# SWC01 — PHONE COUNSELLING REGISTRATION FORM (NEW CLIENTS)



This form is for new counselling clients.

Please complete and email this form to <a href="mailto:student.counselling@vu.edu.au">student.counselling@vu.edu.au</a> one day prior to your counselling appointment.

Please note: The Victoria University (VU) Counselling Service is not a crisis service. If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).

Personal and study related counselling is provided to students on a short term basis which usually involves one to six sessions. There are limitations on the types of assistance that can be provided (for example, reports/letters for external agencies, and for legal/forensic purposes) that you should discuss with your counsellor if relevant.

VU is moving to phone counselling in response to the current COVID-19 pandemic. Phone counselling means that you and your counsellor are no longer in the same room. Your counsellor will therefore need to learn more about your situation before your first appointment.

If you are completing a hard copy of this form, please write in BLOCK LETTERS using a black or blue pen.

1. PERSONAL DETAILS				
Student ID	Family name			
Given names	Date of birth			
Preferred phone	Preferred email			
Address				
Course				
Are you an international student?	No Yes (state your country of origin)			
Are you of Aboriginal and/or Torre	s Strait Islander origin? Yes No			
If yes, would you like to be referred to Moondani Balluk – a culturally safe and supportive place for Aboriginal and Torres Strait Islander students to receive support?				
Yes, please refer me	o, I don't want to be referred			
Are you from a Culturally and Ling	guistically Diverse Background Yes No			
Ethnicity				
Language(s) spoken other than				
Emergency contact				
Name				
	Phone			
3. YOUR SITUATION				
1. Goals				
What is the nature of the problem	you are seeking assistance with?			
Why have you contacted us now?				
How do you understand the problem?				
What do you think will help?				
How have you tried to solve the problem so far? How did it work?				

When the problem is not present (or is not so bad) what is going on differently?
2. Supports  Have you been in counselling or therapy before?
GP name
GP contact details
What other services or supports have you used before to help you with a problem similar to this one?
Are you currently taking any medications? Yes No (go to Section 3)
What medications are you taking?
What are these medications for?
<ul><li>3. Chronic pain</li><li>Are you currently experiencing any chronic pain? Yes No (go to Section 4)</li></ul>
How long has this been happening?
How often does it happen?
How does it affect your daily functioning?
<ul> <li>4. Sadness, grief or depression</li> <li>Are you currently experiencing overwhelming sadness, grief or depression? Yes No (go to Section 5)</li> </ul>
How long has this been happening?
How often does it happen?
How does it affect your daily functioning?
<ul> <li>5. Anxiety, panic attacks or phobias</li> <li>Are you currently experiencing anxiety, panic attacks or have any phobias?</li> <li>Yes</li> <li>No (go to Section 6)</li> </ul>
How long has this been happening?
How often does it happen?
How does it affect your daily functioning?
6. Sleep and appetite  How would you rate your current sleep habits? Good Fair Poor
Have you noticed changes in your appetite? Yes No
7. Sensations
Are you currently hearing or seeing things that other people can't see or hear? Yes No (go to Section 8)
How long has this been happening?
How often does it happen?
How does it affect your daily functioning?
8. Unusual beliefs
Are you having any unusual beliefs that are out of context? Yes No (go to Section 9)
How long has this been happening?
How often does it happen?
How does it affect your daily functioning?

How would you rate your current sleep habits?(e.g. hygiene) Good Fair Poor				
10. Substance use				
When did you last use a legal or illegal drug in a way that was a problem for you?				
Never Over a year Over three months Over a month Over a week This week Today				
When did you last use alcohol in a way that was a problem for you?				
Never Over a year Over three months Over a month Over a week This week Today				
11. Harm from others				
Has anyone done anything to make you or your children feel afraid? Yes No (go to <b>Section 12</b> )				
In what ways do you or your children feel unsafe?				
Do you have any immediate concerns about your safety, or the safety of your children?				
What are the name(s) and date(s) of birth for your child/ren?				
If yes, do you feel safe today? Yes No				
If you are in immediate danger, call 000. For family violence support call 1800RESPECT(1800 737 732).				
12. Harm to others				
Are you concerned you may harm someone? Yes No (go to Section 13)				
Who are you concerned about harming?				
Who are you concerned about harming?  How are you concerned you may harm them?				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self  How long has it been since the last time you've harmed yourself?				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self  How long has it been since the last time you've harmed yourself?  Never Over a year Over three months Over a month Over a week This week Today				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self  How long has it been since the last time you've harmed yourself?  Never Over a year Over three months Over a month Over a week This week Today  If you have harmed yourself:				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self  How long has it been since the last time you've harmed yourself?  Never Over a year Over three months Over a month Over a week This week Today  If you have harmed yourself:  In what way have you harmed yourself?				
How are you concerned you may harm them?  If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).  13. Harm to self  How long has it been since the last time you've harmed yourself?  Never Over a year Over three months Over a month Over a week This week Today  If you have harmed yourself:  In what way have you harmed yourself?  How long has this been happening?				

