



HM Prison &
Probation Service

**Assessment, Care in
Custody and Teamwork**
ACCT

ACCT Assessor
Quick Guide



SAFETY TOOLKIT

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The role of the ACCT Assessor

The ACCT Assessor must have completed the Investigating Concerns module of the Safety Support Skills and the ACCT Assessor bolt-on (or have previously undertaken ACCT assessor training) and be a minimum HMPPS Band 3 or above (or equivalent for the private sector). They are responsible for completing the ACCT Assessment section of the ACCT document which must be completed within 24 hours of the concern form being raised. The assessment section of the document consists of 3 parts:

- Sourcing and documenting relevant background information relating to risk and recording this in the 'key information' section of the ACCT assessment.
- Conducting an assessment interview with the individual and documenting all relevant information in the Assessment Interview section of the ACCT Assessment.
- Completing an Assessors Assessment form (a summary of key information identified from the background information reviewed and interview with the individual).

The ACCT Assessor should also attend the First Case Review wherever possible.

The purpose of the ACCT Assessment

The purpose of an ACCT Assessment is to gather and review all risk-pertinent information from all available sources, including interviewing the resident themselves. This in-depth information is then considered during the first case review, and used to inform meaningful action to support the resident whilst on an ACCT.

The Assessor should:

- Provide residents with an opportunity to tell their story and to have their experience heard. The ethos around ACCT should always be **“Nothing about me, without me.”**
- Help identify their strengths, ways they may have coped in the past and establish what might help them now.
- Gain an understanding of the resident's risk to self; this could include past behaviours and/or any current risks or triggers identified.
- Attend and contribute to the first case review to support the resident and act as an advocate for them during the review.
- Provide fully completed assessment documentation to the Case Co-ordinator ahead of the first case review.

If there are exceptional circumstances which mean the ACCT Assessor is unable to attend the first case review, the Case Co-ordinator should discuss any questions they

may have about the content of the assessment with the ACCT Assessor prior to the first case review taking place. The Assessor should explain to the resident if they are unable to attend and what alternative support will be provided instead.

The Assessor is also responsible for discussing and completing the 'Agreement to Sharing of Information' section of the document with the resident and documenting any risks, triggers & protective factors identified within the assessment process in the Risk, Triggers and Protective Factors Form.

The ACCT assessment is critical as it not only provides information on the individual's risks, triggers and potential protective factors, but also helps ensure that the resident at risk's voice is heard from the very start of the ACCT process, so that they are engaged and included in all decisions made about their care.

Prior to the Assessment interview

Before the assessment interview, the Assessor must gather and review all available risk pertinent information and document any key information in the ACCT Assessment – Key Information section (page 21) of the document. The key information form advises on relevant sources of information to consider, such as information from NOMIS case notes and alerts, the security department, OASys/AssetPlus, the SDT, the Safer Custody department, Healthcare partners and other staff members who know the person well.

Note: It is important to remember that the ACCT process should be person-centred, and this list is not exhaustive.

Sourcing key background information will enable information on specific risks, triggers and protective factors to be identified if the resident does not volunteer it during the interview.

The Assessor should make every effort to engage with the resident so that their individual circumstances are understood, and they are able to tell their story in their own words, providing an insight into what may help them.

During the Assessment interview

Every effort **must** be made to engage with the resident. The Assessor must explain the purpose of the ACCT to them, what will happen next, and the purpose of the first case review.

The Assessment Interview is crucial as it helps to build trust in the ACCT process, ensuring that residents feel they have a voice and that they won't be judged. Assessors should make sure that residents know what they can realistically expect, and what is required from them. These relationships will influence resident perceptions in the future,

so it is important that they feel cared for and understood from the very beginning of the process.

It is possible that residents may not always be fully open and honest with us, particularly if they don't know us well. As part of the ACCT process we expect the resident to tell us their innermost and private thoughts/feelings. Would you want to do this with a stranger? It is unlikely you would feel comfortable doing this and so it is not surprising that those in our care need to build trust in us before they feel safe sharing how they truly feel.

Interviews should be carried out somewhere that the resident feels safe, that is quiet, and that encourages supportive, constructive and meaningful conversations. This may mean taking the resident off the unit where possible/ appropriate.

It is important that the resident is aware of how the information gathered as part of the assessment, will be used. The Assessor must therefore explain that the information discussed and gathered as part of the assessment will be made available to the case review team to help plan and inform their support.

