



Risking It!

Articulating Risk in Health Services with a New Clinical Social Work Tool

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Special acknowledgement to Natasha Forbes for her significant and valuable contribution to this work

Risk assessment has long been recognised as a necessary tool to guide contemporary Social Work practice

Scottish Executive (2006) *Changing Lives: Report of the 21st Century Social Work Review*, Edinburgh: Scottish Executive.

Overview of Presentation

- Overview of Subacute and Ambulatory Service
- Background
- Methodology
- Results
- Case Example
- Where to From Here?
- Questions and Comments

Metro North Hospital and Health Service



- 850,000 population
- 4,157 square kilometres
- Brisbane River to north of Kilcoy
- Rural, regional and tertiary hospitals
- Acute, post acute, subacute, rehabilitation, aged care, oncology, palliative care, psychiatric, women's and newborn services.

Subacute & Ambulatory Service (SaAS)

- Delivers a range of multi-disciplinary clinical programs in Metro North HHS
- Community and health service settings
- Supports patient flow from acute facilities
- Rapid response by multidisciplinary teams

Background

- Recent changes to models of service delivery to respond to flow from hospital
- Increased patient acuity
- Increased safety/risk issues
- Shorter care journeys
- Focus on assessment and referral
- Risk of admission/readmission to hospital

Background (cont'd)

- Social Workers carrying caseloads including high risk clients with shorter care journeys
- Previous Risk Assessment Tool available has a strong mental health focus
- Need identified for generic risk assessment for community health context

Background (cont'd)

Can we locate a tool that:

- Can identify risk and protective factors
- Clearly articulates risk assessment and risk management
- Can be used as a communication tool
- Is flexible to meet the needs of Subacute and Ambulatory Service Social Workers across service areas

RISK? WHAT RISK?



www.polarion.com

Methodology

- Social Work Risk Assessment working party formed in November 2012
- Literature review and exploration of:
 - Social Work approach to risk assessment
 - Risk assessment in health context
 - Risk assessment tools available across a range of contexts

Methodology (cont'd)

- Review of literature identified no published risk assessment tool to meet the needs of SaAS Social Workers



Methodology (cont'd)

