



Five critical risk management practices

Behavioral healthcare leadership teams

Suicide, danger to others, employment practices & sexual misconduct





The most frequent claims

- Sexual misconduct
- Suicide malpractice
- Violent acts
- Medication errors
- Employment practices

How do we know?

- 50+ year database of claims
 - Negley Associates
 - Mental Health Risk Retention Group
 - Thousands of cases





Summary

- Gather adequate information
- Danger signs for imminent risk of suicide
- Structured risk assessment instruments for violence risk



Summary

- 3 guidelines to avoid employment lawsuits
- Protecting patients from sexual misconduct

#1 gather adequate information



Obtain adequate information

- For assessment & treatment decisions
 - Ask about and document details
 - Collateral sources
 - Records & people
 - Training about applying confidentiality regulations
 - Use structured risk assessment instruments
 - checklists



Directions to the office

- Call the office
- 125



Lost on the way?

- Ask directions from gas station?
 - a collateral source



Limited information

- Limited reliability and validity of judgments about risk, managing risk & treatment



Make decisions with complete information

- 2 paths to incomplete information
 - Not enough questions about evidence-based risk factors
 - Structured instruments
 - Not consulting collateral sources



Document details - example

- History of problems with psychotic disorder
 - Included acute positive symptoms
 - Hallucinations
 - Delusions
 - Included agitation, irritability or hostility during psychotic episodes



Document details - example

- History of problems with psychotic disorder
 - Included distress (fear, stress) associated with psychotic symptoms?
 - Threat/control?
 - Included symptoms with themes of violence or aggression?



Document detail

- Be specific
 - “Long term risk factors:... Family relational problems...”
- Ask questions about & document specific information relating to risk factors
 - Social isolation?
 - Lack of support?
 - Feelings of being a burden?



Document detail

- Get & describe the details
 - Say more than, “He had a suicide attempt 6 months ago.”
 - How serious – risk rescue ratio
 - How well planned & prepared
 - Circumstances leading up to attempt - stressors
 - Means
 - How does patient feel about not succeeding
 - Alcohol or drugs as a factor
 - Why did attempt fail?



Document details - examples

- Violent incidents
 - **Precipitants**
 - Weapons
 - Threats
 - Injury
 - Instigator
 - Planned or reactive
 - Motivation
 - (John – 2 closet incidents & a bar fight)



Document details - examples

- "... Don't want anybody around me" has led to police involvement (violence risk?)
- "...hears voices, command hallucinations..." (?)



Limited Documentation

- “The patient reports that he continues to struggle with psychotic symptoms – auditory hallucinations...”
- “The patient has been hearing voices.”



Hallucinations or delusions

- What did they say?
 - Verbatim examples
- When?
- What were you doing?
- Have you heard other voices?
- Where do the voices come from?
 - Inside you or outside?

Hallucinations or delusions



- Have you ever acted on the voices?
- Thought about doing something?
- Do you intend to do something?
- Who are the voices about?

Hallucinations or delusions



- How often do you hear them?
- When was the last time?
- How intense?

Hallucinations or delusions



- Does anything make the voices more frequent?
- Does anything stop the voices?
- Does medicine stop the voices?
- Do you do anything to protect yourself from the voices?



Hallucinations or delusions

- Have you ever thought that people are trying to hurt you?
- Do you have thoughts that others find strange?



Hallucinations or delusions

- What are the thoughts like?
- Have you ever thought of taking action?



Hallucinations or delusions

- Have you done anything to protect yourself?
 - What happened?
 - What did you do?
 - How often?
- Does anything make it better?
- Treatment?



We see limited documentation



Collateral sources

- “It is particularly important to gather information from multiple sources...”
- “...assess the credibility of the informant, particularly if the information is gathered from the youth or parents.”
 - SAVRY manual



Collateral sources

- “Gathering information from multiple sources ensures that teams are identifying concerning behaviors accurately, assessing the student’s risks and needs, and providing the appropriate interventions, supports, and resources.”

