



Privacy notice – Open Arms will collect the client's personal information for the purpose of offering counselling services to the client. The information you provide in this form will allow us to make contact with the client and to discuss their needs. Open Arms may disclose the client's personal information without their consent in certain circumstances for example: we believe there is a serious threat of harm to the client or another person, or we are required to by law.

If you would like more information on how we manage personal information, please visit the DVA website at <https://www.dva.gov.au/privacy-policy>

Client demographics

1. **Client's name**

Surname

Given name(s)

2. **Client's date of birth**

3. **OA referral number**

Recommendation

4. **Recommendation** (*Select one*) Close Continue

5. **Case review checkpoint – report submitted at session:** (*Select one*) 10 20 30 Other – please specify

6. **Number of further sessions required**

7. **Frequency of sessions** (*Select one*) Weekly Fortnightly Monthly Other – please specify

8. **Comments – if recommending case closure, please include your rationale. If the client has disengaged, please include attempts to contact client**

Summary of previous reports, goals and status

9. Please list each of the previous report's goals and answer the questions for each goal.

Goal 1

This goal has:

Been met Been partially met Not been met

What behavioural evidence supports your claims regarding the achievement of this goal – for example: changes in Outcome Assessment scores, return to activity, self-report from client

Provide a summary of what intervention was conducted during the preceding sessions (you might like to report what has been done, what is left to do, the client's response to the intervention)

Goal 2

This goal has:

Been met Been partially met Not been met

What behavioural evidence supports your claims regarding the achievement of this goal – for example: changes in Outcome Assessment scores, return to activity, self-report from client

Provide a summary of what intervention was conducted during the preceding sessions (you might like to report what has been done, what is left to do, the client's response to the intervention)

Goal 3

This goal has:

Been met Been partially met Not been met

What behavioural evidence supports your claims regarding the achievement of this goal – for example: changes in Outcome Assessment scores, return to activity, self-report from client

Provide a summary of what intervention was conducted during the preceding sessions (you might like to report what has been done, what is left to do, the client's response to the intervention)

Goal 4

This goal has:

Been met Been partially met Not been met

What behavioural evidence supports your claims regarding the achievement of this goal – for example: changes in Outcome Assessment scores, return to activity, self-report from client

Provide a summary of what intervention was conducted during the preceding sessions (you might like to report what has been done, what is left to do, the client’s response to the intervention)

Goal 5

This goal has:

Been met Been partially met Not been met

What behavioural evidence supports your claims regarding the achievement of this goal – for example: changes in Outcome Assessment scores, return to activity, self-report from client

Provide a summary of what intervention was conducted during the preceding sessions (you might like to report what has been done, what is left to do, the client’s response to the intervention)

10. Were/are there any barriers to completing the goals of the previous report?

No
Yes ► Give details

11. Were/are there any new situations/presenting problems that have arisen?

No
Yes ► Give details

Goals, strategies and outcomes

12. If you are requesting further sessions, this section must be completed.

List goals of client

Include the therapeutic interventions used to meet the goals and the expected outcomes in relation to each goal. The goals should be client-centred and focused on the client's goals. It may be beneficial to use specific, measurable, achievable, relevant and timely (SMART).

- **Goals:** These are usually behavioural and measurable goals. For example, reducing anxiety, improve sleep or acquire skills to better manage anxiety symptoms.
- **Strategies:** These are the interventions you will utilise to address the above. You can be more specific about which elements of interventions you will use. You may want to specify a modality for example, CBT and ACT to reduce anxiety and improve sleep, and/or Diffusion strategies, PMR and Thought Records/Cognitive Restructuring.
- **Outcomes:** This is what you expect will happen to show the goal has been achieved. Usually there will be one outcome for each goal. For example, reduction in particular psychometrics or a return to specific function.

Goal 1

Strategy

Outcome

Goal 2

Strategy

Outcome

Goal 3

Strategy

Outcome

Goal 4

Strategy

Outcome

Goal 5

Strategy

Outcome

Outcomes assessments results

13. Have Outcome Assessments been completed for inclusion in this report?

No

Yes ► Provide comments or observations of the results

Attendance history

14. Enter session dates and attendance

Risk update

15. Please provide an update on the client's current risk state (Harm to self, to others and from others)

A safety plan should be developed if indicated in the Summary of Risk section in the RAMP.

16. Have you reviewed the previous RAMP?

No ► Go to **next section**

Yes

17. Has the client's risk changed?

No ► Go to **next section**

Yes

18. Have you amended the previous RAMP or completed a new RAMP?

No

Yes

Client exit plan

19. Transition to closure ideally occurs when clients have achieved agreed goals or have goals which are better supported through an alternative service.

Exit planning should be discussed with the client from the beginning of care and should cover the episodic model of care, the anticipated length of the episode of care, planned post exit supports (for example, a general practitioner (GP), another health professional, probation and parole, NDIA support, aged care, or a psychiatrist), that client is aware of re-entry provisions and client agreement with the treatment plan.

20. Case Review prepared by:

Counsellor name

Date