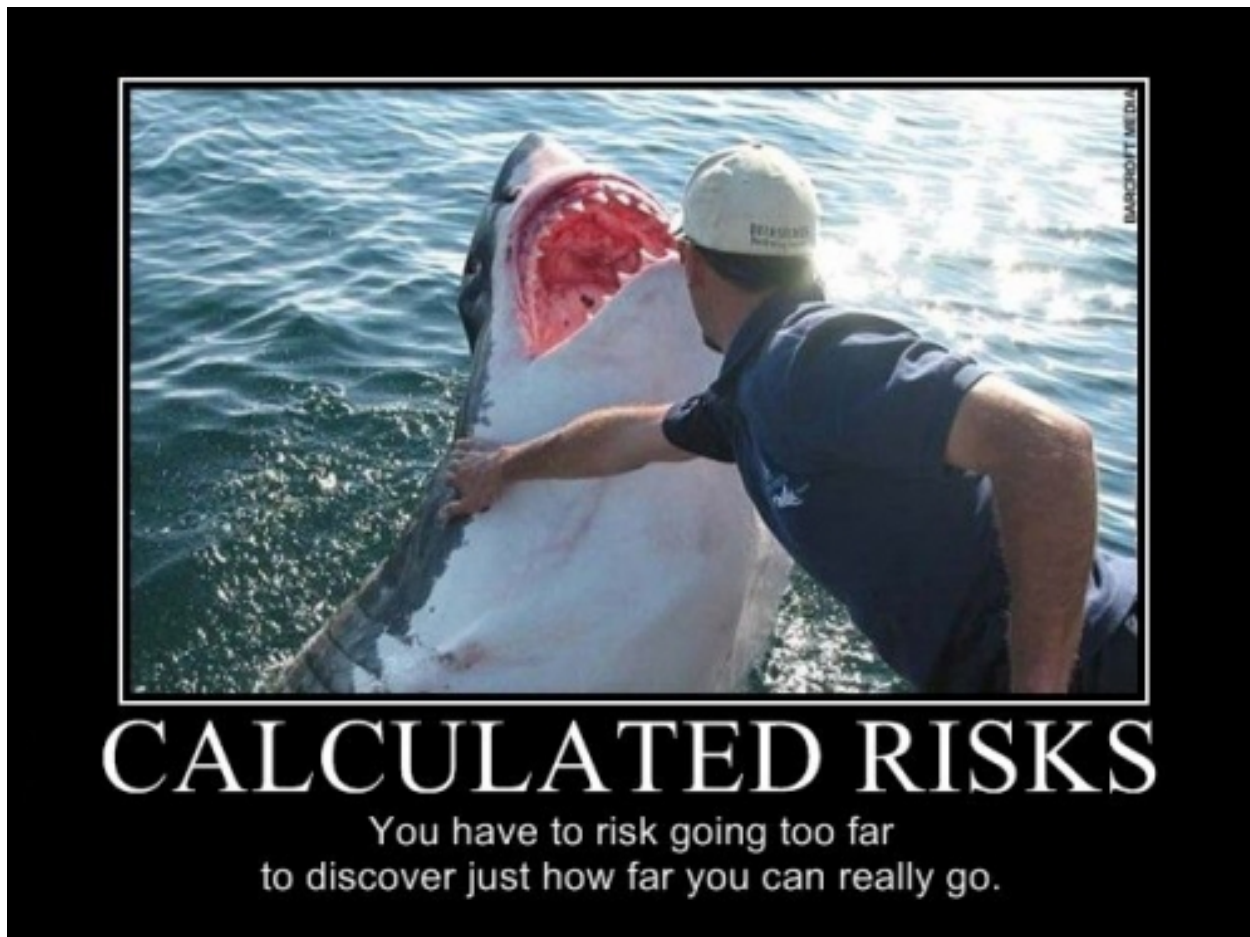
“A gathering of information and analysis of the potential outcomes of identified behaviours. Identifying specific risk of relevance to an individual, and the context in which they occur.”
(Morgan, 2000)

“A risk assessment can only identify the probability of harm, assess the impact of it on key individuals, and pose intervention strategies which may diminish the risk or reduce the harm. Assessments cannot prevent risk.”
(Hope and Sparks, 2000)

Methodology (cont'd)

- Varying definitions of “risk”
- Differs between people and contexts
- “Risk may be defined as a systemic way of dealing with hazards and insecurities induced and introduced by modernisation itself” (Beck, 1992:21)


There is no such thing as zero risk!



Source: <http://www.realmoneycasinousa.com/the-many-types-of-gamblers-and-bet-takers-broken-down/>

Results

- Formulation of a new Social Work Risk Assessment Tool
- Includes assessing risk across the following areas:
 - Living situation
 - Current physical health status
 - Current emotional health status
 - Behaviour
 - Financial status
 - Other risks



Queensland
Government

(Affix patient identification label here)

Metro North Hospital & Health Service

Social Work Risk Assessment

Centre:

URN:

Family Name:

Given Names:

Address:

Date of Birth:

Sex:

☐ M

☐ F

Assessment Date: / /

Social Work Assessment Tool also completed: Yes ☐ No ☐

1. Living Situation

Consider whether the client lives alone, with carers who are unable to continue, is subject to abuse from co-residents/ family / friends/ neighbours, vulnerable to loss of housing.

