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|----------------------|--|
| <b>Tenant Name</b>   |  |
| <b>Address:</b>      |  |
| <b>Completed by:</b> |  |
| <b>Date:</b>         |  |

| Q.1  | (Y/N) | Risk rating |
|--|-------|-------------|
| <p>Is the tenant verbally aggressive or do they demonstrate physical behaviour which could be perceived as aggressive by others?</p> <p>(e.g. abusive language, criticism, shouting, manipulative language)</p>  | Yes   | High        |
| <p>If Yes, please give further details:</p> <p>X suffers from Schizophrenia so can be unstable if he has not taken his daily medication. X can be erratic if not medicated and could become aggressive both verbally and physical.</p> <p>19.08.2016- X has displayed no level of aggression or been verbal to me in the last 3 months.</p> <p>18.11.2016- As above, no concerns</p> <p>13.02.2017- As above, Red Warning for "Do Not Visit Alone" has come off system. Now says "Contact Complex Needs Manager".</p> <p>13.05.2017- As above, no change</p> |       |             |

| Q.2   | (Y/N) | Risk rating |
|---|-------|-------------|
| <p>Does the tenant show any signs of alcohol/drugs/solvent misuse and/or has the tenant been admitted to hospital as a result of drug, alcohol or solvent misuse?</p> <p>(e.g. what substance/how much/how frequent? If the tenant drinks is it better to visit in the morning before they are drunk? Has the tenant or is the tenant accessing treatment?)</p> | Yes   | Medium      |
| <p>If Yes, please give further details:</p> <p>Signs of empty bottles of wine and empty bottles/cans of beer have been on display for me to see. X has been asked by myself and the CSO from Fire Brigade but he says he does not drink often.</p>  |       |             |

|                                 |  |  |
|---------------------------------|--|--|
| As above                        |  |  |
| 13.05.2017- As above, no change |  |  |

| Q.3   | (Y/N) | Risk rating |
|---|-------|-------------|
| Has the tenant had any criminal convictions for sex offences? | No    | Low         |
| If Yes, please give further details:                          |       |             |

| Q.4  | (Y/N) | Risk rating |
|--|-------|-------------|
| Has the tenant got a history of offending behaviour (other than sex offences)? | No    | Low         |
| If Yes, please give further details:   |       |             |

| Q.5  | (Y/N) | Risk rating |
|--|-------|-------------|
| Are you aware of any visitors subject to Probation?<br><br>(e.g. harassment order, restraining order, injunction or ASB Court order, ABC, tagging) | No    | Low         |
| If Yes, please give further details:   |       |             |

| Q.6   | (Y/N) | Risk rating |
|---|-------|-------------|
| Has the tenant ever been financially, emotionally or sexually exploited? Is the tenant known to MARAC?<br><br>(e.g. is the tenant or children living at the property known to Social Care? Are they on the Risk Register/Children in Need?) | No    | Low         |
| If Yes, please give further details:  |       |             |

| Q.7   | (Y/N) | Risk rating |
|---|-------|-------------|
| <p>Has the tenant any health conditions or behaviours that may pose a risk to us? What happens when they become unwell or relapse? Is there a certain time of day that is better for us to visit? Has the tenant ever self-harmed, attempted suicide, or had suicidal thoughts before?</p> <p>(e.g. the best time of the day to visit can be linked to mental health issues or a learning disability. Self-harming and suicide can be cutting, overdose, physically causing pain to self)</p>   | Yes   | High        |
| <p>If Yes, please give further details:</p> <p>X was admitted to the Radbourne Unit in late 2014 as he has Schizophrenia. X could have a relapse but is overseen by CPN and is medicated daily. X prefers planned visits and for you to not turn up unplanned as he can become anxious.</p> <p>18.11.2016- X is doing well, he is still under a CPN and is taking his medication on a regular basis.</p> <p>13.02.2017- No relapses to report, X mental Health seems stable. Referral to social care though as I feel X is neglecting himself.</p> <p>13.05.2017- As above, no change. X did not want to engage with social care.</p> |       |             |

| Q.8   | (Y/N) | Risk rating |
|---|-------|-------------|
| <p>Has the tenant been physically harmed in any way on a regular basis?</p> <p>(e.g. violence from others, confinement, cohesive behaviour by others)</p> | No    | Low         |
| <p>If Yes, please give further details:</p>   |       |             |

| Q.9   | (Y/N) | Risk rating |
|---|-------|-------------|
| <p>Has the tenant ever exploited or harmed someone else?</p> <p>(e.g. sexual, emotional, physical, financial abuse, violence, harassment)</p> | No    | Medium      |
| <p>If Yes, please give further details:</p>   |       |             |

**Outcome**

|  |      |
|--|------|
| <b>Risk to self</b>  | High |
| <b>Risk to staff/others</b>  | High |
| <b>Visits required in pairs</b>  | Yes  |
| <b>If answered Yes to any of the questions then please explain detail:</b><br><br>X can be unpredictable due to his mental health. He is currently medicated but can come across as aggressive if challenged. There is currently a red triangle on CSM due to past related incidents. I would advise for staff to visit in pairs especially if you are new to X as he can become anxious and irritated if he does not know you. However I have discussed in 121 that I will use my professional judgement and common sense and conduct visits alone due to my experience of working with individuals with such complex needs.<br><br>19.08.2016- I feel no threat from X currently, he has never displayed any aggressive behaviour towards myself.<br><br>18.11.2016- As above, no update required.<br><br>13.02.2017- No relapses to report, X mental health seems stable. Referral to social care though as I feel X is neglecting himself.<br><br>13.05.2017- As above, no change really. The property and X IMO is as good as its going to get, there is no progress but also things have not been neglected and got any worse. X responds to small tasks and visits on a weekly basis on the same day. |      |
| <b>Explain to the tenant they must be home alone when you visit them if you think their visitors could be a risk to you.</b>   |      |