

### **De identified case study 1**

John\* was a young procedural specialist. He had been working in the UK for a few years and worked with a team pioneering a new treatment. He came back to Australia to take up a position in a teaching hospital. However, apparently not everyone was pleased that he had been given the job. He felt unwelcome from the outset but was reassured by the department head who had employed him. Several months into his appointment there was complaint to the DMS about perceived preferential treatment. The work place isolation intensified, colleagues stopped speaking when he entered a room and he was not invited to social events. John's department head became concerned about John. He stopped trying to converse with staff, ate meals alone and gave brief replies to gentle enquiries. He encouraged John to contact MBANSW for support. Things got worse at work and there were more complaints, some about his perceived arrogant manner and some about the 'cost' of the new treatment to the health service. It turned out that John was under pressure at home as well. His wife had moved reluctantly from the UK for John to take up the job and took the opportunity to suggest that they move back.

MBANSW Social Worker was available to John as a sounding board throughout the process until John decided that his current position was untenable and he agreed with his (by this stage pregnant) wife to move back to UK.

### **De identified case study 2**

Deanne\* is a GP, she and her husband have 3 children. Deanne was called to her daughter's school and advised that they were making a notification under Children and Young Person's Care and Protection Act. Her daughter had self-harmed and in the process of discussing this she told school staff that her father shouted and threatened to hit her frequently. The Social Worker made time over the next few days for Deanne to process out loud her fears. During this time specialist support services were identified and contacted. The Social Worker maintained contact with Deanne until she was confident that the support services were adequate.

### **De identified case study 3**

Joan\* received a letter from MBANSW following the death of her ophthalmologist husband of 48 years. (Letters offering support are sent by MBANSW when notified that a doctor has passed away.) Joan was shocked to discover from the family solicitor that her husband had not managed his finances well and that she may have to sell the family home. Her 4 adult children were at odds about how to resolve the problem. Joan herself was not sleeping well and complained of a 'fuzzy head'. The Social Worker gave Joan time to talk about the children and her husband and gently directed Joan to her GP and kept in touch for several months while Joan was referred to a geriatrician.

\* All case studies are representative and de-identified to ensure confidentiality