THE FIRST SESSION PROCESS

inSync for life Psychology

1. Introduction and Rapport Building

comfortable environment, build rapport.

- **Greeting:**
- **Warm welcome Small Talk: Ease into the session.**
- **Explain the Session: outline what to expect.**

2. Confidentiality, Consent, Admin

client understands confidentiality gives consent.

- **Explain (limited) Confidentiality: privacy .**
- **Obtain Consent to the process.**
- **Complete Administration tasks**

‘Hypothesis’ testing
The initial moments of meeting a client are crucial: early insight into behavioural and emotional indicators of client

inSync for life Psychology

3. Understanding Presenting Issues (hypothesis building)

a. client's main concerns.

Open Ended Inquiry: get the client *to just talk*, without specified direction.

allows for:

- **understanding of thoughts, feelings, and underlying issues, patterns or themes that might not emerge through structured questioning.**
- **empowers client validating experiences, concerns**
- **allows for spontaneous conversation revelation of concerns, comprehensive view of difficulties.**

3. Understanding Presenting Issues (hypothesis building) cont'd

b.Then: "What brings you here today?"

follow up, open ended questions for depth and impact of the issue/s.

'Dig Deeper'

formulate 'hypotheses' – what's happening for the client

Allows you and the client determine goals of counselling.

Dig Deeper:

- **Ask questions to uncover underlying thoughts and motivations.**
- **Explore emotions and beliefs to help clients articulate deeper feelings.**
- **Identify patterns in behavior and thoughts to reveal core issues.**
- **Gently challenge inconsistencies to understand true feelings and experiences.**

c. Formal Testing: Pre, mid, post sessions

DASS, BDI and so on.
Prior to, during or at end of first session

Consider the APA Self Rated Level 1 Cross Cutting Symptom Measure (see later).

---

4. Relevant Background Information

personal and medical history Link to Presenting issues… hypotheses

Remember, 'Dig Deeper' if necessary.

- **Open Ended Questions: "Tell me about family, work, and medical history"**
- **Specific Questions: "Can you describe your alcohol consumption?"**
- **Direct/Targeted Questions: "It sounds like you are drinking nearly every day. Is that correct?"**
- **NOTE:**

Maintain curious disposition – genuine interest, open mind

5. Set Initial Goals

clear, unambiguous primary goal

can be altered or 'set aside'

goal is clear, unambiguous:

1) what the client hopes to achieve. (the 'Goal')
2) starting point – where client is now. (testing?)
3) end point where client wants to be (outcome)
4) realistic, achievable? measurable?
5) what needs to be different to achieve outcome?
6) Prioritise 5) factors
7) Client skills and strategies to learn, to address 6).

beginning of treatment plan.

Multiple goals, ambiguous? See later

---

6. Psychoeducation – Outline Plan

- Unlikely to develop treatment plan in session one
- discuss outline with client: sessions
- explain relevant psychological Concepts: how therapy works – need for future sessions
- clarify expectations: Set realistic expectations for therapy outcomes

7. Summarise and Close

- Recap the session client feels heard.
- Summarise Key Points: especially presenting issues and goal development
- Outline plan going forward.
- Get client's understanding of session
- Reassure client, address concerns.
- Set date for next session

Some further points

Digging Deeper Techniques

Open Ended Questions:

Ask questions that require more than a yes/no answer.

Example: "Can you tell me more about that experience?"

Reflective Listening:

Mirror the client's words to prompt further elaboration.

Example: "You mentioned feeling overwhelmed. What does that feel like for you?"

Clarification:

Request clarification on vague or ambiguous statements.

Example: "When you say you feel 'stuck,' what exactly do you mean?"

Digging Deeper Techniques cont'd

Exploring Consequences:

Discuss the implications of the client's thoughts or actions.

Example: "How do you think this behaviour impacts your relationships?"

Connecting Past and Present:

Link current issues to past experiences to identify root causes.

Example: "How does this situation remind you of past experiences?"

Multiple Presenting Issues

Choosing the most appropriate Goal

ABCDE Model

prioritisation framework to address multiple presenting issues by evaluating them based on specific criteria:

***Affect*:**

Assessing emotional distress.

***Behaviour*:**

Evaluating problematic or harmful behaviours (eg, substance, aggression, avoidance).

Cognition:

identifying maladaptive thought patterns

Duration:

Consider how long issue persisted

Effect on functioning:

Determining impact on daily life (social, intimate, work)

helps identify and prioritise most urgent and impactful issues.

inSync for life Psychology

Example ABCDE

Presenting Issues:

Relationship, work related, anxiety, depression, alcohol.

1. Affect:

Anxiety

Priority Level: High

Reason: significant emotional distress affecting client's wellbeing most intensely.