Is there a risk associated with the client’s living situation? ☐ Yes ☐ No

Risk Factors:

Protective Factors:

Probability (likelihood of event) ↓	Consequence (how serious is the potential outcome) →	Minor <input type="checkbox"/>	Moderate <input type="checkbox"/>	Major <input type="checkbox"/>
Unlikely - not expected to occur	<input type="checkbox"/>	Low	Medium	Medium
Possible - might occur	<input type="checkbox"/>	Low	Medium	High
Likely - probably occur	<input type="checkbox"/>	Medium	High	High

2. Current Physical Health Status

Consider worker observations (e.g. emaciation, confusion, delirium, shortness of breath, unsteadiness on feet etc.), known health risks controlled/uncontrolled (e.g. diabetes, epilepsy, etc.) and cognition issues

Is there a risk associated with the client’s physical health? ☐ Yes ☐ No .

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☐ M

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7. Outcome

Risk Matrix Ratings - Use the risk matrix outcomes from you risk assessment to identify the overall “Rating” of each category

	Low	Medium	High
1. Living Situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Current Physical Health Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Current Emotional Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Financial Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Risk Management Plan - Use plan below to guide interventions for managing identified risk. “Rating” of risk and risk management plan must be documented in Progress Notes. **NB.** *More than one box can be ticked.*

☐ Nil action required

- ☐ Case Review
- ☐ Advise team leader
- ☐ Update alerts
- ☐ Provide Education
- ☐ Legal services
- ☐ Liaise with family / family meeting
- ☐ Readmit to hospital
- ☐ Liaise with GP

- Referral to:
- ☐ Domiciliary Services
- ☐ Queensland Civil & Administrative Tribunal
- ☐ Community Access point
- ☐ Adult Guardian
- ☐ Queensland Police Service Check
- ☐ Department of Child Safety
- ☐ Mental Health
- ☐ Queensland Ambulance Service
- ☐ Disability Services Queensland
- ☐ Aged Care Assessment Team
- ☐ Other

Comments:

1. Living Situation

Consider whether the client lives alone, with carers who are unable to continue, is subject to abuse from co-residents/ family / friends/ neighbours, vulnerable to loss of housing.

Is there a risk associated with the client's living situation? ☐ Yes ☐ No

Risk Factors:

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Comments:

Examples of Risk Factors

Living Situation

- Resides alone
- Unsustainable carer arrangements
- Social isolation
- Squalid environment
- Unsustainable housing
- Subject to abuse and neglect

Behaviour

- Declining services
- Mobilising without walking aid
- Substance misuse
- Verbal and/or physical abuse
- Nil oral intake
- Dementia related behaviour changes

Physical Health

- Unstable/unmanaged health condition i.e. Diabetes
- Emaciation/malnutrition
- Urinary tract infections
- No GP
- Vision/hearing impairment
- Cognition issues

Emotional Health

- Extreme distress/nervousness
- Hopelessness
- Mental health
- Previous suicide attempts
- Extreme restlessness
- Recent trauma or loss

Examples of Protective Factors

Living Situation

- Linked with HACC services
- Familial support network
- Home modifications
- Sustainable housing
- Sustainable caring arrangements
- Referred to ACAT

Behaviour

- Accepting of services
- Using mobility aids
- Insight into care needs/health condition
- Using anger management strategies
- Limiting/refraining from substance use
- Linked with Dementia Support Services

Physical Health

- Readmission to acute setting
- Linked with GP/GP appointment
- Medication monitoring
- Managed chronic health conditions i.e. stable diabetes
- Referred to another SaAS Service

