

Hume REPS Screening Tool

Age Group: Is the young person between 16 – 25 years of age?

If younger than 16 contact your local CAMHS

If older than 25 contact your local Adult Mental Health Service

Area: Are they residing in the Hume Region?

(This includes the local Government Areas of: Moira, Strathbogie, Greater Shepparton, Mitchell, Murrindindi, Delatite, Wangaratta, Alpine, Towong, Wodonga, Indigo).

	Ask yourself the following...	If Yes then...	What to do next...										
A	<p>Is the young person you are working with experiencing any of the following.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Paranoia or suspiciousness of others; <input type="checkbox"/> Thinking that they have special powers that others don't have; <input type="checkbox"/> Belief that there are special meanings from the environment intended for them; <input type="checkbox"/> Having their thoughts, feelings, actions or urges controlled by an external source; <input type="checkbox"/> Thoughts removed or inserted into their head; <input type="checkbox"/> Thoughts broadcasted from their head; <input type="checkbox"/> Seen or heard things that other people don't seem to hear or see; <input type="checkbox"/> Speech is hard to follow and is pressured; <input type="checkbox"/> Unable to answer questions because of being perplexed or thought blocked; <input type="checkbox"/> Going off the subject and/or becoming lost for words during conversation. <p>These experiences are:</p> <table border="1"> <tr> <td>Infrequent (less than once a month)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Occurring once a month to twice a week</td> <td><input type="checkbox"/></td> </tr> <tr> <td>3 to 6 times a week</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Daily less than hour per occurrence.</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Daily more than hour per occurrence.</td> <td><input type="checkbox"/></td> </tr> </table>	Infrequent (less than once a month)	<input type="checkbox"/>	Occurring once a month to twice a week	<input type="checkbox"/>	3 to 6 times a week	<input type="checkbox"/>	Daily less than hour per occurrence.	<input type="checkbox"/>	Daily more than hour per occurrence.	<input type="checkbox"/>	<p>They are POSSIBLY Experiencing an Early Psychosis</p>	<p>Contact your local Hume REPS Worker to discuss what to do next.</p> <p>It might be a referral would be appropriate to Hume REPS. (Written consent is required for referral.)</p> <p>It might be that Hume REPS can offer secondary consultation to support you working with this client. (Written consent is required for secondary consultation.)</p>
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B	<p>If the young person you are working with is exhibiting the above symptoms and those symptoms are frequent and severe.</p> <p>If the young person is presenting as very mentally unwell.</p> <p>If you believe the young persons mental state are making them vulnerable in the community.</p> <p>If their supports are overwhelmed and you feel that the young person needs an immediate response.</p>	<p>They require a response from a CRISIS TEAM within Mental Health</p>	<p>You should contact your local Area Mental Health Service directly via the 24 hour triage worker on the following number;</p> <p>Goulburn Valley 1300 369 005</p> <p>Wangaratta 1300 783 347</p> <p>Wodonga 1300 881 104</p>										
C	<p>Has the young person;</p> <ul style="list-style-type: none"> • Expressed thoughts of ending their life • Threatened to harm themselves or others • Demonstrated self harming behaviour. 	<p>They are currently at Risk to themselves and/or to others</p>	<p>Follow your work place policy in regard to this type of presentation.</p> <p>If you do not have an existing policy contact your Local Area Mental Health Service on the above numbers</p>										

Your local Hume REPS Early Psychosis Clinician can be contacted during business hours for non-urgent enquiries or secondary consultation