INITIAL REPORT – RECOMMENDATION FOR MORE THAN FIVE HOURS OF COUNSELLING



Instructions to report writer

A report in this format is to be provided to the Victims of Crime Assistance Tribunal when the counsellor recommends that the applicant should have more than five hours of counselling. The report must be accompanied by the following documents:

- Application for Counselling form signed by the counsellor and applicant (Form 4); and
- If expenses have been incurred by the applicant for the report and/or up to five counselling sessions provided to date, a
 completed Counselling and Report Fee Invoice for those expenses (Form 5).

Where an applicant has received more than five hours of counselling without the Tribunal authorising payment of the expenses incurred for that counselling, payment will not usually be made by the Tribunal for the additional counselling.

An electronic copy of this form may be downloaded from the Tribunal's website at www.vocat.vic.gov.au. The text boxes will expand as content is entered by the report writer.

Section 1: Applicant Details			
1.1	Applicant's name		
1.2	Applicant's date of birth		
1.3	Tribunal reference number (if known)		
1.4	Tribunal venue (where application lodged)		
Section	on 2: Counsellor Details		
2.1	Counsellor's name		
2.2	Counsellor's occupation / job description (e.g., psychologist, social worker)		
2.3	Counsellor's address and contact details (including ABN and name of business that is recorded against the ABN, address and telephone number)		
2.4		s, diagnose and treat the applicant (include full title of relevant (if outside Australia) of the institution awarding the qualification/degree and the	

	Counsellor's experience in assessment, diagnosis experience.	and treatment, and other relevant
2.6	Counsellor's professional associations and membe	rships (include registration numbers where applicable).
2.7	Detail how the applicant was linked to the treatmen another person/agency, and the name of the referring person/agency;	t provider (e.g., whether the applicant was referred from approached counsellor directly etc.).
Sect	tion 3: Alleged Act of Violence	
3.1	Briefly outline the alleged act of violence.	
3.2	List particulars of all material considered in relation	to the applicant (e.g. police statements, reports, etc.).
Sect	tion 4: Counselling / Treatment Provided To D	ate
	tion 4: Counselling / Treatment Provided To D Date counselling / treatment commenced	ate
4.1	tion 4: Counselling / Treatment Provided To D Date counselling / treatment commenced Number and total duration of sessions provided to applicant by counsellor to date.	ate
Sect 4.1 4.2 4.3	Date counselling / treatment commenced Number and total duration of sessions provided to	Yes No

4.4	the act of violence the subject of the application to the Tribunal (including through the <i>Victims Assistance Program, Transport Accident Commission, WorkCover,</i> or the Medicare <i>Better Access to Psychiatrists, Psychologists and General Practitioners Benefits Initiative</i>)? If yes, provide details of the provider and the number and duration of sessions provided.
4.5	To your knowledge, is the applicant entitled to access counselling services through the Transport Accident Commission, WorkCover, Medicare Better Access to Psychiatrists, Psychologists and General Practitioners Benefits Initiative? If yes, provide details.
4.6	Detail the type of intervention / treatment you have provided to the applicant to date, including details of tests undertaken.
Secti	on 5: Applicant's Psychological / Psychiatric Issues
Secti 5.1	on 5: Applicant's Psychological / Psychiatric Issues Briefly outline the applicant's psychological / psychiatric problems, presenting symptoms or issues. Provide details of any tests undertaken.
	Briefly outline the applicant's psychological / psychiatric problems, presenting symptoms or
	Briefly outline the applicant's psychological / psychiatric problems, presenting symptoms or
5.1	Briefly outline the applicant's psychological / psychiatric problems, presenting symptoms or issues. Provide details of any tests undertaken. Detail any relevant prior psychological / psychiatric history of the applicant, including details of
5.1	Briefly outline the applicant's psychological / psychiatric problems, presenting symptoms or issues. Provide details of any tests undertaken. Detail any relevant prior psychological / psychiatric history of the applicant, including details of

Section 6: Proposed Treatment Plan 6.1 Detail the specific treatment goals that you and the applicant have set. 6.2 Detail treatment approaches and strategies that will be used to achieve the treatment goals. 6.3 Detail how progress towards the treatment goals will be measured. 6.4 Provide a recommendation for a specific number of counselling hours to be provided to the applicant, the period of time over which it is proposed that the counselling take place, and the estimated cost of the proposed counselling (reference should be made to the Tribunal's Costs Guideline regarding fees for the preparation of reports and provision of counselling services at www.vocat.vic.gov.au). 6.5 Provide an assessment of the applicant's treatment prognosis, as well as any extenuating circumstances or barriers that may affect treatment progress (e.g. prior psychological/psychiatric history, substance abuse, etc.). Section 7: Other Relevant Information 7.1 Include any other information relevant to the treatment of the applicant (documents may be attached to the report if required). Acknowledgement I understand that the Tribunal has requested my report to assist the Tribunal to make fair and just decisions about financial assistance for the applicant, and that I have an overriding duty to assist the Tribunal impartially. I have made all inquiries that I believe are desirable and appropriate, have brought all relevant matters to the Tribunal's attention and have not omitted matters of significance. Counsellor's signature:

Counsellor's name:

Dated: