

Level 3 IAR-DST

Meet Steve



About Steve

Meet Steve

- Steve is a 49-year-old man who is attending a follow-up appointment with his GP after starting some new medication for anxiety and depression. He had been feeling anxious and low in mood for more than 6 months before plucking up the courage to talk to his GP. Since starting his medication last month for **anxiety** and **low mood**, he didn't feel that there had been any improvement in how he felt, but he was otherwise well. He had not reported any issues with alcohol or drug use, and didn't have any other chronic health conditions.
- Steve had been struggling to find work, and said he was having **financial issues**, including getting behind with his rent, and difficulty being able to pay his bills, car registration and buy basic groceries. He said he felt **disconnected** from people and doesn't have any kind of a social life. He feels like he can't be bothered doing anything, and this is uncharacteristic for him. He finds it hard to concentrate and make decisions. He describes feeling as though his life is falling apart, and sometimes Steve thinks about 'ending it all' but has never acted on this.

Determining support options

- The **GP** reminded Steve that the type of medication he was taking sometimes took a little while to see a difference, and they decided together that Steve would keep going with the tablets for another month. They discussed some strategies to help manage anxiety in the short-term and the GP scheduled a follow-up appointment in four weeks. The GP called Joe from the MH Support team and arranged an appointment for Steve. A **social worker from the MH Support team** met with Steve three days later completed the IAR-DST, Steve scored a **level 3**.

Engage MH Support team

- Informed by the **IAR-DST** score, the social worker provided a menu of options to Steve of types of support that could be helpful. Steve expressed a preference for some psychological counselling and support to reconnect with community supports. The social worker referred Steve to the local **MHSCM provider** and provided support while he established the relationship with them.

Steve's team

- Steve needed to wait four weeks for an appointment with a **psychologist**. While waiting, the MHSCM provider arranged some short-term interim support with a **counsellor** so that Steve could talk about his most immediate concerns and to start exploring some options to enable social connection. A **peer worker** was allocated to Steve, who focused on providing options for group and community supports. The peer worker also checked in with Steve twice a week via phone to see how he was travelling. The peer work updated the counsellor regarding any escalation of Steve's symptoms that could require additional support.

It is expected that Steve's service will include 10 hours of one-on-one evidence based psychological intervention plus approximately 7 hours of non-clinical support (counsellor during the wait period and the peer worker) over the period of 4-5 months.