



INITIAL ASSESSMENT AND REFERRAL (IAR) SNAPSHOT

People seeking mental health support may present with a range of interrelated factors that can make it challenging to determine the most appropriate level of stepped care. The IAR provides a standardised, evidence-based and objective approach to assist with mental health care recommendations.

The IAR is a tool to assist general practitioners and clinicians to recommend the most appropriate level of care for a person seeking mental health support. The IAR is an initiative of the Australian Department of Health and brings together information from a range of sources including Australian and international evidence and advice from a range of leading experts. The IAR is designed to assist the various parties involved in the assessment and referral process, including:

- General Practitioners (GP) and other clinicians seeking to determine the most appropriate care type and intensity for individuals.
- Commissioned providers, intake teams and PHNs responsible for undertaking initial assessments which may involve making recommendations on the level of care required.

PHNs will consider implementation of the IAR within the context of their local circumstances and service systems. Talk to your PHN about plans for implementation of the IAR in your region.

THE EIGHT INITIAL ASSESSMENT DOMAINS

The IAR guidance identifies eight domains that should be considered when determining the next steps in the referral and treatment process for a person seeking mental health support. There are 4 primary assessment domains and 4 contextual domains. Specific criteria are outlined in the guidance for assessing severity across each domain.

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| DOMAIN 1 Symptom severity and distress | Current symptoms and duration, level of distress, experience of mental illness, symptom trajectory |
| DOMAIN 2 Risk of harm | Past or current suicidal ideation or attempts, past or current self-harm, symptoms posing a risk to self or others, risk arising from self-neglect |
| DOMAIN 3 Impact on functioning | Ability to fulfill usual roles/responsibilities, impact on or disruption to areas of life, capacity for self-care |
| DOMAIN 4 Impact of co-existing conditions | Substance use/misuse, physical health condition, intellectual disability/cognitive impairment |
| DOMAIN 5 Treatment and recovery history | Previous treatment (including specialist or mental health inpatient treatment), current engagement in treatment, response to past or current treatment |
| DOMAIN 6 Social and environmental stressors | Life circumstances such as significant transitions, trauma, harm from others, interpersonal or social difficulties, performance related pressure, difficulty having basic needs met, illness, legal issues |
| DOMAIN 7 Family and other supports | Presence of informal supports and their potential to contribute to recovery |
| DOMAIN 8 Engagement and motivation | The individual's understanding of the symptoms, condition, and its impact. The person's ability and capacity to manage the condition and motivation to access the necessary support |

THE LEVELS OF CARE

The information gathered through the initial assessment domains is used to recommend a service type and intensity (level of care) and inform a referral decision. This process is based on a clinically-informed algorithm and is calculated automatically using the digital Decision Support Tool (DST) which can be found at <https://iar-dst.online/#/>. The levels are differentiated by the amount and scope of resources available in each region. An individual may use some or all interventions described at that level and move between levels of care as required.

| Level of Care 1 Self Management | Level of Care 2 Low Intensity | Level of Care 3 Moderate Intensity | Level of Care 4 High Intensity | Level of Care 5 Acute & Specialist |
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| <p>Typically, no risk of harm, experiencing mild symptoms and/or no/low levels of distress - which may be in response to recent psychosocial stressors.</p> <p>Symptoms have typically been present for a short period of time.</p> <p>The individual is generally functioning well and should have high levels of motivation and engagement.</p> | <p>Typically, minimal or no risk factors, mild symptoms/low levels of distress, and where present, this is likely to be in response to a stressful environment.</p> <p>Symptoms have typically been present for a short period of time (less than 6 months but this may vary).</p> <p>Generally functioning well but may have problems with motivation or engagement.</p> <p>Moderate or better recovery from previous treatment.</p> | <p>Likely mild to moderate symptoms/distress (meeting criteria for a diagnosis).</p> <p>Symptoms have typically been present for 6 months or more (but this may vary).</p> <p>Likely complexity on risk, functioning or co-existing conditions but not at very severe levels.</p> <p>Suitable for people experiencing severe symptoms with mild or no problems associated with Risk, Functioning and Co-existing Conditions.</p> | <p>Usually a person requiring this level of care usually has a diagnosed mental health condition with significant symptoms and/or significant problems with functioning.</p> <p>A person with a severe presentation is likely to be experiencing moderate or higher problems associated with Risk, Functioning and Co-existing Conditions.</p> | <p>Usually a person requiring this level of care usually has significant symptoms and problems in functioning independently across multiple or most everyday roles and/or is experiencing:</p> <ul style="list-style-type: none"> • Significant risk of suicide; self-harm, self-neglect or vulnerability • Significant risk of harm to others • A high level of distress with potential for debilitating consequence. |

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| Evidence based digital interventions and other forms of self-help | Services that can be accessed quickly & easily and include group work, phone & online interventions and involve few or short sessions | Moderate intensity, structured and reasonably frequent interventions (e.g., psychological interventions) | Periods of intensive intervention, typically: multi-disciplinary support, psychological interventions, psychiatric interventions, and care coordination | Specialist assessment and intensive interventions (typically, state/territory mental health services) with involvement from a range of mental health professionals |
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