



Initial Assessment and Referral (IAR) for Mental Health

Development Timeline

When	Activity	Additional Information
2015 – 2017	<p>Idea origins</p> <p>Following the 2015 mental health care reforms and introduction of stepped-care services requirements to Primary Health Networks (PHNs), PHNs and sector representatives began advocating for a nationally consistent approach to stepped care.</p> <p>The Department of Health, Disability and Ageing commissioned a report into the feasibility of implementing a national approach in Australia.</p>	<p>Influential documents:</p> <ul style="list-style-type: none"> Review of Mental Health Programmes and Services (Australian National Mental Health Commission, 2014) Implementing a Stepped Care approach to mental health services within the Australian Primary Health Networks Report to the Department of Health (University of Queensland, 2016)
PHASE 1		
2017-2018	<p>Project initiation</p> <p>The Department of Health, Disability and Ageing commissioned a report examining global and national mental health stepped-care practices.</p> <p>This report found a lack of evidence-based guidance regarding initial assessment and decision-making in stepped care systems.</p> <p>The IAR Project was established with the primary objective of developing guidance for PHNs on establishing effective mental health initial assessment and referral systems.</p> <p>A project steering committee and an Expert Advisory Group (EAG) were established to help guide that process.</p>	<p>Commissioned report:</p> <ul style="list-style-type: none"> <i>Assessment, triage, and referral processes in stepped care mental health systems: A literature review. Report prepared for the Australian Government Department of Health, Canberra</i> (Australian Psychological Society, 2018)

PHASE 2		
April 2018 – March 2019	<p>Guidance development, consultation, and release</p> <p>A first draft of the IAR guidance and online decision support tool (IAR-DST) was developed by the Department of Health, Disability and Ageing and circulated within the PHN network during the consultation period.</p> <p>The EAG reviewed consultation feedback and made recommendations for a final version of the guidance and IAR-DST.</p>	<p>Notable figures:</p> <ul style="list-style-type: none"> A 10-member EAG frequently met during the development and finalisation of the guidance. Between 2018 – 2022, the EAG met on 20 occasions. All 31 PHNs responded during the consultation period. Version 1 of the guidance was released to PHNs in March 2019.
PHASE 3		
April - Nov 2019	<p>Implementation Toolkit development and release</p> <p>The Department of Health, Disability and Ageing developed and distributed an implementation toolkit to assist PHNs in implementing the IAR.</p> <p><i>Note – Relevant toolkit resources have since been transitioned to the IAR Guidance (V1.05).</i></p>	<p>Toolkit contents:</p> <ul style="list-style-type: none"> Clinical governance resources. Vignettes. Workshop slides.
PHASE 4		
2019 - 2020	<p>Implementation Review</p> <p>The Department of Health, Disability and Ageing commissioned a report to understand PHN implementation efforts, including identifying barriers and enablers to implementation and determining the overall utility of the version 1 guidance materials.</p>	<p>Commissioned report:</p> <ul style="list-style-type: none"> <u>Updated Final Report 2021 for the Implementation Review for the National Initial Assessment and Referral Guidance</u> (Integrated Mental Health Research Program, University of Melbourne, 2021)
PHASE 5		
Sept 2020	<p>Implementation in Medicare Mental Health Centres</p> <p>The Adult IAR Guidance and IAR-DST was first implemented in Medicare Mental Health Centres (previously HeadtoHelp) in Victoria before being progressively rolled out nationally across other Centres as they were established.</p>	<p>Influential document:</p> <ul style="list-style-type: none"> <u>Independent Evaluation of HeadtoHelp and AMHCs: Final Evaluation Report</u> (Nous Group with support from the University of Sydney, 2022) <p>Independent evaluation of the establishment of Victorian HeadtoHelp centres. Evaluation included the use of the IAR-DST and seven evaluation recommendations related to IAR.</p>
July – Oct 2021	<p>Draft Child and Adolescent version development</p> <p>Two working groups were formed to support the creation of the child and adolescent versions of the guidance.</p> <p>These working groups reviewed and agreed to a version development framework presented by the Department of</p>	<p>Child working group: 10 members.</p> <p>Adolescent working group: 12 members.</p>

	Health, Disability and Ageing, then reviewed and proposed changes to the adult guidance for its use with child and adolescent populations.	
Oct 2021 – Feb 2024	<p>Child and adolescent versions consultation and review</p> <p>In October 2021, the EAG met to review and provide feedback on the child and adolescent version drafts and the consultation plan.</p> <p>The consultation took place for four weeks in November of 2021.</p> <p>In February 2022, the EAG reviewed the consultation report, and made revision recommendations based on consultation feedback.</p> <p>Following the development of an older adult version of the guidance, a review of all lifespan versions was planned to ensure continuity between all versions of the guidance before release.</p>	<p>Consultation period: 4 weeks</p> <p>Consultation responses: 36</p> <p>Consultation target organisations:</p> <ul style="list-style-type: none"> • Primary Health Networks • Mental health services working with children or adolescents • State and Territory Mental Health Services • Aboriginal Community Controlled Health Services • Peak bodies with a role in child or adolescent mental health • Education providers • Community service providers (including Community Managed Organisations).
PHASE 6		
Jan – March 2022	<p>Draft older adult version development</p> <p>Before convening the working group, the Department of Health, Disability and Ageing commissioned a literature review to inform the development of the older adult version of the guidance.</p> <p>The working group reviewed the guidance and recommended changes for its use with older adults.</p>	Older adult working group: 10 members.
March 2022	The National Mental Health and Suicide Prevention Agreement (the National Agreement) and bilateral agreements between Commonwealth and state and territory governments came into effect. These agreements supported expansion of the IAR into primary care, state-funded services and supporting implementation in some jurisdictions.	
April 2022 – Feb 2024	<p>Older adult version consultation and review</p> <p>In April 2022, the EAG met to review the older adult version draft and consultation plan.</p> <p>The consultation took place for four weeks in May and June of 2022.</p> <p>In June 2022, the EAG reviewed the consultation report and made revision recommendations based on consultation feedback.</p>	<p>Consultation period: 4 weeks</p> <p>Consultation responses: 50</p> <p>Targets of consultation:</p> <ul style="list-style-type: none"> • Primary Health Networks • IAR Expert Advisory Group members • All relevant professional colleges • Relevant peak bodies and organisations that provide mental health services to older adults.

