

Additional guidance for the Risk Identification Tool

The Services Coordinator or Personal Agent (SC/PA) is responsible for the completion of the Risk Identification Tool and the ISP Risk Management Plan. Providers who deliver services to people who live in residential settings are responsible to share information about known, serious risks with the SC/PA anytime changes in risk factors are observed.

“Possible” versus “Yes”

Possible is intended to be marked if evidence of the risk is not available, inconclusive, or the person declines to discuss the issue, but there is specific follow-up the SC/PA will be taking. If individualized supports are needed around this risk, mark the risk “Yes” instead of possible. Do not list “possible” risks on the *ISP Risk Management Plan*; instead, indicate what case management follow-up will be provided in the *Chosen Case Management Services* section of the ISP.

A future release of the Risk Identification Tool will change the label of this response from “Possible” to “SC/PA Follow-up” to reflect the intent behind this response option.

Supports by a provider organization or foster provider

This additional guidance applies to: #6. Unsafe Medication Management, #10. Lack of access to medical care, and #20. Safety and cleanliness of residence.

These risks do not need to be marked “yes” simply because the person lives in a residential setting and relies on a provider for basic supports with these activities of daily living. The *Functional Needs Assessment* identifies basic support needs in these areas. If a provider is expected to provide support around these needs, list the identified need under the appropriate service code in the *Chosen Services* section of the ISP.

If the only support necessary for one of these risks is provided by a provider organization or foster provider following their policies or applicable administrative rules, the risk may be marked “no.” Consider marking “yes” to any of these risks if the person requires individualized supports above and beyond the provider’s policies or applicable administrative rules.

Examples:

#6. Unsafe medication management	Mark no if the only supports necessary are the residential provider administering medications per their organization’s policies and OARs. Describe the supports the provider is expected to provide in the Chosen Services section of the ISP.
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#10. Lack of access to medical care	<p>Mark “no” if the only supports necessary are the residential provider supporting medical appointments per their organization’s policies and applicable OARs.</p> <p>Describe the supports the provider is expected to provide in the Chosen Services section of the ISP.</p>
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19. Enters into contracts that he/she may not be able to complete

19. Enters into contracts that he/she may not be able to complete: Consider the person’s capacity to make an informed decision about contracts or agreements he/she enters into.

It is not the intent or purpose of the *Risk Identification Tool* to label someone with these risks simply because they experience an intellectual/developmental disability or need some support to make an informed decision. Mark “yes” only if there are **known** circumstances that the person needs individualized support with to avoid exploitation or to avoid serious financial or legal consequences.

Comments

12. Other serious health or medical issues: Consider any other imp
List specific additional risk(s):

Comments: 

There are comments fields throughout the *Risk Identification Tool*. Comments are optional. Use comments to help explain **why** a risk was marked “Yes,” “No,” “Possible,” or “History.” Remember that the historical presence of a protocol or other support document is not sufficient rationale for marking a risk “yes.” Instead, describe specifically why the support for this risk is needed.

Avoid using comments to record the specific supports that may be needed to address an issue. Instead, always describe the specific supports on the *Risk Management Plan* in the ISP. Keep the *Risk Identification Tool* comments focused on **why** the particular response was marked.