Emotional Health

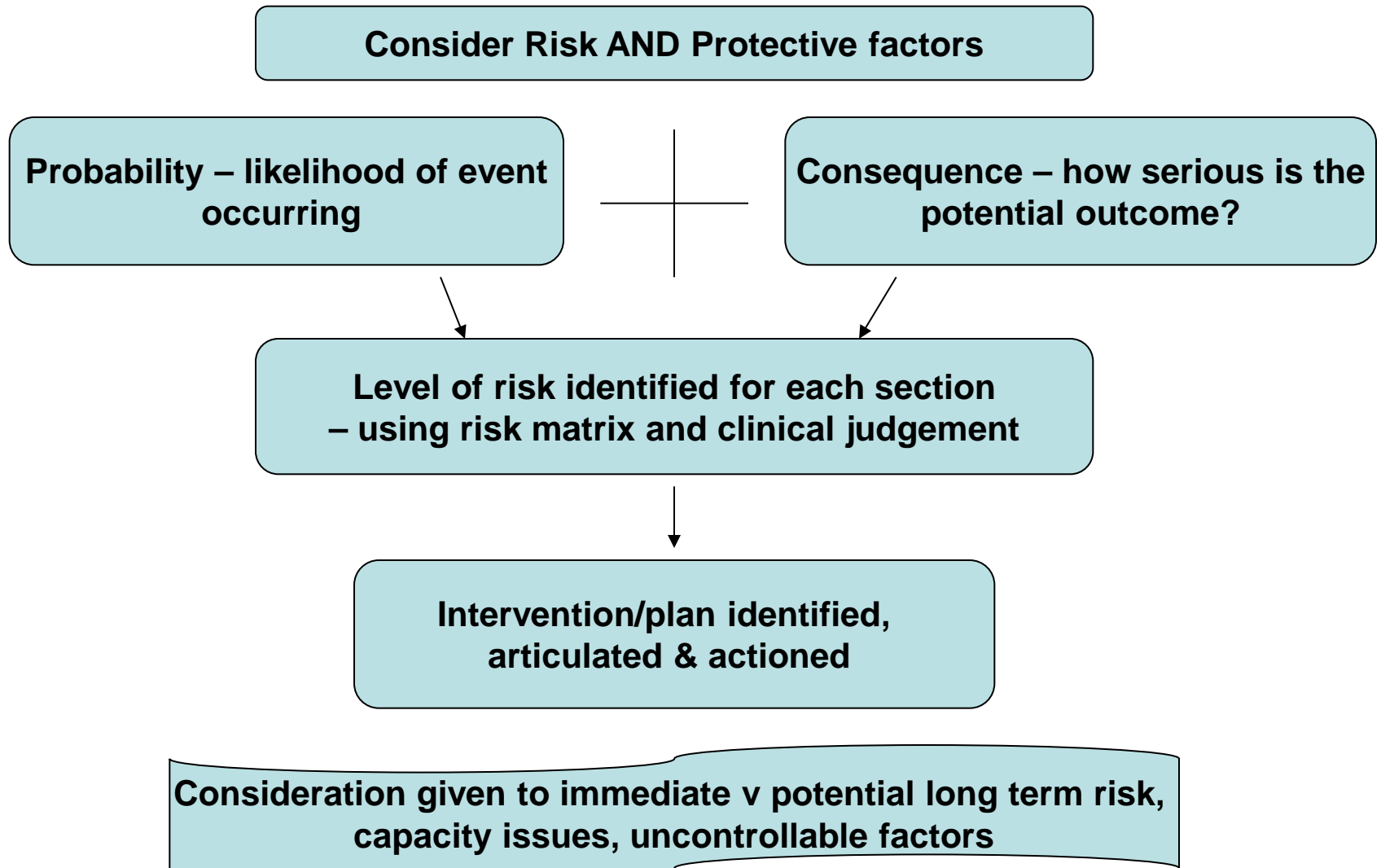
- Linked with counselling support
- Mental health intervention
- Emotionally supportive familial network
- Resilience
- Linked with GP
- Appear able to access helpline numbers

Risk Matrix

- Queensland Health tool used to analyse organisational risk - QHRisk
- Tool used to determine the level of risk - expressed in terms of the combination of consequence(s) and likelihood
- Adapted to guide risk rating within Social Work Risk Assessment Tool:

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Risk Assessment Process





Case Example

- 76-year-old lady referred to SaAS community health team following discharge from hospital (medical admission)
- Lives alone in own low set home
- Cognitive impairment, impacting judgement and recall
- History of uncontrolled diabetes and poor management of other health conditions
- Morbid obesity and increased time spent in bed
- HACC services for domestic
- Limited family support – never married and no children. Is visited weekly by her niece, who assists with shopping