Information sharing and consent

Seeking informed consent is an important part of enabling residents to feel included within their own care and acting in a trauma-informed way that values choice. However, it is also true that as an organisation we have a duty of care to those who may be at risk which requires us to share risk-relevant information, even where consent is not given. In these circumstances, if the resident has declined to give consent, this must be documented on the relevant form and staff must only share information that relates to risk, and how to reduce it, with other staff members.

Once information gathering and sharing has been explained to the resident, the Assessor must check their understanding and agreement and ask them to sign the 'Agreement to Sharing of Information' form on the front page of the ACCT document. If the resident is either unable or unwilling to sign this form, the Assessor must document this on the form and only share information relating to risk and how to mitigate this with other staff. In these instances, the Assessor must also make the resident aware that some information relating to risk will still need to be shared in order to ensure their safety.

For example, relevant parts of the Care Plan will be shared with staff involved in delivering support actions, known risks, triggers and protective factors will be shared with those interacting with/ supporting the individual and observation and conversation levels will be shared with those required to undertake them.

It is essential that the Assessor records as much detail as possible in the ACCT Assessment section of the document; including all potential avenues of support discussed during the assessment interview, so that this can be considered by the case review team when developing support actions for the resident.

Where the resident does not speak English, ACCT assessments must be undertaken with the assistance or involvement of an interpreter or appropriate translation service. Translation services may also be required where English is not a prisoner's first language, as they may find more complex discussions around self-harm and suicide difficult. Information on how to access language services can be found on the HMPPS intranet at:

<https://intranet.noms.gsi.gov.uk/policies-and-subjects/probation/public-protection/language-services>.

It is good practice to use plain English wherever possible when conducting ACCT Assessments, but particularly where the resident has an identified learning disability or difficulty. Where this is the case, staff should take the time to check that the resident understands what is being explained or asked of them, and that they feel comfortable letting you – (the Assessor) know if they don't understand something.

It is a natural response for people to get angry or upset when in distress – this is okay; but it is therefore important for Assessors to stay calm, be patient and not interrupt. It is important to give the resident time to tell you their story in their own words so that they feel listened to.

Note: Although anger can be a natural response, aggression towards yourself or others should not be accepted and we must manage expectations to ensure we can provide effective and meaningful support.

The Assessment Interview should be an opportunity for the Assessor to better understand the situation from the resident's perspective. It is therefore important to try and establish ways for the resident to effectively contribute to the interview. This may require the assessor to tailor the interview style to accommodate the person's needs or make reasonable adjustments to achieve this.

If the resident is unwilling or unable to take part in the interview, the ACCT Assessor should:

- Consider whether it is possible and appropriate to try to undertake the interview at another time, providing it is **no later than 24 hours** after the Concern Form has been raised, allowing the resident time to collect their thoughts.

- Explore whether the resident is willing to speak with another Assessor that knows them well, or provide a written contribution using the “Resident Contribution Form”.

For example, in the female estate a resident may prefer speaking to a female Assessor due to previous trauma they may have experienced.

If this is unsuccessful, the ACCT Assessor must:

- Undertake the ACCT Assessment based on all available information gathered prior to the Assessment and views of staff that know them well; recording all key risk relevant information, the sources of this information, efforts to engage with the resident and reasons why they were unable/ unwilling to take part.

After the ACCT Assessment

The ACCT Assessor must document the findings and outcome of their assessment by completing the following:

- ACCT Assessment Key information form (Page 21- prior to interview)
- Assessment Interview form (Page 23-25)
- Risks, Triggers and Protective Factors form (Pages 7 and 8)
- ACCT Assessor’s Assessment form (Page 27-28).

The Assessor must then explain to the resident what will happen next, what they can expect and the purpose of the first case review.

The first case review

The Case Co-ordinator will ensure that the ACCT Assessor is invited to the first case review and they should attend wherever possible. In all cases, the Case Co-ordinator must be provided with full documentation from the ACCT Assessment prior to the first case review. This must highlight any areas of risk discussed as part of the assessment, and any protective or mitigating factors identified.

The Case Co-ordinator will familiarise themselves with the ACCT assessment documentation prior to the first case review. If the ACCT Assessor is unable to attend the first case review, the Case Coordinator should confirm whether they have any questions about the content of the assessment prior to the first case review taking place and discuss them with the ACCT Assessor.

The resident may find it daunting or tiring in a review having just spoken to an Assessor, especially if the case review follows soon after the assessment. It is the Assessor's role to encourage attendance at the case review and to support and advocate for the resident in the review if they feel unable to contribute directly.