If you are in an emergency situation that requires immediate attention or are feeling suicidal or considering harming yourself or someone else, please call 000 immediately. Alternatively, if your life is not in immediate danger, please call Lifeline on 13 11 14 or Kids Helpline on 1800 55 1800 (for students aged 25 years and under). For sexual assault, domestic violence and abuse, please call 1800 737 732 (1800RESPECT).

# 4. COUNSELLING SERVICE TERMS

# Phone counselling

Calf care

We want you to understand how phone is different to face-to-face counselling so you can make an informed decision.

- · At the start of the session, the counsellor will ask you to confirm your current location and address.
- · You are responsible for providing your counsellor with the correct phone number to call you.
- · Your counsellor cannot assess what you are saying using non-verbal communication.
- It is possible that your own and/or the counsellor's phone lines may not be operational or disconnect during a session.
- The counsellor cannot verify your identity. You and your counsellor may decide to use a code word at the start of the session to assist with verifying your identity and you are responsible for keeping this code word confidential.
- You and your counsellor will need to develop a plan outlining alternative support options if your situation becomes more severe.
- You and your counsellor may decide counselling on the phone is not suited to your personal circumstances and you and your counsellor will need to develop a plan to find alternative counselling services.

- · You need to provide written consent to participate in phone counselling before your first phone counselling session.
- · A counsellor will advise emergency services (police, ambulance, fire brigade) of your location in the case of an emergency.
- A counsellor may request you provide the contact details of an emergency contact person known and local to you and the counsellor can contact this emergency contact person to confirm your safety.
- You have the right to decline phone counselling anytime while understanding that VU cannot deliver an alternative to phone counselling to you.
- VU is not responsible for any costs incurred by you in engaging in phone counselling.

## **Confidentiality statement**

Information gathered by the counsellor will remain confidential and secured online on University servers. However, I understand that at times information may be passed to other people if:

- a) it is subpoenaed by a court or if disclosure is otherwise required or authorised by law
- b) it is to protect my safety and/or the safety of others
- c) my prior approval, usually in a written form, has been obtained to:
  - · provide a written letter to another person or agency, either internal or external to VU
  - · discuss the material with another person, either internal or external to VU.

VU's privacy policy can be viewed at vu.edu.au/privacy

I also understand that information I provide may be collected and used to generate non-identifying statistics in organisational reporting for the purpose of service evaluation, quality improvement, service planning, and assessment of services needs and functioning. If I wish to access my records at any time, I can contact the VU Freedom of Information Officer.

We email the counsellor feedback questionnaires to monitor and improve our services. You will receive a copy of this to your VU and preferred email address. Please let us know if you do not wish to receive this email.

I do not wish to receive the counsellor feedback qu	oack questionn	ıaıre
---	----------------	-------

## 5. STUDENT DECLARATION

- · I have read and understood the confidentiality statement.
- · I declare the above information provided by me is true and completed in full.
- I have read the Privacy Policy and I agree to abide by the regulations and policies of VU.

Signature	Date	
	OFFICE USE ONLY	
I have discussed the information	on with the student named above.	
Name		
Signature	Date	

### PRIVACY STATEMENT

Victoria University (VU) values your privacy and is committed to handling your personal information in accordance with the Privacy and Data Protection Act 2014 (Vic) and other applicable privacy legislation. The personal information collected on this form will be used primarily for the purposes of assessing and processing this application. VU may also use and disclose your personal information to verify the information provided by you, to comply with government and other reporting requirements and/or to carry out associated activities connected with this application. Your personal information may also be disclosed to Commonwealth and State agencies such as the departments of education and the Department of Home Affairs in accordance with VU's obligations under the Education Services for Overseas Students Act 2000 (Cth) (ESOS Act), the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code) and other applicable legislation. Your personal information will not otherwise be used or disclosed without your consent, unless permitted by law. By completing and submitting this application, you agree to VU collecting, using and disclosing your personal information as described above and in accordance with VU's Privacy Policy and Student Information Privacy Collection Statement (which provides further detail about the types of personal information VU may collect from you and how it is managed) available on the Privacy page on our website <u>vu.edu.au/privacy</u>

You have a right to access your personal information held by VU. If you have any questions regarding privacy, please refer to the <a href="Privacy page">Privacy page</a> on our website, our frequently asked questions at <a href="ASKVU">ASKVU</a> or phone us on 9919 6100 or 1300 VIC UNI (or 1300 842 864).

PRIVACY INFORMATION: We collect and protect your personal information in accordance with our Privacy Policy vu.edu.au/privacy.

**CONTACT US** 

If you have any questions, you can access **ASKVU** (askvu.vu.edu.au), speak to us via live chat or call us on **+61 3 9919 6100**.

Our **VUHQs** are located at the following campuses:

City Flinders
City King

City Queen Footscray Nicholson Footscray Park Sunshine St Albans Werribee