

**Family and
relationships**

**Offending
Behaviour**

Victims

**Independent
Living**

Compliance

Critical risk assessment and Pathway plan.

Offender Details

Name

ID Number:

OGRS Score:

OVP Score:

RSR Score:

Risk Level: Low/Medium or instigate

ESCALATION TO NPS

Motivation Level: Low/Ambivalent/High

**Health and
well-being**

**Education,
Training and
Employment**

**Substance
Misuse (alcohol
and drugs)**

**Financial
Management**

Leisure Activities

**Attitudes and
Behaviour**

Identify Key information relevant to risk assessment and Pathway Planning – domains should be assessed using the traffic light system –

Red - critical risk/offender need items

Amber - items potentially contributing to risk/need

Green - items which are settled and non problematic.

Risk Summary/Management	
Level of Risk:	
LOW/MEDUIM or Instigate ESCALATION TO NPS	
Areas contributing to the risk of harm (Key domains/items from self assessment) :	
Who is at risk? Clearly note if this is a safeguarding case and detail DOB and currently location details of any children or vulnerable adults where safe to do so.	
What is the nature of the risk?	
When is the risk greatest?	
Risk Factors – what factors do we need to be aware of that could influence the level of risk in this case? (include any issues relating to victims issues)	



Strengths and Supports
Who else is working with this case? (Contact name, nature of involvement and contact details)
ARCC contact arrangements – Who will the contact be with, how frequent, when and where.
Contingency plan – what actions should be taken if there is a change in circumstances?

Officer _____

Date_____

Pathway Planning

Offender Details	
Name	
DOB/Age	
Identifier	
Gender	
Ethnicity	
Disability Status	

OGRS	
OGRS 0-24% Low = focus on need, 25-29 Medium = focus on thinking and need 50-89% High – Intensive approach – induction module of Citizenship 90% + Extremely High – IOM approach	
Motivation	
High – already addressing problems (GREEN)	
Ambivalent – Recognises the problem but not ready or unsure about change (AMBER)	
Low – Denies problematic behaviour (RED)	

Self assessment items				
Pathway Item	Goal	Planning for success	I need Help with	Actions/Referrals
Risk of harm				
ETE				
FINANCE				
ATTITUDES AND BEHAVIOUR				
LEISURE ACTIVITIES				
ALCOHOL				
DRUGS				
HEALTH & WELLBEING				
INDEPENDANT LIVING				
FAMILY & RELATIONSHIPS				
RESTORATIVE APPROACHES				
VICTIMS				
COMPLIANCE				

Responsible Officer _____
 Pathway client _____
 Date _____