

COLTEN CARE POSITIVE RISK ASSESSMENT TOOL				
Name of Person: Mr George Example				
Assessed by: A Practitioner		Date of Assessment: xx/xx/xx		
Name and relationship of others involved in the risk assessment and decision-making process: Miss Annie Example (Daughter) Dr Foster (GP) Mr Harry Biker (Friend)				
Description of the Risk: George would like to ride on the back of his friend's Harley Davidson motorcycle. George is living with dementia and lacks insight into his abilities and is unable to assess risk. George has poor balance and is prone to falls. He has recently had an epileptic seizure.				
Person(s) at risk: George, his friend and members of the public.				
Nature of the Risk: George is at risk of falling off the motorbike whilst it is travelling at speed, which would result in serious injury/death to George. His friend may have an accident if George causes a distraction whilst riding and this could affect members of the public.				
Calculate the risk using the Risk Calculator (at right)				
Hazard	Consequences	Likelihood	Risk Score	Risk Rating
George falling off the bike and causing an accident involving others as a result	5	4	20	Very High
What are the advantages and disadvantages of taking the risk? (Ensure the Person's beliefs and values are explored and record discussions below)				
Advantages:		Disadvantages:		
Medical & physical well-being: None identified		Medical & physical well-being: If George loses his balance whilst on the back of the bike or has a seizure he could suffer a severe injury or fatality. This could also affect the stability of the bike and cause an accident involving his friend and members of the public.		
Psychological & Emotional well-being: George has been quite withdrawn and mildly depressed lately. Being able to pursue his hobby will have a positive effect on his self-image and self-esteem		Psychological & Emotional well-being: None identified		
Social: George is looking forward to spending time with his friend Mr Harry Biker away from the care home "just like old times"		Social: Mr Harry Biker doesn't wish to take George to the Bikers Club because he is worried about getting George in and out of the sidecar on his own or George being tempted to try to do so unaided if they stop at the club		
Ethical/Spiritual/Cultural: George has been a member of a bike club most of his adult life. He had his own Harley Davidson motorbike until he was diagnosed with dementia		Ethical/Spiritual/Cultural:		
Having discussed the balance of risk with the resident, do they have the mental capacity to agree the control measures required to manage the risk?				
Yes		No		(Circle as appropriate)
Refer here to method of assessment in accordance with your local policy guidelines and state legislation. For example, Mental Capacity Assessment completed and attached.				
If no, who has been consulted in the making of a Best Interests Decision/Giving Consent?				
Refer here to your local policy guidelines and state legislation and follow due process. For example, guardian consent obtained or Best Interests Decision documented and attached				
Control Measures Identified:				
Physical: George will not sit on the pillion of the bike. His friend will arrange to have a sidecar fitted to the bike by a manufacturer-approved/authorised installer and George will ride in the sidecar with a seat belt in place.				
Equipment: George and his friend will wear appropriately sized crash helmets.				
Procedural: Care home staff will assist George in and out of the sidecar using appropriate hoisting apparatus (see separate Moving and Handling Assessment and Care Plan). George will remain in the sidecar whilst he is out with Mr Harry Biker and they will go for a ride without making any stops. If and when George visits the Bikers Club it will be by car, accompanied by his daughter, Miss Annie Example.				

Other: Mr Harry Biker has fully comprehensive motor insurance. George has had a recent medication review and his dose of anticonvulsant medication has been increased to significantly reduce the likelihood of epileptic seizure. George's lack of insight and ability to assess risk remains unchanged.

With Controls in place, re-calculate the risk rating using the Risk Calculator:

Hazard	Consequences	Likelihood	Risk Score	Risk Rating
George falling off the bike and causing an accident involving others as a result	5	1	5	Low

Integrate the control measures into the care plan and determine frequency of evaluation

For example, if this was going to become a weekly event, the risk assessment would need to be reviewed periodically as George's general health is likely to deteriorate over time.

I understand the risks involved in the planned activity and consent to the control measures identified above:

Signature of Person:	Unable to give informed consent due to lack of mental capacity	Date:	Xx/xx/xx
Other: (State relationship)	Miss Annie Example (Daughter)	Date:	Xx/xx/xx
Other: (state relationship)	Dr Foster (GP) – Verbal telephone consultation (verified by Nurse A. P)	Date:	Xx/xx/xx
Other: (state relationship)	Mr Harry Biker (Friend)	Date:	Xx/xx/xx
Signature of Assessor:	Registered Nurse A Practitioner	Date:	Xx/xx/xx

Left and above: Table 1, the Colten Care Positive Risk Assessment Tool. Below: Table 2, the Colten Care Risk Calculator

COLTEN CARE RISK CALCULATOR			
Identify the consequence score and the likelihood score separately.			
<b>Consequences x Likelihood = RISK SCORE</b>			
Use the risk score to identify the risk rating and guidance on actions required			
Consequences	Score	Likelihood	Score
Minor injury	1	Remote – would not happen in 5 years	1
Lost time injury/illness	2	Unlikely – would not happen in 2-3 years	2
Serious injury/disablement	3	Likely – would expect to happen once a year	3
Death	4	Very likely – could occur 2 or 3 times a year	4
Multiple fatality	5	A certainty – likely to happen at the moment	5
Risk Score	Risk Rating	Action Required	
1 - 2	Trivial	No further action required and no changes to the care plan are needed. Continue to monitor in case of change of circumstance and reassess as required.	
3 - 6	Low Risk	No additional controls are required, although consideration may be given to improvements that will not impose restrictions on the resident. Monitoring is required to ensure that the controls are maintained. Continue to monitor in case of change of circumstance and reassess as required.	
7 - 11	Medium Risk	Efforts should be made to reduce the risk and risk reduction measures should be implemented. However, the balance of risks and benefits to the resident should be carefully measured and restrictions limited accordingly. Where a moderate risk is associated with extremely harmful consequences, further assessment may be necessary to establish more precisely the likelihood of harm as a basis for determining the need for improved control measures.	
12-16	High Risk	Urgent action is required to reduce the risk. Considerable resources may need to be allocated to reduce the risk and the Operations Manager may need to be consulted about procuring the necessary resources.	
17-25	Very High Risk	If it is not possible to reduce the risk even with unlimited resources, safeguarding procedures must be implemented.	