crying spells	
3	Anger		4	Loneliness	
5	Fear/anxious/worries		6	Isolated/rejected	
7	Denial		8	Guilt	
9	Sad/grief				

19. Diagnosis :

20. Referred to :

20. Treatment plan :

Signature of the Counsellor

Signature of the Client

Signature of the Support Person with relationship

Address :

.....

.....

Date

Follow up Treatment:

BELAKU

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NEW P.G. BUILDING, VIDYAGIRI, MOODABIDIRE
Contact No. 91 7353311573, Off. No. 08258 236385

Email: alvascounsellingcell@gmail.com website: www.alvascollege.com

New Client Information form

Please fill this form before seeing a counsellor (New Client Only).

Name:

Class:

Combination:

Batch:

Permanent Address:

Contact No.:

Have you received any previous counseling or therapy?

If yes, when, where and how long?

OPTIONAL:

Are you received any prior mental health services, by whom? Please list:

What medications if any, are you taking, and who is the prescriber?

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BELAKU

ALVA'S COUNSELLING CENTRE

A UNIT OF ALVA'S EDUCATION FOUNDATION (R)

New PG Building, Vidyagiri, Moodbidri, D.K.-574227

Contact no. 91 8748022825, Off. no. 08258 236385

Email: alvascounsellingcell@gmail.com website: www.alvascollege.com

Follow-up card

Name:

Date of Intake:

Sl. No.	Date	Remarks	Signature of the counsellor
1			
2			
3			
4			
5			
6			
7			

BELAKU

ALVA'S COUNSELLING CENTRE
NEW P.G. BUILDING, VIDYAGIRI, MOODABIDIRE
Contact No. 91 7353311573, Off. No. 08258 236385

Email: alvascounsellingcell@gmail.com website: www.alvascollege.com

Consent to Release Confidential Information Form

I,the undersigned, hereby authorize
BELAKU(ACC) to exchange with:

Name:

Address:

Phone No.:

any information as may be listed below. I acknowledge that I understand the purpose of the
request and that authorization is hereby granted voluntarily.

Student Information:

Student Name :

Address:

Phone No. : Date of Birth (mm/dd/yy):.....

Requested Information or Documents:

Summary of Counseling Sessions

Diagnostic Impression

details of Continuity of Care

Other details:

.....
.....
.....

NOTE: I understand that this release is valid for a period of Ninety (90) days. I understand
that I may revoke or cancel this consent at any time in writing.

Dated this..... day of

By my signature below, I consent to the release of the above listed information.

Name of Student:

Signature of Student:

BELAKU

ALVA'S COUNSELLING CENTRE
NEW P.G. BUILDING, VIDYAGIRI, MOODABIDIRE
Contact No. 91 7353311573, Off. No. 08258 236385

Email: alvascounsellingcell@gmail.com website: www.alvas.org

REFERRAL FORM

Date:.....

Student's name:.....

Length of time Student has been seen in Counselling:.....

Student's Presenting Symptoms:.....

.....

.....

.....

Student's Current Medications:.....

.....

Student's Mental Health History:.....

.....

.....

Relevant Family History:

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Diagnostic Impression:

Counsellor's Name and Signature with date:

BELAKU
ALVA'S COUNSELLING CENTRE
NEW P.G. BUILDING, VIDYAGIRI,
MOODABIDIRE

CLIENT FEEDBACK FORM

Name (optional):

Tick () mark on the appropriate response

1.	Counselling sessions are useful?	a) Highly useful b) Useful c) Useful for some extent d) Not useful
2.	Do you feel counsellors are attentive?	a) Highly attentive b) Attentive c) Attentive for some extent d) Not attentive
3.	After counselling sessions, you are felt.....	a) Highly relaxed b) Relaxed c) Relaxed for some extent d) Not relaxed
4.	Are you hopeful about the solution of your problem?	a) Highly hopeful b) Hopeful c) Less hopeful d) Not hopeful
5.	Your suggestions to improve counsellingcentre a. b. c.	

Date:

Signature of the Client