



**Queensland  
Government**

**Mental Health Services  
Violence Risk Assessment and  
Management**

Facility:

Date:

Time:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex:  M  F  I

**Mental Health Act status**

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> None                       | <input type="checkbox"/> Forensic order (mental health) | <input type="checkbox"/> Treatment support order       | <input type="checkbox"/> Transfer recommendation  |
| <input type="checkbox"/> Examination authority      | <input type="checkbox"/> Forensic order (disability)    | <input type="checkbox"/> Person AWA (interstate)       | <input type="checkbox"/> Classified (involuntary) |
| <input type="checkbox"/> Examination/judicial order | <input type="checkbox"/> Forensic order (criminal code) | <input type="checkbox"/> Recommendation for assessment | <input type="checkbox"/> Classified (voluntary)   |
| <input type="checkbox"/> Treatment authority        |   |  |   |

Conditions of order:

An interpreter was used

**Purpose of assessment**

Identify the reason for a Tier 2 assessment e.g., describe the problematic behaviours which have the potential to cause harm to others such as threats to kill or harm others, stalking, problematic sexual behaviour or the consumer is experiencing active symptoms of mental illness that may lead to violent behaviour such as persecutory or paranoid delusions etc.

**Background summary**

Describe the presenting concerns, reason for referral to mental health services, history of mental health care, current diagnoses and a summary of the clinical formulation.

**Describe the Consumer's previous violence/other problem behaviours and the context in which they occurred** (note first known violence, and any pattern, increasing frequency or severity of harm, evidence of weapon use and details regarding previous victims, including domestic and family violence)

Establish a timeline of previous violent episodes, including first known episode through to the most recent violent episode, the triggers, early warning signs, target of the violence, including domestic and family violence, severity of the violence and use of weapons. Consider whether there are any patterns to the violent incidents and what the mental state of the consumer was at the time of the violent episodes.

**Describe the Static/predisposing factors associated with previous violence**

Consider:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• Violence</li> <li>• Pro-violence attitudes</li> <li>• Antisocial behaviour</li> <li>• Relationships</li> <li>• Employment</li> <li>• Problematic substance use</li> <li>• Personality disorder/s</li> </ul> | <ul style="list-style-type: none"> <li>• Other mental disorders (including cognitive impairment, brain injuries, learning disabilities)</li> <li>• Traumatic experiences</li> <li>• Treatment adherence and response to treatment</li> </ul> <p>Child and youth also consider:</p> <ul style="list-style-type: none"> <li>• Peer group/influences</li> <li>• School achievement/engagement</li> </ul> |
|--|---|

Review all CIMHA alerts, CIMHA history, including previous crisis intervention plans, leMR, RiskMan, PAIPS and medico-legal reports. Additional information and collateral can be obtained from interview/s with the consumer and significant others including: partner, family, friends, school personnel, Child Safety/Youth Justice staff, Probation/Parole reports and ATODS Clinicians.



**Queensland  
Government**

**Mental Health Services  
Violence Risk Assessment and  
Management**

Facility: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_

(Affix identification label here)

URN: \_\_\_\_\_  
Family name: \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Sex:  M  F  I

**Describe the Dynamic factors that precipitated previous violence**

- Consider:
- Insight
  - Violent ideation
  - Symptoms of major mental disorder (including cognitive impairment, brain injuries, learning disabilities, **and dementia**)
  - Problematic substance use
  - Treatment adherence and response to treatment
  - Living situation
  - Social situation
  - Stress/coping
  - Anger
  - Impulsivity
- Child and youth also consider:
- Peer influence

Utilise similar sources of information as in the 'static factors that precipitated previous violence' section. Identify triggers for the violent episodes to determine whether there is a pattern to the violent behaviour.

**Describe Dynamic risk factors that contribute to current and future risk of violence, including foreseeable changes that could quickly increase risk state**

Identify specific thoughts, planning or ideation relating to current or future violence, including dynamic factors that perpetuate current risk. Consider any specific events that may occur in the near future that will have a negative impact on risk e.g., an upcoming custody hearing for children. These factors will be specific to an individual consumer.

**For inpatients, consider specific inpatient dynamic violence risk factors**

- Consider:
- ~~Confusion/boisterous~~
  - **Confused/over-excited behaviour**
  - Irritable/sensitive to provocation
  - Physically/verbally threatening/property damage
  - Impulsivity
  - Unwilling to follow directions/angered when requests are denied

Review all CIMHA documentation, hospital/secure unit medical charts and gather collateral from clinicians who provide direct care/treatment to the consumer.



**Queensland  
Government**

**Mental Health Services  
Violence Risk Assessment and  
Management**

Facility:

Date:

Time:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex:  M  F  I

**Describe Protective factors and strengths**

Consider:

- Treatment adherence and response to treatment
  - Coping/social skills
  - Stable living situation
  - Stable mental/emotional state
  - Relationships/supports
  - Insight/awareness of triggers
  - Meaningful time use
- Child and youth also consider:
- Peer relationships, supports and activities

Ensure that these factors meet these criteria: Does this factor consistently reduce risk? Is it consistently available and accessible and is the consumer willing to access this resource? It is consistently valued by the consumer?

**Risk formulation Violence risk summary**

Consider **risk status** (relative to others in a stated population) and **risk state** (relative to self at baseline or selected time period) informed by **static and dynamic factors**:

- Specific population needs: CALD, Indigenous, older persons, persons with cognitive impairment, brain injuries, learning disabilities, and dementia
- Probable nature and imminence of future violence
- Most likely targets of violence (victims)
- Factors that mitigate risk
- Factors that could increase risk
- Potential high risk scenarios

**Prevention oriented risk management plan** (identify what actions are required for **each** dynamic risk and protective factor. List strategies that need to be implemented "now" and those that need to be implemented in the "short to medium term". Risk **prevention and** management strategies must be incorporated into the consumer Care Plan. Consider relevant victim issues)

| Risk increasing factors | Clinical goal | Strategies, interventions and involvement of other service providers |
|-------------------------|---------------|--|
|                         |               |  |
|                         |               |  |



**Queensland  
Government**

**Mental Health Services  
Violence Risk Assessment and  
Management**

Facility:

Date:

Time:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex:  M  F  I

|                           |                      |  |
|---------------------------|----------------------|--|
|                           |                      |  |
|                           |                      |  |
|                           |                      |  |
| <b>Protective factors</b> | <b>Clinical goal</b> | <b>Preventive strategies, interventions and involvement of other service providers</b> |
|                           |                      |  |
|                           |                      |  |
|                           |                      |  |

**This assessment is informed by collateral from** (list source of collateral, e.g. mother, employer, elder, clinical record)

**Information provided to consumer/carer/family/support persons** (detail information provided to consumer/ carer/ family/ support person regarding this risk assessment and management plan. Where applicable include obligations under *Mental Health Act 2016*. Note consumer/carer/family/support persons understanding of assessment, risk management plan and clinical goals.)

|                                  |              |            |       |       |       |
|----------------------------------|--------------|------------|-------|-------|-------|
| Clinician's name (please print): | Designation: | Signature: | Team: | Date: | Time: |
|----------------------------------|--------------|------------|-------|-------|-------|