	The EAG met again in October 2022 to provide feedback on continuity across all age-based versions prior to release.	
July 2022	IAR implementation in the Medicare Mental Health (previously Head to Health) Phone Service commenced.	
PHASE 7		
Oct 2022 – Feb 2024	Following the development of a child, adolescent and older adult version of the guidance, findings informed a review of the adult version ensuring continuity between all versions of the guidance before release.	IAR Expert Advisory Group: 12 members
Jun 2023 – May 2025	<p>IAR Review Project</p> <p>The Department of Health, Disability and Ageing commissioned the Nous Group to undertake the IAR Review Project.</p> <p>The review of the IAR assessed its current state of uptake, use and integration across Australia. The review also considered the policy and system level context, which has shaped the IAR's implementation thus far and emerging opportunities to improve IAR use and uptake.</p>	<p>Consultation period: 4 weeks</p> <p>Targets of consultation:</p> <ul style="list-style-type: none"> • Peak bodies • Research groups • Service providers • Digital vendors, IAR-DST developers, and data teams • Jurisdictional representatives • Primary Health Networks • GPs, social workers, psychologists, mental health nurses, nurses, and other clinicians <p>Commissioned report:</p> <ul style="list-style-type: none"> • <i>The past, present and future of the Initial Assessment and Referral (IAR) for Mental Healthcare IAR Review 2023 - IAR Review 2023 (Nous Group, 2023)</i>
Jun 2024 – Jun 2025	<p>IAR Validation Project</p> <p>The Department of Health, Disability and Ageing commissioned the University of Sydney to undertake the IAR Validation Project.</p> <p>The project is to undertake research to ascertain the validity of the IAR and provide recommendations on any changes, guidance, supporting resources or additional research that may be required to increase its utility in the mental health system or establish the reliability and validity of the IAR.</p>	Note: This report will be published once all necessary departmental and ministerial approvals have been obtained.
Jul 2024	<p>Release of the IAR Guidance documentation and IAR Decision Support Tool (V2)</p> <p>The IAR Guidance document was redesigned to focus on the core information clinicians/users need to understand and use the IAR, reflecting the context in which the IAR is being used. Detailed information on the 8 domains and how to rate each domain for children, adolescents, adults and older adults is contained in the IAR Assessment</p>	Key information: Whilst the IAR uses age to indicate the overall appropriateness of each rating guide, the final decision about the most appropriate rating guide to use should be based on the clinical judgment of the user, considering contextual and developmental factors.

	<p>Domains and Rating Guide for each age group, available as follows:</p> <p>Part A - General Guidance</p> <p>Part B - Children (aged 5-11)</p> <p>Part C - Adolescents (aged 12-17)</p> <p>Part D – Adults (aged 18-64)</p> <p>Part E – Older Adults (aged 65 and over)</p>	
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Additional reading

- Productivity Commission Inquiry Report (recommendation 10.4) - [Actions and findings - Inquiry report - Mental Health \(pc.gov.au\)](#)
- Better Access Evaluation (Main Report) (recommendation 5) - [conclusions-and-recommendations-evaluation-of-the-better-access-initiative.pdf \(health.gov.au\)](#)
- National Mental Health and Suicide Prevention Plan (recommendation 4) - [Microsoft Word - MH Signed FINAL - National Mental Health and Suicide Prevention Plan - 9 May - Accessible](#)

Steering committee member organisations

- Australian Capital Territory PHN
- Brisbane North PHN
- Consumer and carer representatives
- Eastern Melbourne PHN
- Morgan Campbell Health Consultants
- North Western Melbourne PHN
- Tasmania PHN
- The Australian Psychological Society (APS)
- Western Australia Primary Health Alliance
- Western Queensland PHN

Expert Advisory Group and working group member organisations

- Austin Health
- Australian Association of Social Workers (AASW)
- Australian College of Mental Health Nurses (ACMHN)
- Australian College of Rural and Remote Medicine (ACRRM)
- Australian Psychological Society (APS)
- Black Dog Institute, affiliated with UNSW Sydney
- Brain and Mind Centre, The University of Sydney
- Buckingham Consultants
- Consumer and carer representatives
- headspace
- Mental Health Australia (MHA)
- MindSpot, MQ Health, Macquarie University
- Morgan Campbell Health Consultants
- Murdoch Children's Research Institute
- Orygen
- PHN representatives
- Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- Royal Australian College of General Practitioners (RACGP)
- University of Melbourne
- University of Queensland

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