

Adult Carers and Safeguarding Risk Assessment Tool

The majority of carers¹ strive to act in the best interests of the person they support. There are times however, when those carers experience harm from the person to whom they are offering care and support or from the community in which they live. Risk of harm to the supported person may also arise because of carer stress, tiredness, or lack of information, skills or support.

Recognition of the risk of harm or harmful behaviours is critical to the prevention and protection of individuals. Risk of harm increases where the carer is isolated and not getting any practical and/or emotional support from their family, friends, professionals or paid care givers.

The following checklist has been developed to help front line practitioners identify informal carers who are or who may be at risk of harm, may be at risk of harming the person they care for, or both.

The shaded boxes indicate higher risk factor areas and should be considered carefully using professional judgement.

¹ People providing care on an unpaid basis, usually to a family member, friend or neighbour

Person potentially at risk is:	
Name of person potentially at risk:	
CF ID of person potentially at risk:	

Risk factors and warning signs for carers who may be at risk of harm from the cared for person.	Check box if risk factor applies:
The cared for person has (health and social care) needs that exceed the carers ability to meet them	
The cared for person does not or is unable to consider the carers needs	
The cared for person treats the carer with a lack of respect or courtesy (intentional or unintentional)	
The cared for person rejects help and support from outside (including breaks)	
The cared for person refuses to be left alone (day or night)	
The cared for person has control over financial resources, property and living arrangements	
The cared for person engages in behaviours that are challenging (abusive, aggressive or frightening)	
The cared for person has a history of substance misuse, unusual or offensive behaviours	
The cared for person does not understand their actions and their impact on the carer	
The cared for person is angry about their situation	
The cared for person has sought help or support but was not eligible (for statutory support)	
The carer or cared for person is emotionally or socially isolated	
The cared for person is a partner or close relative	
The carer lives with a person with dementia	
TOTAL	

Risk factors and warning signs for the cared for person who may be at risk from the carer.	Check box if risk factor applies:
The carer is angry about their burden of care	
The carer has specific health or care needs of their own e.g. mental ill health, chronic ill health, drug and/or alcohol use	
The cared for person is older and has no other support	
The behaviours of the cared for person are challenging e.g. dementia, drug and/or alcohol use, personality disorder. The carer is at risk of reacting negatively to this	
The carer is unable to meet the necessary needs of the person they care for e.g. personal care, feeding or giving medication	
The carer has little insight or understanding of the cared for persons condition and associated needs (including an under or overestimation of need)	
The carer has had to unwillingly change their lifestyle due to their caring role	
The carer is feeling emotionally and/or physically isolated e.g. no support from family, friends or neighbours	
The carer has additional responsibilities e.g. within the family, at work, dual caring role	
The carer has little or no opportunity for time out of the caring environment e.g. personal or private space, a break from the caring role	
The carer has frequently requested help, support or long term care without success	
The carer is being abused by the cared for person e.g. physical, sexual, emotional, financial, psychological. You should consider whether this alone meets the criteria for a safeguarding adults referral.	
The carer feels unappreciated, undervalued or exploited by the person they care for, relatives or services	
The carer has long standing relationship difficulties with the person they care for	
The carer understands that their actions or inactions will have a negative impact on the person they are caring for e.g. wilful neglect, inappropriate restraint	
The carer has little or no communication with the person they are caring for either through incapacity, poor relationships or choice	
TOTAL	

Current risk status	
Following a review of the information contained within this risk assessment, please detail the overall risk identified.	
0	No apparent risk – No history or warning signs indicative of risk. No further action
1-5	Low apparent risk – No current behaviour indicative of risk but persons history and/or warning signs indicate the possible presence of risk. Necessary level of screening/vigilance covered by support plans, i.e. no special risk prevention measures or plan required. Action within care management - recording and review
6-10	Significant risk – Cared for persons or carer’s history and condition indicate the presence of risk and this is considered to be a significant issue at present. A risk management plan should be/has been drawn up and implemented. Consideration should be given as to whether the circumstances fit the safeguarding adults criteria and procedures followed .
11+	Serious risk – Persons or carer’s history and condition indicate the presence of serious risk. Highest priority should be given to risk prevention including the management of any immediate risk. It is likely that the concerns will meet the criteria for safeguarding adults procedures and these should be followed. Consideration should also be given to the completion of the Risk Identification Checklist for MARAC (high risk domestic violence).

Person potentially at risk	Carer		Cared for person	
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Summary of risks identified/Any other relevant information

What actions (if any) have been taken previously to reduce risk?

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Risk Management/Crisis Contingency Plan			
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Date completed:		Review date:	

Actions to be taken (in the event of risk behaviour/relapse/failure to engage)

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Completed by:	Profession:
Signature:	Date: