

# Core Function #3 ORIENTATION

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**IC & RC defines ORIENTATION as:**  
**describing to the client the general nature and goals of the program; the rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program, the hours during which services are available; the treatment costs that are to be borne by the client, if any; and the client's rights.**

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While the *ORIENTATION* function is mostly administrative, to forget the therapeutic impact of a good orientation would be unfortunate.

The core function of *ORIENTATION* varies greatly from treatment setting to treatment setting, and from provider to provider.

The orientation follows the screening and intake functions, and logically occurs before any treatment is provided. Although *ORIENTATION* is usually done individually, it also may be done in a family or in a group setting. In a formal setting, multiple counselors may inform the client of all the services that are available.

In a more informal setting, one counselor may do it all.

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The *ORIENTATION* process follows the initial *INTAKE* process.

After the *ORIENTATION* process comes the *ASSESSMENT* process.

In many substance abuse treatment facilities, *ORIENTATION*, can also be completed during the *INTAKE* session. If not, then an additional appointment is made to orient the client and continue the *ASSESSMENT* process.

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### From the Client's Point of View

Most clients expect to be told what is required of them early in the treatment process. A client should not experience any surprise when a counselor announces that, "Now I'd like to tell you about our program." The orientation process should help to reduce client anxiety, apprehension, and answer the client's important questions. It is another opportunity to engage the client and increase the client's motivation for change.

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### From the Counselor's Point of View

The ORIENTATION process is usually conducted right after the INTAKE or shortly thereafter. Once a client has been SCREENED as eligible and appropriate and the INTAKE information (including the initial screening assessment and completion of forms) agrees with the screening information and provides documentation, then the counselor is obligated to inform the client about the treatment program.

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To inadequately inform a client of the rules that may result in the client's discharge from the program or service, and of the client's financial obligations, and of the client's rights, would be unprofessional, unethical, and open a counselor and the treatment agency to a civil liability.

A counselor must keep in mind that his or her behavior may, at any time, be questioned by a client; and may involve attorneys and the courts.

Counselor accountability is more often called into question today than at any time in the past.

You don't want to be in a position of saying  
"I should have explained that to you."

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The adequate ORIENTATION of a client to a treatment program should involve oral and written communication. This should be done while the counselor continues to establish rapport using motivational interviewing techniques, empathy, and listening skills.

The engagement continues.

The counselor should orally communicate:

- the general nature and goals of the treatment program
- the rules governing conduct and the consequences violating these rules (including discharge from the treatment program)
- the general schedule for treatment
- financial obligations
- and an explanation of client rights

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It also is important that a client receives a copy of the orientation materials and signs an acknowledgment that he or she has been "oriented" to the treatment program.