- *Averting Targeted School Violence*, US Secret Service, 2021



Applying confidentiality regulations

- Ongoing training
- What you can do



Applying confidentiality regulations

- Listening to family without a release
- Incapacitated exception
- Serious & imminent threat exception



Your own records

- Critical information folder
- Easily accessible



#2 danger signs of imminent risk of suicide



Risk assessment

- “Although the assessment of desire, plans, preparations, and intent is essential, evidence suggests that a significant percentage of suicide decedents deny suicidal ideation at their final mental health encounter.”
 - Chu, Joiner et al. *Routinized Assessment of Suicide Risk in Clinical Practice: An Empirically Informed Update*, Journal of clinical psychology 1-15 (2015)



Risk assessment

- “Additionally, reliance on chronic risk factors (e.g. psychopathology, past suicidal behavior, family history of suicide) limits our ability to determine whether an individual is at imminent risk.”
 - Chu, Joiner et al. *Routinized Assessment of Suicide Risk in Clinical Practice: An Empirically Informed Update*, Journal of clinical psychology 1-15 (2015)



Risk assessment

- “Therefore, it is imperative to assess acute and objective risk factors, which are time-limited and associated with an increased risk for suicide over a period of hours to days, not months or years.”
 - Chu, Joiner et al. *Routinized Assessment of Suicide Risk in Clinical Practice: An Empirically Informed Update*, Journal of clinical psychology 1-15 (2015)



Risk assessment

- Danger signs/acute symptoms
 - Agitation
 - Consider symptoms of anxiety?
 - Social withdrawal
 - Severe weight loss
 - Marked irritability
 - Nightmares/insomnia
 - Severe affective states
 - Talking about suicide



#3 use the current, best evidence & research

- Structured risk assessment instruments for the risk of danger to others



Structured assessments

- For assessment and treatment decisions about the risk of a patient being a danger to others
 - Evidence-based risk factors
 - Evidence-based steps in the process



A complex task

- Predicting the future
- About 130 identified risk factors
- Different contributions to risk



2 big decisions

- Who presents a risk?
- What is the plan for identified risk?



Deciding who presents a risk

- Who does these?
 - Identify valid risk factors
 - Evidence based
 - Measure risk factors
 - Combine risk factors
 - Estimate violence risk
- The evaluating professional or an instrument?



Clinical risk assessments

- The evaluating professional does all 4 components



Structured risk assessments

- "The... scientific literature is clear that structured risk assessment is superior to unstructured risk assessment..."
 - Monahan, *Tarasoff at Thirty: How Developments in Science and Policy Shape the Law*, 75 Univ. of Cincinnati Law Review 497 (2007)



Structured risk assessments

- "...but all of... [the literature] suggests that only a minority of mental health professionals routinely employ structured risk assessment."
 - Monahan, *Tarasoff at Thirty: How Developments in Science and Policy Shape the Law*, 75 Univ. of Cincinnati Law Review 497 (2007)



FBI recommendation

- Threat assessment teams
 - Use structured professional judgment risk assessment instrument – assess an individual's risk & consider management steps
 - *Making Prevention a Reality: Identifying, Assessing, and Managing the Threat of Targeted Attacks*, FBI, Behavioral Analysis Unit, November, 2016

Structured risk assessment instruments



- HCR-20
 - General violence risk
- SVR-20
 - Sexual violence risk
- SARA
 - Family violence risk
- SAVRY
 - Youth violence risk 12-18
- EARLs
 - 12 & younger



Structured risk assessments

- Sophisticated checklists
 - Researched risk factors
 - The right questions
 - Research backed steps in the assessment process



So...

- Screen everyone for violence risk...then....
- Use the HCR-20 version 3 for patients indicated at some risk



Screening checklist

- Violent behavior – physically hurt someone?
- Violent threats
- Violent thoughts
- Have you felt that you are not in control of your own ideas or thoughts?



Screening checklist

- Hospitalizations related to hurting someone?
- Fights?
- Arrests or orders of protection related to threatening or violent behavior?



Screening checklist

- Current or recent thoughts or behaviors that others have interpreted as threatening
- Could someone hurt you?
- Other indications.....



Now what?

- Use professional judgment and consider
 - Recency
 - Severity
- Resolve doubt in favor of HCR-20



HCR-20 V.3

- Advantages
 - Cost-effective
 - Demonstrated as reliable with substantial world wide research
 - Designed to guide a process that professionals already think they should complete



Is the HCR just for legal risk management?

