

# Sample Assessment 1

## Assessment for aggression

This document assesses the risk of aggression for individuals. Organisations should determine, based on the risk levels identified, what management plans or policies should be enacted. Organisations should create a system to guide staff on what to do depending on the risk level identified.

**Consumer name:** \_\_\_\_\_ **Service:** \_\_\_\_\_

**Date & time of assessment:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ **Date of next assessment:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### GENERAL PRESENTATION (within past month)

*Attach written history, other organisations' risk assessments or reference to consumer file notes (incl. dates) if required.*

	Yes	No	Don't know
• Intoxication with drugs and/or alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Police involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Verbally threatening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Physically threatening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Attacks on objects or property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Confused presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Irritable mood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Boisterous mood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Elevated mood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Emotionally charged eg. angry, jealous, anxious, fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Sexually inappropriate behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Negative views towards people of different race, religion, sexualitv. beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Other (please describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Level of risk

Who do you consider to be at risk?	Low	Medium	High
• Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staff of NGO/Housing/Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Residents of the house/neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Others (please state if specific groups are at risk)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Members of the public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Considering the above what are the specific risks in relation to home visiting and how can they be managed?

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## Quick risk assessment guide

To gauge the level of risk for home visits complete the following by circling the relevant score for each question and write in the 'points column'. Once all questions are answered and scores carried across, add the total points and write in space provided. Compare your score with the identified level of risk to inform your action.

Questions					Points
1. Has the consumer filled in a consent form?	Yes		No		
	0		3		
2. Has the consumer, or any individual household member, had any history of violence, including domestic violence?	Within 3 months	Within 1 year	1-5 yrs or more	No history	
	13	6	1	0	
3. Has the consumer expressed intent to harm others?	Within 3 months	Within 1 year	1-5 yrs or more	No history	
	6	3	1	0	
4. Does the consumer have any history of self-harm in the past year e.g. cutting, drugs and/or alcohol?	Yes		No		
	1		0		
5. Is there a history of any behaviour in any household member that would warrant the need for 2 staff to attend?	Within 3 months	Within 1 year	1-5 yrs or more	No history	
	6	3	1	0	
6. Is the consumer known to have visitors who may have any of the above issues?	Yes		No		
	6		0		
7. Does the consumer live in an area or situation that may place the staff member in a dangerous position, or does the visit need to happen after dark?	Yes		No		
	6		0		
Total points:					

**Identified level of risk:** Low 0- 5  Medium /significant 6-12  High /extreme 13 +

If points total between 6 and 12, home visiting with two staff may need to be undertaken until further assessments demonstrate otherwise. This decision should be made by the manager/coordinator. If points total above 12, the consumer may not be eligible for any home visiting program. Staff attending the premises must be accompanied by another worker. The total point score on this sheet is to be clearly highlighted.

Comments /advice on the above:

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Employee's name ..... Signature .....

Manager's name ..... Signature .....