HealthPathways
Melbourne
Putting knowledge into practice

CASE STUDY 22:

Refining mental ill heath diagnoses using the IAR-DST

Casey (they/them), 19, is a non-binary economics student who has recently moved from rural Victoria to the inner city for study.

They present to a GP clinic for the first time for a repeat of their asthma inhaler medications. Apart from asthma, Casey does not have any other medical conditions, and takes no other medication.

Casey mentions to the GP that they have been more stressed than usual, due to the recent life changes, such as their move, starting university, and taking on a hospitality job to help finance their studies.

They have not been sleeping as well, and attribute this to stress, working and studying late into the evening. Casey says that the stress and poor sleep have not affected their ability to study or work, but they do feel tired.

The GP completes a mental health assessment, and concludes that Casey is suffering mild distress, but is at low risk of harm. Casey strikes the GP as an intelligent, highly motivated and resourceful young person.

The GP refers to the HealthPathways Melbourne Mental Health Stepped Care – Navigation page, to ascertain what services would be suitable.

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The GP completes an Initial Assessment and Referral Decision Support Tool (IAR-DST) assessment found on the page, which confirms the GP's own clinical assessment that Casey is suitable for self-management .

The GP checks the resources on HealthPathways Melbourne and sends Casey some options for E-Mental Health Services.

The GP also offers to find local support networks and services for the LGBTIQA+ community through the LGBTIQA+ Resources page, and invites Casey to return for a review of progress in six weeks.

At review, Casey reports feeling much better. They are feeling less stressed, and their sleep has improved. They have made new friends through the support services they contact, and intend to continue the online mental health courses they commenced.

However, when Casey presents again a month later their sleep has worsened, and they are feeling wound up and anxious most of the time. They have also missed some of their university tutorials and work shifts.

Casey discloses that they have been subject to transphobic bullying by a new manager at their workplace. This has brought up some past traumatic experiences caused by not being accepted as non-binary by their parents.

The GP reassesses Casey, again referencing the IAR-DST. They are still at low risk of harm, and remain highly motivated to engage in care. However, their IAR-DST level has increased to three, indicating a need for moderate intensity services. The GP completes a referral for Casey to the CAREinMIND service, which provides free support, and which is listed on the Adult Psychology and Counselling Referral page*.

Casey engages with an assigned psychologist, and progresses well. They return to their GP for a review after six sessions.

The sessions focused on Casey's self-esteem. In addition, they have found work in a more respectful workplace. Their sleep has improved and have made new friends.

The GP refers Casey for further sessions with the psychologist, as Casey is interested in exploring their past traumas further. The CAREinMIND team have matched Casey with a psychologist who is experienced in working with the LGTBIQA+ community, and Casey feels comfortable about continuing their sessions with them.

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Public

See also Australian Government – Translating and Interpreter Services.

Primary Health Network Mental Health Programs

1. Check the criteria of the relevant service.
2. Prepare the required information ⌄.
3. Refer to a mental health service in your catchment:

   Eastern Melbourne ⌃

Eastern Melbourne PHN - SupportConnect Team	Box Hill, Whitehorse	⌄
IAR Level 4		

   North Western Melbourne ⌃

North Western Melbourne PHN - CAREinMIND	⌄
IAR Level 1, 2, 3, 4.	

   Statewide ⌃

Head to Health	⌄
IAR Level 3, 4.	