

STANDARD 4

CARE AND MANAGEMENT OF THE RESPONDENT GUIDANCE FOR INDICATOR 4.4

4.4B Guidance on Clinical Risk Assessments

At this point in the process, if the credibility of the allegation has been established, a clinical risk assessment may be required to predict future risk and inform a permanent management plan (Guidance 4.4A).

If the Church authority believes this to be necessary, they can commission such an assessment from an expert in the area of professional practice.

In outlining what the risk assessment being commissioned should address, the Church authority should ensure the following:

- That the assessment is being conducted by a specialist with relevant qualifications;
- That a recognised, up-to-date framework for assessment is being used;
- That a letter of instruction, setting out the reasons for the referral and the expected outcomes of the assessment, is sent;
- That the risk assessment report should include:
 - The personal history of the respondent and of their religious vocation;
 - The respondent's sexual history;
 - The history of the respondent's offending behaviour;
 - A clear statement about the credibility of the allegation;
 - The respondent's attitude to the complainant(s), including evidence of empathy;
 - The respondent's attitude to the diocese/religious order in developing a safety plan;
 - The methodology or clinical framework used to assess the level of risk of the respondent abusing in the future;
 - Guidance on an appropriate management plan.