2. Current Physical Health Status

Consider worker observations (e.g. emaciation, confusion, delirium, shortness of breath, unsteadiness on feet etc.), known health risks controlled/uncontrolled (e.g. diabetes, epilepsy, etc.) and cognition issues

Is there a risk associated with the client's physical health? ☒ Yes ☐ No

Risk Factors: Risk of readmission to hospital or further deterioration in health due to following:

- Falls (morbidly obese, difficulty with transfers and ambulation due to same)
- Cognitive impairment (client refusing further memory testing)
- Uncontrolled diabetes (medications/insulin administration issues and inconsistent BGL monitoring)
- Pressure injury (incontinence, increased time spent sitting/lying)

Protective factors:

- Continues to be mobile short distances with 4ww and did not appear unsteady on feet
- Equipment/modications in home to assist with transfers, toileting (bedside commode, MASS pads) and in use
- Linked with GP (home visits)
- Current MDT input
- Referred to ACAT with goal to increase community services

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☐ Aged Care Assessment Team

☐ Other

Comments:

Client will likely remain at a high level of risk in the area of health. Whilst current input from community based health services mitigate some of the risk factors, her reduced cognition, physical condition, as well as the chronicity of her medical conditions continue to place her at high risk of readmission to hospital.

It has been reported that she does have capacity for decision making, but assessment information suggests that her cognitive function is declining - she has refused further memory testing. Her cognition is likely a factor in the poor management of her diabetes and other chronic conditions.

However, the client is accepting of her need for more assistance in the home and is agreeable to an ACAT assessment. She is also closely linked with her GP, who continues to visit her at home on a fortnightly basis.

Liaison with GP - will further discuss referral to Memory Clinic

Liaison with ACAT - confirmed referral received and will be given Category 2 priority

Liaison with HACC provider - will discuss increase in services pending ACAT

Liaison with niece - able to continue weekly visits

Education provided to client and niece to support future planning - My Aged Care, Commonwealth Carelink, day respite etc.

Outcomes for Clinical Practice

- Communication tool e.g. case review with multidisciplinary team, escalation processes
- Clinical handover e.g. other SaAS teams, non-government/community services, hospitals, GP
- Advocacy tool e.g. ACAT, Disability Services, QCAT, Adult Guardian
- Feedback to GP e.g. attach to discharge summary
- Utilise Risk Assessment tool to work with multidisciplinary team to maximise best outcome and future plan with client

