

Daughters of Charity Service For Persons with Intellectual Disability

Challenging Behaviour Risk Assessment

Name:	Assessment Team:
Address:	
P.I.N	Date of Assessment:
Date of Birth:	Review Date:
Date of last M.D.T. Meeting:	
Risk Rat	ing Score
Raw Risk: (Level of risk without the use of control measures)	Residual risk: (Level of risk that remains when all control measures are in place)
Impact =	Impact =
Likelihood =	Likelihood =
Raw Risk Rating = [Impact x likelihood]	Overall Risk Rating = (Impact x likelihood)

Signature of Person(s) completing the form:

CHALLENGING BEHAVIOUR RISK ASSESSMENT IDENTIFICATION OF BEHAVIOUR AND CURRENT CONTROLS IN PLACE

	Daily	Weekly	Monthly	Other
Self Injurious Behaviour				
Assaultive Behaviour				
Threatening Behaviour				
Damage to Property				
Pica – eating inedible objects or products				
Absconding				
Inappropriate sexual				
behaviour				
Other – please describe				
Please provide details of	the beh	aviours ti	cked abov	ve

Contributing F	actors:				
Please list any known factors or conditions which contribute to behaviour (e.g. Autism, (known triggers) Mental Health)					
Supports in place to ma Please ✓ approp	_				
Is there a positive behaviour support	plan in pl	ace			
Yes No					
If Yes are the following elements inc	luded				
	Yes	No	N/A		
Functional Analysis e.g. ABC charts					
Antecedent Control Strategy					
Reactive strategy					
Crisis Management Procedure					
PRN Protocol in place					

CHALLENGING BEHAVIOUR RISK ASSESSMENT ADDITIONAL CONTROL MEASURE

Risk Description	Who is at Risk	Existing Control Measures in Place	Any Additional Control Measures Required	Person(s) Responsible for action	Review Date
			-		

ANALYSIS OF RISK RATING BASED ON RISK ASSESSMENT INFORMATION

Note: To determine the overall risk rating using the charts below

Multiply the Impact score x likelihood score and plot the results on the risk matrix in terms of a colour and a numerical score for the risk.

If the person displays more than one type of behaviour please risk rate the one that is perceived to have the highest level of risk.

Impact Table	Negligible/Low (1)	Minor (2)	Moderate (3)	Major/Severe (4)	Extreme/ Catastrophic (5)
Injury to any Person	Adverse event leading to minor injury not requiring first aid And/ Or	Minor Injury or illness, first aid treatment required and / or less than 3 days absence from usual activities	Significant injury requiring medical treatment, possible hospitalisation and/ or counselling.	Major injuries / long term incapacity or disability requiring medical treatment or counselling.	Incident leading to death or major permanent incapacity And / Or
	No impaired psychological functioning, or less than 3 days impaired psychological functioning	And/ Or More than 3 days impaired psychological functioning (but less than one month)	And/ Or Impaired psychological functioning greater than 1 month but less than 6 months	And / Or Impaired psychosocial functioning greater than 6 months.	Permanent psychosocial functioning incapacity.

Likelihood	Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost Certain (5)
Table					
Actual Frequency	Occurs every 5 years or has never occurred	Occurs every 2-5years	Occurs every 1-2 years	Occurs every 2 months	Occurs at least once a month
Probability	1 %	10%	50%	75%	99%

RISK MATRIX	Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Almost Certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Rare/Remote (1)	1	2	3	4	5

Risk Rating Score
Impact Score X Likelihood Score =
Overall Risk Rating = Note any individual considerations which may alter level of risk based on previous history

High Risk 15-25 (Red)

Medium Risk 6-12 (Amber)

Low Risk 1-5 (Green)