2. Behaviour:

Withdrawal, alcohol (moderate)

Priority Level: High

Reason: impair daily functioning, affecting ability to perform at work and in personal life.

3. Cognition:

Depression, distorted thinking

Priority Level: Medium

Reason: involves maladaptive thought patterns, worthlessness or hopelessness, needs to be addressed.

Example ABCDE

4. Duration:

Relationship Problems

Priority Level: Lower

Reason: relationship problems have been persistent but not causing immediate crisis, addressed after more urgent issues. Alcohol, work more recent. Anxiety, long-term.

5. Effect on Functioning:

Work related Problems

Priority Level: Medium

Reason: work related problems may lead to problematic behaviours like absenteeism or reduced productivity, impacting their professional life. Reduced socialisation.

Counselling Approach:

Initial Focus:

Address anxiety

to reduce emotional distress and improve overall wellbeing.

Concurrent Strategies:

Implement interventions for work related issues to enhance daily functioning and reduce work related stress.

Subsequent Sessions:

Medium priority Issues: Develop strategies to improve daily functioning.

Long Term Focus: Once immediate distress is managed, shift to relationship issues and deeper cognitive work related to depression.

Overall Wellbeing: Ensuring stability and overall wellbeing by addressing long-term issues.

inSync for life Psychology

Use of Structured Assessment Tools

- prioritise presenting issues: (baseline) systematically evaluate severity and impact. provide a clear, evidence based way to determine which issues are most pressing
Example Tools: BDI, GAD7, BAI

Also consider:

- Crosscutting Symptom Measure
- Personality testing PAI, MMPI, MCMI

Tools objectively identify issues causing significant distress and impairment, allowing focus on the most pressing concerns.

The DSM5 Level 1 Cross Cutting Symptom Measure

Self/Informant Rated Measure: Assesses 13 psychiatric domains across psychiatric diagnoses.

Purpose:

Helps clinicians identify areas impacting treatment and prognosis.

Usage:

Tracks changes in symptom presentation over time.

Domains:

Depression, anger, mania, anxiety, somatic symptoms, suicidal ideation, psychosis, sleep problems, memory, repetitive thoughts / behaviors, dissociation, personality functioning, substance use.

inSync for life Psychology

The DSM5 Level 1 Cross Cutting Symptom Measure

Questions:

Focus on how much/often the individual has been bothered by symptoms in the past 2 weeks.

High Scores:

Use Level 2 protocols detailed examination of depression, anxiety, mania, anger, sleep, OCD, substance use.

Other strategies for multiple presenting issues

1. Life Threatening Behaviour – top priority
2. Quality of life behaviours – client self -report. Client rate impact on QOL: what QOL aspects most important for client
3. The 'worst first' – symptom severity most, troubling: allows client to focus on other issues (long-term)
4. 'Simple' to complex –allows client to see difference is possible and take small steps
5. Corroborative information?

Example

Client: John, a 35-year-old male

Presenting Problems:

1.Depression: Feelings of hopelessness, low energy, and lack of interest in activities he once enjoyed. No SH or SI

2.Anxiety: Frequent panic attacks and constant worry, affecting his ability to concentrate at work, impacting other aspects of his life.

3.Relationship Issues: John and his partner have frequent arguments, leading to thoughts of separation, exacerbating his depression and anxiety

4.Work Stress: He feels anxious going to work and overwhelmed when there. Fears job loss due to performance issues. Exacerbates his anxiety.

5.Substance Use: John admits to drinking alcohol excessively to cope with stress.

More information

1.Client Self-Report:
Ask John to rank his issues in terms of impact on his daily life. **(relationship, anxiety, overwhelm)**

2. Open-Ended Questions:
"Can you tell me more about which of these issues troubles you the most?“ **(Overall worry)**

3. Symptom Severity:
Use standardized tools (GAD-7, BAI, BDI, DASS to assess severity. **(BAI = 29; BDI =28; GAD = 16)**

4. Impact on Functioning:
Evaluate how and extent of each issue affects his daily activities, relationships, and job performance. **(worried all the time, can't think straight)**

5. Duration of Issues:
Identify which problems have been persistent over time. **(Anxious all the time = 1; relationship = 2; work stress = 3; depression = 4; substance = 5)**

6. Client Readiness for Change:
Discuss which issue John feels most ready and motivated to work on. **(what ever you think, you're the expert)**

7. Professional Judgment:
Consider issue most significant underlying impact on John's overall well-being.

John's anxiety = highest severity score

significant impact: job, relationships, and he is motivated to address it.

The goal would be to develop coping strategies for anxiety first, (worst first?)

Reduces impact on (hopefully!) other issues like, relationship problems, depression and substance use.

Subsequent / Concomitant strategies: Skills and strategies to implement anxiety reduction at work, improve relationship, reduce alcohol.