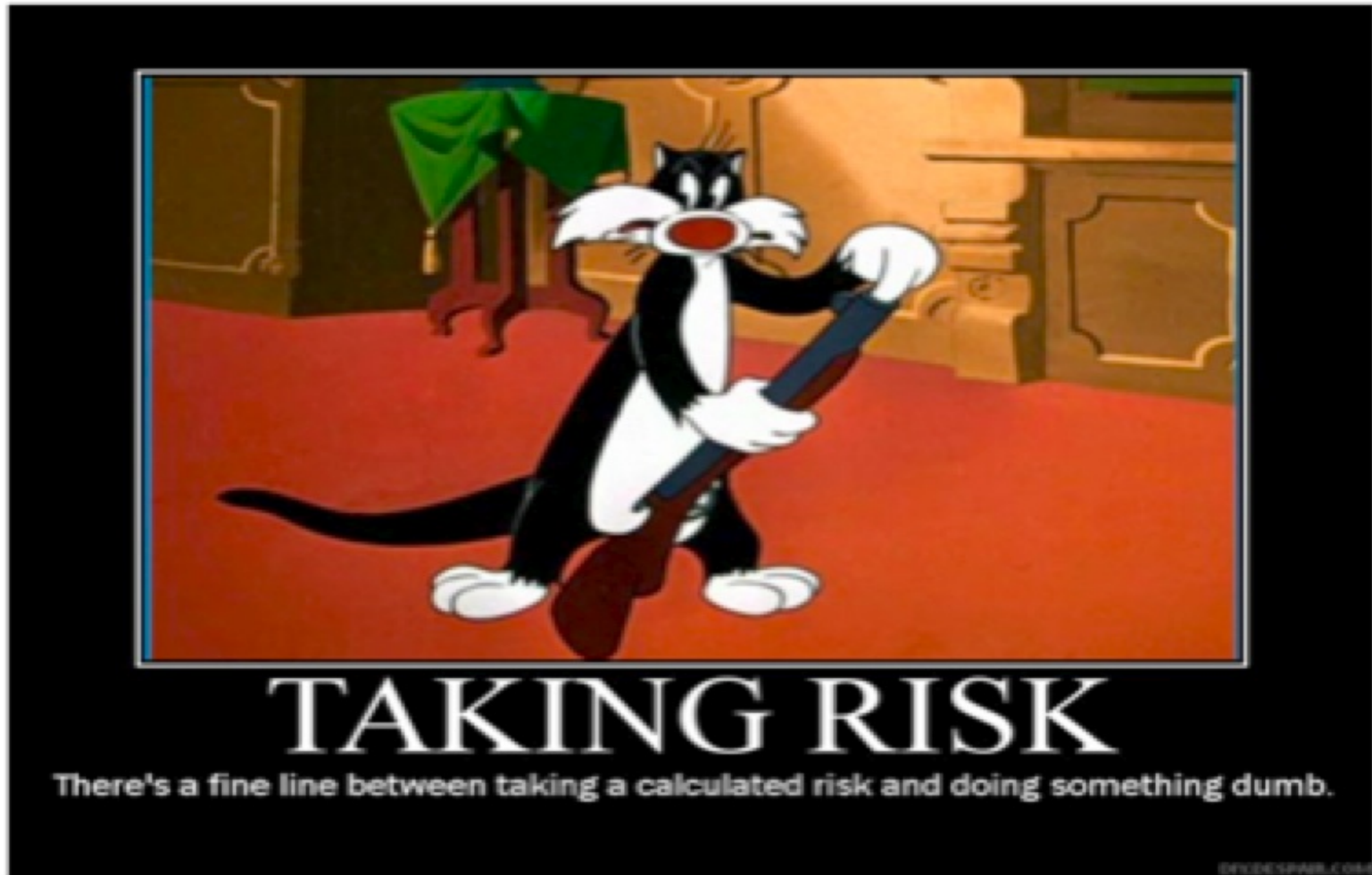
Conclusion

- Social Work Risk Assessment Working Party registered as Quality Activity in SaAS
- Development phase: Nov 2012-June 2013
- Trial phase: June-Dec 2013
- Tool approved for use in March 2014
- Ongoing evaluation of implementation of the tool

Where to From Here?

- Review usage of the tool in practice
- Continue to gather feedback from Social Work Clinicians
- Provide ongoing education/training to Subacute and Ambulatory Service (SaAS) Social Workers
- Partnering with acute facilities
- Research opportunities e.g. reliability and validity

Questions or Comments



Source: <http://www.freepmstudy.com/Blog/EPMBalanceRisk.cshtml>

Bibliography

Beck U. 1992. 'Risk society: Towards a new modernity'. London: Sage. In: Lewis, W. *Review* (CJS Online, retrieved 9/10/2014)

www.ualberta.ca/cjscopy/articles/leiss.html

Hope T. & Sparks R. 2000. 'Crime, risk and insecurity: Law and order in everyday life and political discourse'. In: Barry, M. 2007. *Effective approaches to risk assessment in social work: An international literature review*. Edinburgh: Scottish Executive (Source: www.scotland.gov.uk/publications/2007/08/07090727/2, retrieved 9/10/2014)

Morgan S. 2000. *Clinical risk management: A clinical tool and practitioner manual*. London: The Sainsbury Centre for Mental Health.

Scottish Executive. 2006. *Changing Lives: Report of the 21st Century Social Work Review*. Edinburgh: Scottish Executive.

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