

Risk Identification and Safety Assessment (RISA) Tool

Action Plans

NOTE: RISA is a self-directed tool for service providers to use with professional discretion and in line with relevant organizational policies, professional codes of conduct, and laws. The Barbra Schlifer Commemorative Clinic does not assume any responsibility or liability for assessments conducted using this tool. Always refer to your own organization's policies and procedures, which take precedent over the content provided in this tool and consult with your supervisor.

RISA Action Plans

The Action Plans in this document have questions that can assist service providers after they have completed the RISA Questionnaire, Risk Identification Worksheet and Safety Plan with clients. You can find these documents on our website at www.riseaboverisk.ca

There are three action plans included in this document:

[A: Action Plan with Client](#)

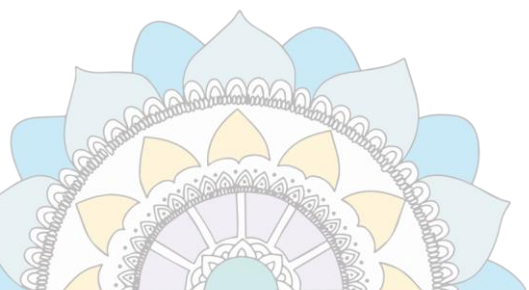
Use this plan to help guide actions you can take with clients in addition to the Questionnaire and Safety Plan.

[B: Action Plan for Case Management/ Risk Management](#)

Use this to help guide referrals and case management strategies you might use to help with risk management for the client.

[C: High-Risk Case Consultation and Action Plan](#)

If you have identified a potential high-risk case, use this to help guide actions and considerations you may want to take into account as you support your client to enhance their safety.



A: Action Plan with Client

After reviewing safety plan questions and strategies with clients, it is important to ask clients about the next steps and have an action plan regarding their situation. In addition, it is essential to book follow-up meetings with clients to review safety and action plans periodically. It is also important to ask clients about any change of circumstances since it can impact their level of risk and safety. Therefore, it is important also to review questions about risk factors of serious harm when revising the safety and action plans.

- What are the risks and danger?
- Who can get hurt?
- What are the next steps?
- How are you taking the next step?
- Are you going to share your plan with someone?
- What kinds of support do you have?
- Who can help in a situation of violence?
- What kinds of support would you need?
- What are the things you need to change?
- Who can support you in making these changes?
- What can go wrong?
- What would you do as an alternative?
- Who can support me if I need to change my plan?
- What are you planning to do in case of emergency?
- Who should be involved?
- Where do you think you can go? And for how long?
- Do you have a list of crisis lines in case you need support 24 hours?



B: Action Plan for Case Management/ Risk Management

This action plan is for service providers to use to help guide their ongoing case management and risk management strategies in working with clients beyond the initial risk assessment/ safety planning phase. Case management may also involve leveraging referral networks and relationships with other service providers within and across organizations, particularly where a client's safety needs extend beyond a provider's scope of service or expertise. It includes reflective questions that can guide service providers to the next steps regarding each client's situation. Providers will also be encouraged to reflect on systemic barriers that clients may encounter as they seek safety and potential advocacy or mitigation strategies that can emerge from collaborative case management.

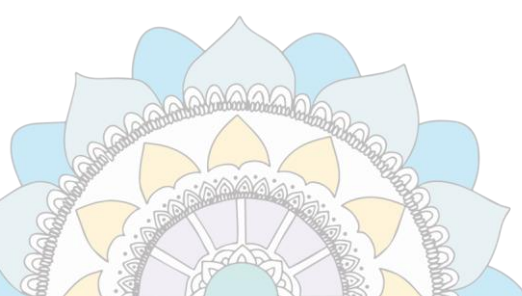
1. Are the notes complete?
2. Is any other follow-up needed, and what is the timeline for the follow-up?
3. Does a case consultation or critical incident debriefing need to happen?
4. Are services and systems in the community working together and sharing risk related information, as appropriate?
5. If not, is there a need to involve other service providers to communicate potential risk? Have you discussed this need with your client? Have you asked for written consent to share information?
6. Has your client experienced strangulation? If yes, how recently? A referral to a health practitioner might be needed to assess potential brain injury.
7. Is there any follow-up you need to do for yourself or your colleagues?
8. What can you do to take care of yourself at and after work?
9. What stood out for you personally and professionally from this situation?
10. Do you need to share client's situation/safety concerns with your supervisor? High-risk consult.
11. Are there any learnings you can share/debrief with your team/supervisor to enhance the agency's capacity to address client's safety concerns?



Referrals

It is important to keep track of all referrals provided to client and have their contact information for a potential risk sharing and or collaboration on behalf of the client. List below the referrals provided for your client and contact information of the worker or agency.

Service	Name of the worker or agency	Date of referral	Notes

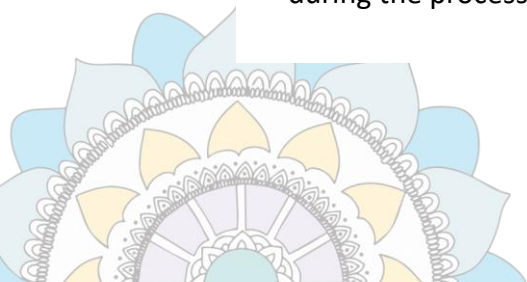


C: High-Risk Case Consultation and Action Plan

This is an additional component intended to assist front-line workers and supervisors in consulting and taking appropriate actions in cases identified as high-risk.

Critical questions from supervisors to front-line staff

- Describe the situation and what concerns you have for the client.
- What is your assessment of the situation?
- What is the client's assessment of the situation?
- What are the client's greatest fears? What part of the safety plan worries the client the most?
- What is your professional experience and intuition telling you to do?
- What is the client's intuition and lived experience telling them to do?
- What has worked and not worked in the past to keep the client safe?
- Is someone other than the client, in immediate danger (children, family, relatives, close friends, pets)? If others are also in danger, this could increase the overall risk levels in several ways.
- Is there a history of threats or physical violence?
- Have you asked if there are any weapons of concern?
- What is the context of the violence (severity) and frequency (likelihood). If yes, have you talked to the client about potential serious harm?
- Is there a recent separation? Have you talked to the client about risks related to a recent separation?
- Who else has the survivor told (friends, family members, agencies)?
- Does the person who caused (s) know her passwords, routine, movements, home/work address or telephone numbers or details of those of her family or friends?
- What risks are there if they stay? What risks are there if they leave?
- How are you slowing down the process and creating a supportive, empathizing tone during the process?



- Which agencies or community supports are in play? Does the client need more systems in play? Are there other systems that may have a different perspective or approach?
- Do you understand the systemic injustices the client/s, the person causing harm/s, and the communities are experiencing?
- Have you explored and asked the client to reflect on the systemic and institutional factors related to the situation and experiences? What are the barriers and alternatives?
- What is the client's worst-case scenario?
- What are the strengths of their situation?
- Is there time to reflect? How fast do we need to respond?
- What kind of advocacy does the client need?
- Who else is involved in this situation?
- Were there any moments you could slow the client down, considering the level of trauma? And using a strength-based approach, reminding survivors of their strengths
- How can you slow things down for yourself?
- Have you given the client resources (crisis lines etc.?)
- Have you reviewed the safety and action plans? What actions need to happen?
Today/tomorrow/next week?

