

Counselling Questionnaire

This document is an evaluation questionnaire for use with people who are seeking professional help with counselling and personal support. It is used for evaluation purposes as well as diagnostic help for the individual and the professional counsellor/support worker.

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Counselling Questionnaire

Parent and Family Care Foundation

Ref No: **Date Completed:** / /

At start of 6 sessions q

At end of 6 sessions q

Important - Please read this first.

How do I feel?

The following statements are about how you may have been feeling recently.

Read each one and tick the box that is the closest to how you have felt.

Recently...

	Not at all	Only Occasionally	Sometimes	Often	All the time	Office Use Only
1) I have been in a low mood and have felt sad	q 0	q 1	q 2	q 3	q 4	q
2) I have felt tense and anxious	q 0	q 1	q 2	q 3	q 4	q
3) I have worried a lot about my situation	q 0	q 1	q 2	q 3	q 4	q
4) I have lost interest and pleasure in the things I normally enjoy	q 0	q 1	q 2	q 3	q 4	q
5) I have less energy and I am more tired	q 0	q 1	q 2	q 3	q 4	q
6) I have had difficulty sleeping or early morning waking	q 0	q 1	q 2	q 3	q 4	q
7) I have had changes in my appetite	q 0	q 1	q 2	q 3	q 4	q
8) I have been able to look after my own health and well-being	q 0	q 1	q 2	q 3	q 4	q
9) I have been disinterested in physical contact	q 0	q 1	q 2	q 3	q 4	q
10) I have found it difficult to concentrate	q 0	q 1	q 2	q 3	q 4	q
11) I have found time to relax	q 0	q 1	q 2	q 3	q 4	q
12) I have had less confidence	q 0	q 1	q 2	q 3	q 4	q
13) I have felt OK about myself	q 0	q 1	q 2	q 3	q 4	q
14) I have had feelings of guilt	q 0	q 1	q 2	q 3	q 4	q
15) I have worried about what others think	q 0	q 1	q 2	q 3	q 4	q
16) I have had support and understanding from my family and friends	q 0	q 1	q 2	q 3	q 4	q

Recently...

	Not at all	Only Occasionally	Sometimes	Often	All the time	Office Use Only
17) I have had someone I can share my thoughts and feelings with	q 0	q 1	q 2	q 3	q 4	q
19) I have dealt calmly and assertively with professionals	q 0	q 1	q 2	q 3	q 4	q
20) I have accepted how my child is	q 0	q 1	q 2	q 3	q 4	q

What are the things that you would like to change the most?

What would you like to gain from these 6 sessions?