



GRiST rules of thumb

FOR MENTAL-HEALTH PRACTITIONERS

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1 Providing scores for items with a zero to ten scale

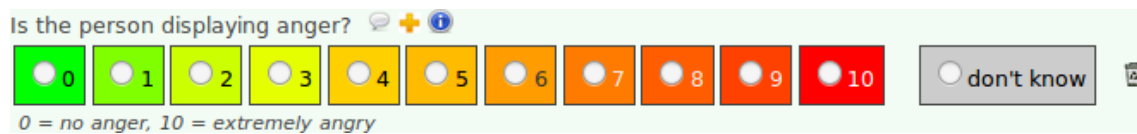


Figure 1: Scale answer for anger showing the comment icon (speech bubble) and the action icon (+).

1. Use the descriptors below the scale for a clear definition of how to interpret the maximum and minimum values (see Figure 1).
2. Give the value that feels right and do not agonise about it because it will not improve your intuitive judgement.
3. If a particular behaviour or circumstance is not a problem, then put a zero: it is not contributing to the risks.
4. Spend time on the factors that do influence risks or their management, not on the irrelevant ones for the particular assessment.

2 Comments

1. *Only* provide a comment if it adds to the understanding of that risk item and does not simply repeat what the quantitative answer communicates.
 - (a) There is *no* necessity to provide a comment for every question.

2. Focus comments on the specific question to which they are attached.
 - (a) Don't provide additional information relating to other questions.
 - (b) Trust the GRiST assessment structure to have a more appropriate place for the additional information.
 - (c) Use the search box to find questions.
3. Comments should be brief and to the point: a single short sentence is usually enough or, even better, a key phrase that communicates the issue.

3 Actions or management plans




1. Always put something in the action box if it is something that will help manage the risk issue.
2. Only put something in the action box if it relates to that specific item.
 - (a) Trust the GRiST structure of questions to have a more appropriate place for any related items.
3. All actions are collated at the point when plans are drawn up for individual risks and for the assessment as a whole.
 - (a) The action plan for each individual risk allows you to view all actions entered throughout the assessment related to the specific risk, and copy them into the risk action plan.
 - (b) The overall Safety Plan has similar functionality, allowing you to copy all risk action plans and individual actions from the whole assessment directly into the Safety Plan. You can then edit the plan as a whole.
4. Use the Safety Plan button at the top of the screen to record any thoughts related to risk management during the assessment, or any actions which do not fit the current question. You can then copy these actions into the action box when you come to the appropriate question.

4 Providing the risk-judgement score


1. Always give a risk judgement unless you have not evaluated the risk at all.
2. The risk judgement is relative to the normal level of risk in the service users general population (e.g. working-age adults, older adults, young children), where a score of zero indicates the risk is judged to be no higher than would be expected in the general population.
3. The risk judgement should apply to the service user's current circumstances.
 - (a) If the person's circumstances change, then a risk assessment *must* be repeated and it should be done with respect to the new circumstances.
4. Trust your expertise and experience: the GRiST database shows that people make consistent and reliable judgements that accord with each other.
5. Don't agonise over the exact risk number to provide: the scale from 0 to 10 is designed to allow a margin of error.

5 Providing a summary comment for each risk

Suicide

In your judgement, what is the risk that the person will attempt suicide?   


Previous Answer: DK

0
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10
 don't know 

0 = no risk, 10 = maximum risk

Identify the actions for managing this specific risk

Make sure he is not alone on the anniversary of his wife's death.

Current Actions
Select to paste from here 

most recent suicide attempt
Make sure he is not alone on the anniversary of his wife's death.

potential lethality of suicide ...
Check the medicine cabinet and prescriptions.

Figure 2: You can add a comment and an action for each risk judgement

1. Add a comment related to each risk judgement to summarise the key issues that have lead you to make this judgement.
 - (a) State only those factors that are important for understanding why you gave a particular risk judgement.
 - (b) The summary brings attention to the *key issues* that have raised the risk and should *not* simply repeat the information already in the risk report.
 - (c) A few sentences or key points should be all you need.
 - (d) Concentrate *only* on why you gave the particular risk level *not* how you will manage it.
 - (e) If there are no issues raising risk then that is all you need to say. Spend more time on other risks or issues instead.