The importance of effective risk identification

The gathering of information on risks, triggers and protective factors will allow Assessors to pass on this key information so that risk can be effectively assessed by the Case Review Team and individualised support that addresses these can be put in place. However, if the Assessor is concerned that the risk of harm is imminent, then steps should be taken to address this immediately.

For an ACCT to be effective in supporting someone, it needs to be specific to the resident and their circumstances. To ensure this, we need to understand the persons risks and triggers, as well as any protective factors that help them to cope. Identifying these will help us to understand them, make a balanced assessment of risk and provide appropriate and effective support to them to improve wellbeing and reduce their risk.

Risk factors are pre-existing, internal characteristics about a person that may increase their risk of self-harm or suicide.

There are some clear risk factors that make people more vulnerable to harming themselves, such as substance misuse or experiencing a traumatic event. Some of these may change over time. For example-a person may stop or start using drugs. However, often, the more risk factors someone has, the greater their risk of suicide and self-harm will be. It is therefore essential that we consider all known risk factors as well as presentation and situation when assessing a resident's level of risk.

Even if risk factors cannot be changed, they can often be mitigated through focus on providing support to help a person to develop coping mechanisms or utilise protective factors.

It is also important to note that the absence of risk factors, does not always mean an absence of risk.

A trigger is anything that gives someone the urge to harm themselves. It could be a situation, a person, a smell, a sight, an emotion. When people are able to recognise their triggers, it can help them find other ways of coping when experiencing feelings of distress. If triggers are recurring, such as the anniversary of a death, it is important to ensure that the trigger date is documented so that anyone supporting the resident will have this information available to them. Trigger dates will be considered during case review planning to ensure that effective support is provided to the resident during potential periods of increased distress.

Protective factors are conditions or attributes (skills, strengths, resources, supports or coping strategies) that help people deal more effectively with stressful events and lower the risk of self-harm. Some of the strongest protective factors are things aimed at reducing hopelessness such as social connections with friends and family, participating in support groups and access to purposeful activity such as work or education.

The Risk, Triggers and Protective Factors form should be updated regularly throughout the duration of the ACCT support provided. The person completing the concern form, the Assessor and the Case Co-ordinator should all update this form during each respective part of their role within ACCT.

Individuals that present complex or challenging behaviour

Where a person's behaviour is particularly challenging for staff it is important to consider why this may be. All behaviour has a purpose and it is important to consider the underlying causes for this in order to help them to address it. Risks and triggers are important considerations when planning support, and protective factors may help someone to move away from challenging behaviour.

Protective factors will be different for everyone so it's important to get to know the person you are supporting to understand what will specifically help them. It is important to note that some people who deliberately harm themselves are not always able to identify a specific trigger.

Remember: Someone's risk of harm can fluctuate depending on the mix between their risk factors, triggers, protective factors and current circumstances. It's important that we don't think about someone's risk as always being the same, it can change.

The Well-Being Plan

The Wellbeing Plan is a resource containing tools that a resident can use when feeling distressed or during a period of crisis. It is for the resident to complete if they choose to. It is not mandatory, or exclusive to those supported via ACCT. They can complete as much or as little as they want at any given time.

It is good practice for the Wellbeing Plan to be offered and explained to the resident during the assessment, as another route through which they can consider their own needs and identify their own methods of coping.

Everyone is different, and the steps we need to take to support residents in prison will not be the same for everyone. For some, helpful steps may involve completing the Wellbeing Plan, but this may not work for everyone.

It is important to explain the benefits of the Wellbeing Plan and how it should focus on what the person can do (strength-based) to cope during a period of distress or crisis.

When in a period of crisis, it may not be practical or appropriate for the resident to complete the Wellbeing Plan as it will take them time to do and they may not be able to focus at that point. However, it should be offered and explored with the resident by the Assessor and subsequently by the Case Co-ordinator to ensure that the resident has the option to complete this at a point that they feel able to.

Additional ACCT Assessor considerations

External/Family Support: Assessors will help to establish external support available to the resident and the nature of their relationships with them. However, this will be further explored and actioned where appropriate by Case Co-ordinators.

Obtaining Consent to Share Information: The Assessor may establish what level of involvement the resident may like there to be and what information they are content to be shared, however this will be further explored and actioned where appropriate by Case Co-ordinators.

Peer support: Peer supporters have a lot more time than staff and peer support can complement and enhance staff engagement opportunities (if the person feels comfortable with peer support). It is important for the Assessor to identify if the resident would like appropriate peer support so that this can be discussed during the first case review.