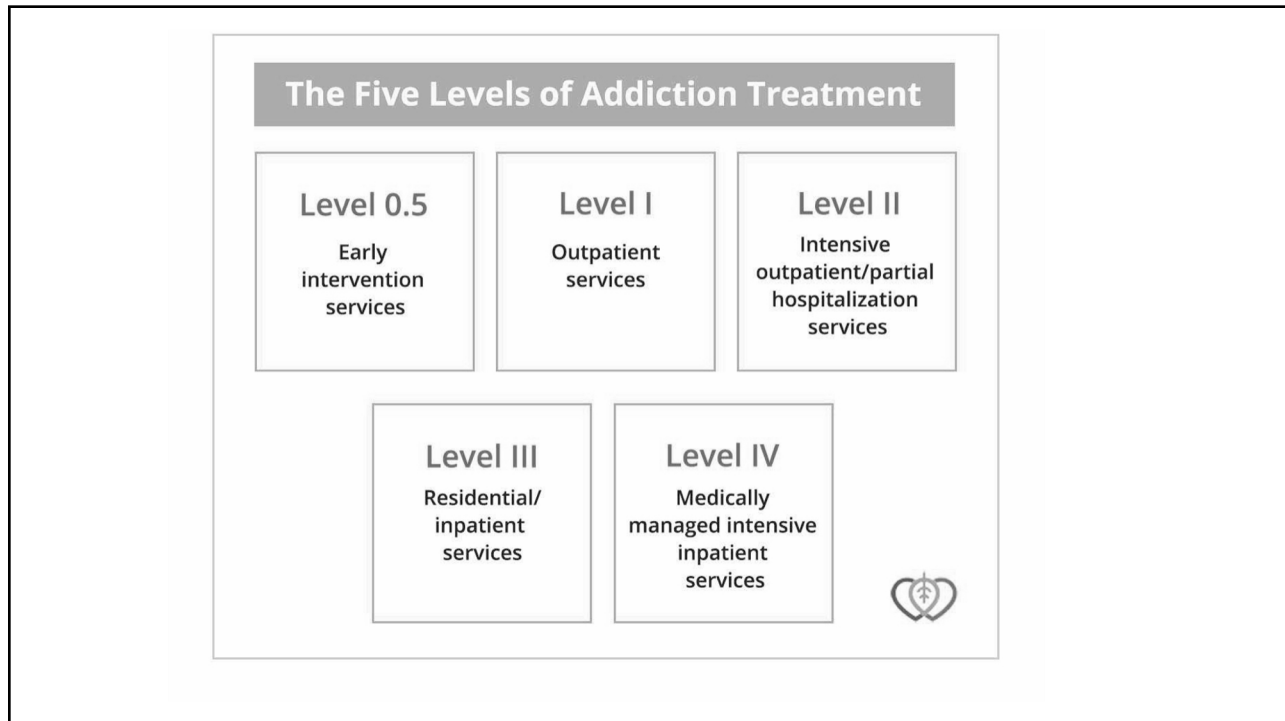
These documents should become part of the clients records, paper copy or electronic. Should there ever be an internal or external review of whether a client was adequately oriented, a signature will help assure others that the counselor performed the orientation function as required by the program.

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### ***DISCUSS TYPES OF PROGRAMS:***

- 1. Counseling (group or individual)***
- 2. IOP - Intensive Outpatient Program –  
(day treatment, 3 hours a day, 3 days a week)***
- 3. PHP - Partial Hospitalization Program -  
(day treatment, 6 hours a day/5 days a week)***
- 4. Short-term Residential Program- (28-30 days)***
- 5. Long-Term Residential Program- (more than 30 days up to one  
year)***
- 6. Medically Managed Intensive Program (detox – 5-7 days)***
- 6. Sober Living Program (halfway house)***

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### Global Criteria:

#### 9. Provide an overview to the client by describing program goals and objectives for client care.

*To be competent in this criterion, a counselor would need to:*

- *Understands the importance of telling a client about the treatment programs goals and objectives,*
- *Should not confuse "program goals and objectives for client care" with the client's goals and objectives detailed in the treatment plan.*

*Failure to relate the program goals and objectives to a client is a most frequent mistake for entry-level counselors .*

*Informing the client of the program's goals allows the client to decide if those goals are also personal goals. A client can "opt-out" of a program if there is a disconnect between program goals and client goals. Most programs and agencies have vision and mission statements. Think of these as reflecting the goals and objectives of the program.*

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### Global Criteria:

#### 10. Provide an overview to the client by describing program rules, and client obligations and rights.

*To be competent in this criterion, a counselor would need to:*

- *Know and explain specific program rules, specific client obligations, and give examples of client rights to each client.*

*Examples of program rules might include abstinence (no drinking or drugging prior to a scheduled treatment or while in treatment), no physical aggression, no firearms allowed on premise, no sexual harassment, and light must be out by 11:pm.*

*Examples of client obligations/responsibilities might include the obligations to keep all scheduled appointments or to call giving a 24-hour notice if unable to keep appointment; to pay for services rendered; and, to keep information heard in group sessions confidential.*

*All clients have rights. All treatment programs have statements of client rights and you, as a counselor, should ask each client to sign that he or she has received information about their rights. The signed form is a document received in Intake and is a professional and ethical responsibility as well.*

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### Global Criteria:

#### 11. Provide an overview to the client of program operations.

*To be competent in this criterion, a counselor would need to:*

- *Answer the question, "how does this program work?" and give an answer providing an overview of the program and how it operates. EXAMPLES:*
  - *hours of operation*
  - *general schedule*
  - *phone numbers*
  - *type of frequency of appointments*
  - *emergency access information*
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