

# ASSESSMENT STRUCTURE

The features which distinguish each tier include:

- the purpose of the risk assessment
- the amount of material reviewed
- the type of risk assessment conducted
- the expertise of the assessor
- the depth of the risk assessment report, and
- the ongoing review process

The aim of delineating tiers in this way is to ensure that type and intensity of services provided is proportionate to the level of risk identified for each consumer.

	Tier 1	Tier 2	Tier 3
<b>Purpose</b>	Screen for risk across the five domains of risk identified within Queensland Health Policy (including violence risk)	Develop a more comprehensive understanding of the nature of any violence and the associated risk factors and develop a risk management plan.	Gather specialist input regarding complex cases where there is elevated risk or complex needs relating to violence.
<b>Target population</b>	All consumers of mental health services.	Consumers identified by the Risk Screening Tool as having violence risk that requires further input for safe management.	Consumers identified through V-RAM and MDT Review as having elevated risk profile that meets forensic services referral criteria
<b>Undertaken By</b>	All mental health clinicians.	Senior Clinicians	Specialist Forensic Service: CFOS or CYFOS.
<b>Risk Assessment Documentation</b>	Risk Screening Tool.	Violence Risk Assessment and Management (V-RAM).	As determined by the Specialist Forensic Service. Progress noted on Forensic Service Assessment and Response – Violence Risk form in CIMHA.
<b>Review</b>	At least once every 91 days, as per the National Standards. This occurs for all consumers, regardless of which Tier of the Framework they are managed at.  Ad hoc reviews may be conducted as required.	Need for review and timeframe determined within multidisciplinary team review.	Need for review and timeframe to be determined within multidisciplinary team review, in collaboration with Tier 3 assessor.
<b>Oversight</b>	PSP.	PSP: responsible for referral, oversight, communication, implementation of management strategies, and review.  Senior clinician: responsible for completing assessment and management plan, making documentation available to PSP, and being present at follow-up MDT review.	Specialist service: responsible for intake process, completing the assessment and management plan, and making documentation available to the referrer.  PSP: responsible for referral, oversight, communication, implementation of management strategies, and review.