6 Managing the risk

1. Use the actions box to produce a management plan related to this specific risk
 - The Current Actions button to the right of the text box will expand when clicked, giving a list of actions you have entered throughout the assessment which related to this risk.
 - Click an action in this list to add it to the actions box.
2. Only provide a management plan that relates to this specific risk.
 - (a) The overall Safety Plan is used to collate actions across risks.

7 Risk formulation

1. Produce a Risk Formulation by clicking the Risk Formulation button at the top of the screen.
2. The purpose of the risk formulation is to connect the symptoms of risks, their causes, and the timescales of managing them.
3. The risk formulation should make it easier to ensure the management plan tackles the most urgent immediate problems as well as the longer term reasons for those problems.
4. These longer-term problems *must* be addressed if the person is to avoid a repetition of raised risks on discharge from the particular care episode.

We are encapsulating the risk formulation using a 5 Ps model that help separate the symptoms and causes. The result is an easier structure for delivering the appropriate management plan. These 5 Ps and their headings in the risk formulation box are as follows:

1. **The Problem:** “RISKS BEING FORMULATED (Problem risks)”
 - (a) The information under this heading should point to the specific risk (or sometimes risks) that are most problematic and the overall reason why.
 - (b) It should bring the major risk issues immediately to the attention of someone reading the report.
 - (c) One or two sentences is enough: the details of the problem are elsewhere in the report and do not need to be repeated here.
2. **Precipitating factors:** “Risk triggers (Precipitating factors)”
 - (a) These are the most urgent issues that need to be tackled immediately to reduce the risks.
 - (b) They tend to be the symptoms of risk behaviours, such as current intention, that must be addressed first.
3. **Perpetuating factors:** “Persistent contextual factors (Perpetuating)”
 - (a) These are the more contextual issues in a person’s life that often provide the environment allowing risks to develop.
 - (b) Perpetuating factors are important for determining what management plans will work in the context of these perpetuating factors.
 - (c) Perpetuating factors in GRiST include, for example, the person’s relationships, accommodation, substance misuse, mental illness, etc.
4. **Predisposing factors:** “Past factors (Historical, Pre-existing or Predisposing)”
 - (a) These are the historic factors that cannot themselves be changed but that help inform the most appropriate plans for addressing those issues that *can* be changed, such as the person’s responses to them.
5. **Protective factors:** Same title in the risk formulation box.
 - (a) These are the factors that would dangerously increase the risks if they were to disappear.

- (b) They will probably need an associated management plan to:
 - i. ensure they are being monitored so that an alert can be raised if they are to change;
 - ii. implement the appropriate response.

8 Overall risk and safety management

1. When you have evaluated each risk, answered the general questions relating to all risks, and provided a risk formulation, it is time to produce the Safety Plan for the complete assessment.
2. Collate your action plans for each assessed risk with actions from the general questions to produce your overall safety plan.
 - (a) Click the Safety Plan button at the top of the screen.
 - (b) Use the Current Actions button to insert general actions and risk plans in to the text box.
 - (c) After inserting the appropriate actions, edit the plan as required.

9 Levels and contexts of assessment

1. Screening

- (a) Use the screening version if the focus is on an initial evaluation of risk levels rather than how to manage them.
- (b) Answer all questions that show up in bold with a “screening” label in front.

2. Full assessment

- (a) The focus is on both evaluating and managing the risks.
- (b) It is often used after an initial screening.
- (c) All risks should be assessed.

3. Repeat assessments

- (a) Not all risks will need reviewing every time.
- (b) Switch off risks that are not being reviewed so that their most recent evaluation will be pulled into the new assessment report.
- (c) It is up to you and/or your organisation to decide how often a risk needs to be reassessed.
 - i. Keep an eye on when each risk was last assessed.
 - ii. Make sure a repeat assessment is done within the agreed maximum time lapse.

4. Rapid repeat assessments

- (a) They are conducted when only those items that can change on a daily basis are reviewed.
- (b) These are the questions with no padlock icons.
- (c) The GRIST mind map interface has the functionality for showing only these questions and makes the assessment very quick.

5. Assessments recorded in real time with the service user

- (a) Should be done using the mind map version of GRiST.
- (b) It allows easy access to any questions using a “mind map” overview.
- (c) Refer to the GRiST Quick Start guide for more information.

References