

Comité interuniversitaire et interprofessionnel de développement  
professoral continu (CII-DPC)

**Titre du document :**

Risk Assessment of Persons Living at Home: A  
Decisional Aid

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## Risk Assessment of Persons Living at Home: A Decisional Aid

This assessment tool applies to vulnerable adult clients with multiple issues.

This **Risk Assessment Decisional Aid** comprises :

- A **Checklist**
- A **Framework for Analyzing Risks**
- A **Five-pronged Test set out in the Hospitals Act of Nova Scotia**
- A guide to **Ethical decision-making: Contextualization**.

It is strongly recommended to seek consultation in dealing with complex cases. The aim of this **Risk Assessment Decisional Aid** is to help health care teams identify risk factors in the home environment and develop intervention plans.

In assessing risk factors, health care teams must take into account the person's previous life experiences, as well as the circumstances which attenuate or aggravate the current situation. Due to the possibility of misinterpretation, this tool should not be used as a scoring system for the assessment of the risk level.

How should the **Risk Assessment Decisional Aid** be used?

- Fill out the **Framework for Analyzing Risks**<sup>1</sup> using the **Checklist**.
- Use the **Five-pronged Test set out in the Hospitals Act of Nova Scotia** if you judge it is necessary to evaluate the person's capacity to understand the treatment.
- Refer to **Ethical decision-making: Contextualization** to objectify the possible choices in situations which are litigious or for which there is no consensus.

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<sup>1</sup>Note that the **Framework for Analyzing Risks** is not a tool for assessing competency.

## Risk Assessment of Persons Living at Home: A Decisional Aid

Name : \_\_\_\_\_ Dossier : \_\_\_\_\_

### CHECKLIST

#### Identifying bio-psycho-social risk factors

<b>Biological factors</b>		<b>YES</b>
1.	Presence of health problems which may rapidly affect physical integrity or result in death if the person refuses to follow recommendations made in the PIAS	
2.	Malnutrition, food poisoning	
3.	Dehydration	
4.	Recurring infections, wounds	
5.	Medications : <i>refusal, negligence, unable to self-administer, abuse, risk of overdose</i>	
6.	Number of hours without being changed is too long ( <i>incontinence, bandages...</i> )	
7.	Numerous falls, high risk for falls	
8.	Handicaps not compensated for in a person living alone ( <i>severe deafness, blindness, difficulty communicating...</i> )	
<b>Psychological factors</b>		
9.	Cognitive deficits (recent or long term). Ex: <i>altered perception of reality, impaired memory, disorganization (leaves objects unattended on stove, goes outside without adequate clothing, eats spoiled food, ...)</i> etc...	
10.	Psychotic state ( <i>symptoms or psychotic state</i> )	
11.	Major depression	
12.	Behaviour problem (recent or long term) : ( <i>aggressiveness, flight, wanders, smokes when wearing oxygen tube...</i> )	
13.	Poor judgment: denies or minimizes problems, resists help, unable to mobilize others to help him/her, unable to establish/maintain contacts with others	
14.	Post-traumatic stress reaction ( <i>severe anxiety, panic...</i> )	
<b>Social factors</b>		
15.	Isolation and lack of social network	
16.	Dependence on others to live at home safely	
17.	Refuses help, equipment ( <i>walker, lift, electric bed, etc...</i> )	
18.	Client and/or roommate is an alcoholic, substance abuser or dysfunctional	
19.	Presence of conflicts between the caregiver and client	
20.	Caregiver is inadequate ( <i>illness, intellectual deficiency, lack of understanding of client's needs...</i> )	
21.	Presence of conflict between/among caregivers	
22.	Victim of abuse : <i>physical, negligence, financial, psychological</i>	
23.	Disorganization of financial and personal affairs	
24.	Person is left alone for many hours, his safety is jeopardized	
25.	Unable to or refuses to pay bills ( <i>food, medication, rent...</i> )	
26.	Client's environment is unsafe ( <i>excessive accumulation of objects, danger, door left locked or unlocked all the time...</i> )	
27.	Eviction or imminent risk of eviction	
28.	Unsanitary conditions which render treatments dangerous, lack of safety for client and health care workers	
29.	Risk for fire ( <i>heating, cooking, cigarettes...</i> )	
30.	Presence of a means to harm oneself/others ( <i>suicide, homicide</i> )	
31.	Impaired ability to drive a car	

DATE: \_\_\_\_\_

## Risk Assessment of Persons Living at Home: A Decisional Aid

Name : \_\_\_\_\_ Dossier : \_\_\_\_\_

### FRAMEWORK FOR ANALYZING RISKS

Identified risk factors (according to Checklist):

Factors aggravating identified risks :

Factors attenuating identified risks :

Combining all risks, the level of danger is : low  moderate  high

List the interventions already tried, who was involved, and indicate the results obtained:

**Legal aspects :**

- Is the client under a régime of protective supervision? yes  no
- Is the client waiting for a private or public régime of protective supervision? yes  no
- Is the client competent to consent to care (Re: Five-pronged Test set out in the Hospitals Act of Nova Scotia)? yes  no
- What are the legal responsibilities (of the institution, of the professional)?

**Desired objectives :**

**Possible interventions and expected results :**

Interventions	By whom	Deadline	Re-assessment date

\_\_\_\_\_  
Name of evaluator

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Names of participants in the discussion : \_\_\_\_\_

Annexes 1 & 2

**Annex 1 : Five-pronged Test set out in the Hospitals Act of Nova Scotia <sup>2</sup>**

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1	Does the person understand the condition for which the treatment is proposed?	Yes	No
Explain :			
2	Does the person understand the nature and purpose of the treatment?	Yes	No
Explain :			
3	Does the person understand the risks involved in undergoing the treatment?	Yes	No
Explain :			
4	Does the person understand the risks involved in not undergoing the treatment?	Yes	No
Explain :			
5	Whether or not his (her) ability to consent is affected by his condition?	Yes	No
Explain:			

**Annex 2 : Ethical Decision-making : Contextualization**

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Identify the values, opinions, responsibilities or points of view :

1. Of the client.
2. Of the client's informal network (family/close friends).
3. Of the institution / programme (laws, regulations, codes of ethics).
4. Of the health care workers as individuals.
5. Of the health care workers as professionals (deontological codes).

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<sup>2</sup> Extract from Section 52 (2) Chapter 208 – Hospitals Act of Nova Scotia. Note: Placement is considered to be a treatment.