- The HCR “ [is]... designed to capture what everybody thinks should be done systematically across risk assessments.”
 - Stephen Hart, PhD Lecture on Administration of HCR 20



HCR-20 V.3

- Time efficient
- "...you'll be able to incorporate these ideas into your practice, do it a little bit more systematically and it won't cost you much time. This should not be something that complicates your life or makes you spend a lot more time doing a risk assessment..."
 - Stephen Hart Ph.D. Talk on administration of HCR-20 (2013)



HCR-20 V.3

- For all adults, 18+, regardless of
 - History of violence
 - Mental disorder
- For older adolescents, 16-17, not dependent
- SAVRY for younger



HCR-20 V.3

- 7 step process to guide the professional
 - Gather information
 - Determine risk factors
 - Determine relevance of risk factors
 - Formulate violence risk
 - Scenario planning
 - Management plan – monitoring & treatment
 - Communicate final opinions



7 step process

- Determine risk factors
 - Consider all 20.... plus others
 - A risk factor is a matter that influences decisions about violence
 - A risk factor is an “area of inquiry”
 - For example : schizophrenia with or without “threat/control override” or differences in substance use



7 step process

- Step 2 determine risk factors
 - H (historical) - past up to present
 - C (clinical) - recent 1-6 months
 - R (risk management) - future 6-12 months
 - Present – yes, no, partial, omit



7 step process

- Manual contains definitions, indicators & notes



Risk factors - H

- History of problems with:
 - Violence
 - Other antisocial behavior
 - Relationships
 - Employment
 - Substance use



Risk factors - H

- History of problems with:
 - Major mental disorder
 - Personality disorder
 - Traumatic experiences
 - Violent attitudes
 - Treatment or supervision response



Risk factors - C

- Recent problems with:
 - Insight
 - Violent ideation or intent
 - Symptoms of major mental disorder
 - Instability
 - Treatment or supervision response



Risk factors - R

- Future problems with:
 - Professional services and plans
 - Living situation
 - Personal support
 - Treatment or supervision response
 - Stress or coping



Indicators – an example

- Problems with substance use
 - Started in adolescence or childhood
 - Multiple developmental periods
 - Multiple substances
 - Heavy use
 - Chronic use
 - Use of controlled settings
 - Involvement in drug trade



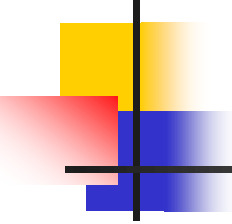
Indicators – an example

- Problems with substance use
 - Lead to dangerous behavior
 - Affected financial status
 - Interfered with education, vocation, relationships
 - Recent past
 - Problems have escalated



Ordering the HCR-20

- HCR-20.com
 - Manual: \$110
 - Score sheets: free



#4 practice 3 guidelines to avoid employment lawsuits



Treat people consistently throughout the agency

- You fired or disciplined me but not _____ (people in unprotected categories) for:
 - Using sick time
 - Faulty time records
 - Using the fax machine for personal reasons
 - Taking my name off the on-call list
 - Breaching confidentiality



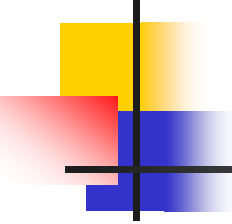
Treat people consistently

- Discipline spreadsheet:
 - Date of events
 - Factual description
 - Protected category
 - Discipline imposed



Timing is everything

- Chronological juxtaposition of 2 events implies unlawful treatment
 - For example: a complaint and a demotion
- Often cited by EEOC



Neutral third-party to investigate factual disputes

- Investigate
- No preconceptions about which side to support – supervisor/employee



#5 avoid staff sexual misconduct

- Careful hiring practices
- Recognizing warning signs
 - Ongoing training for supervisors



Careful hiring practices

- CSU counselor negligent hiring claim



Careful hiring practices

- Check all relevant references
- Follow-up reluctant references
 - Cover letter
 - Release with reference name
 - Copy of reference immunity statute
 - Immunity unless reference is knowingly false
 - Check your state



Warning signs

- Longtime psychologist mentor claim
 - People above suspicion?



Warning signs – a few examples

- What makes us vulnerable to making poor decisions?



Warning Signs – a few examples

- Personal problems such as:
 - a severe illness in the family (esp. requiring care giving)
 - staff member illness
 - death of a loved one
 - divorce
 - financial troubles



Warning Signs – a few examples

- Life transitions
 - Impending retirement
 - Job changes
 - promotion



Warning signs – a few examples

- Unusual call offs
- Unusual tardiness
- Short temper
- Not being helpful
- Personality changes
- Frustration
- Stress



Responding to warning signs

- Sometimes empathetic conversation with comments - careful about boundaries



Patients most at risk

- Previous victimization - incest & sexual assault
- Clinical supervision discussions



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Summary

- 3 guidelines to avoid employment lawsuits
- Protecting patients from sexual misconduct
 - Careful hiring
 - Warning signs training



Questions & Comments

