



Australian Government

Department of Education, Employment and Workplace Relations

CHCCS514A Recognise and respond to individuals at risk

Release: 1

CHCCS514A Recognise and respond to individuals at risk

Modification History

Not Applicable

Unit Descriptor

Descriptor

This unit describes basic competencies required by community service workers to recognise and respond appropriately to signs and symptoms that indicate individuals may be at risk

The focus is on identifying and managing immediate risk in the context of a supportive helping relationship that seeks to work collaboratively with the person at risk to achieve safe outcomes

Application of the Unit

Application

This unit may apply to people in formal helping roles in any community service context or where caregivers encounter persons at risk

This unit provides skills and knowledge to enable workers to contain the situation and minimise any immediate risk and to provide appropriate referral for crisis intervention and ongoing support as required

Workers requiring skills and knowledge to provide crisis intervention support to resource an individual beyond the situation of immediate risk need additional skills and knowledge and are advised to complete in unit CHCCS521A Assess and respond to individuals at risk of suicide

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Not Applicable

Employability Skills Information

Employability Skills

This unit contains Employability Skills

Elements and Performance Criteria Pre-Content

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element. Terms in *italics* are elaborated in the Range Statement.

Elements and Performance Criteria

ELEMENT

1. Identify and assess the person's current risk

PERFORMANCE CRITERIA

- 1.1 Recognise and respond to signs, (such as statements, reactions, thoughts, feelings or behaviours) indicating that a person may be at risk
- 1.2 Attend to any hunches, while listening as a helper, perhaps from indirect communications, that suggest the client may be at risk
- 1.3 Ask directly about thoughts of suicide whenever there are grounds for concern
If suicide thoughts are present:
- 1.4 Seek sufficient understanding of why the person is considering suicide, and what links them to life, to inform and facilitate the intervention
- 1.5 Assess current suicide risk guided by risk assessment considerations outlined in the Range Statement and by whether there is an imminent threat to the person's safety or the safety of others

ELEMENT**PERFORMANCE CRITERIA**

2. Work actively with the person to reduce the *immediate risk* and increase safety

- 2.1 Build a collaborative empathic relationship with person at risk
- 2.2 Listen to what contributed to the critical incident and affirm and strengthen links to safety and living implicit in the helping relationship
- 2.3 Work with person at risk to identify and agree *actions to reduce immediate danger and mobilise access to emergency assistance*, including medical help when needed
- 2.4 Identify and agree actions that address and reduce any risk of harm to caregivers and others potentially at risk in the situation and remain mindful of circumstances where the police may need to be involved to address safety
- 2.5 Seek advice and/or assistance from workplace supervisor to ensure action taken is lawful, complies with good crisis intervention practice and organisation policies consistent with that practice, ethical processes and duty of care obligations
- 2.6 Address occupational health and safety (OHS) obligations in relation to managing self and others

3. Provide referral for crisis intervention support

- 3.1 Encourage and enable capacity of person at risk to make informed choices about further help that deals with their crisis and associated needs for ongoing care
- 3.2 Acknowledge how the current helping relationship has provided foundations for further care
- 3.3 Explore and seek to understand and address any barriers to seeking or accepting help
- 3.4 Develop, with the individual, a plan and agreed first steps, to access and utilise informal supports and professional help
- 3.5 Refer to appropriate community services and/or health professionals as required

Required Skills and Knowledge

REQUIRED SKILLS AND KNOWLEDGE

This describes the essential skills and knowledge and their level required for this unit.

Essential knowledge:

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include knowledge of:

- Common indicators or signs of potential risk
- Principles of crisis intervention, including relevant laws, ethical guidelines and policy requirements that support good care
- Policy around critical incidents and duty of care
- Procedures for obtaining assistance and making informed referrals to other staff and/or agencies
- Procedures for facilitating emergency interventions
- Awareness of personal values, beliefs and attitudes which may facilitate or impede crisis care and suicide intervention
- Examination of common notions about suicide
- Commitment to attend to the pain of the person at risk and work towards safe, life sustaining outcomes
- Principles of self care and support-seeking relevant to involvement in work involving responding to indications of crisis and suicidality

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Recognise and respond appropriately to signs and symptoms that indicate an individual or individuals may be at risk
- Demonstrate the capacity to work competently and independently according to the principles of effective practice and within general context of supervisory relationship
- Demonstrate accountability for own professional conduct and practice including:
 - carrying out assigned tasks
 - working effectively under the pressure of crisis situations

REQUIRED SKILLS AND KNOWLEDGE

- maintaining the quality of services to clients
- strengthening links to life-sustaining options and supports to individuals in crisis
- demonstrating a commitment to attend to the pain of persons considering or affected by suicide and to work toward safe, life-affirming outcomes
- Facilitate links with higher levels of care and making referrals, including access to emergency medical help when needed
- Seek, integrate and apply learning from supervision and support

In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include the ability to:

- Demonstrate application of skills in:
 - competent skills in communication, counselling and responding to individuals in crisis
 - self-monitoring and self care
- Maintain documentation as required, including effective use of relevant information technology in line with OHS guidelines

Evidence Guide

EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects for assessment and evidence required to demonstrate this unit of competency:

- The individual being assessed must provide evidence of specified essential knowledge as well as skills

EVIDENCE GUIDE

- Access and equity considerations:*
- All workers in community services should be aware of access, equity and human rights issues in relation to their own area of work
 - All workers should develop their ability to work in a culturally diverse environment
 - In recognition of particular issues facing Aboriginal and Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on Aboriginal and Torres Strait Islander people
 - Assessors and trainers must take into account relevant access and equity issues, in particular relating to factors impacting on Aboriginal and/or Torres Strait Islander clients and communities
- Context of and specific resources for assessment:*
- This unit can be delivered and assessed independently, however holistic assessment practice with other community services units of competency is encouraged
 - Resource requirements for assessment include access to a workplace or similar environment over a number of occasions
- Method of assessment:*
- For valid and reliable assessment of this unit, competency should be demonstrated in a range of situations which **must** include observation of performance in an actual workplace or in a setting that realistically simulates work conditions:
 - observation should include key aspects described in elements, performance criteria and relevant aspects of the range statement of the unit
 - where face-to-face observation is not possible, video recordings may be provided
 - In addition assessment methods may include
 - written questioning
 - role play
 - supervised/guided discussion
 - Candidate's critique of their 'performance' to demonstrate cognitive understanding of theory

Range Statement

RANGE STATEMENT

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

Identifying potential risk involves:

- Avoiding assumptions about who may be at risk and being alert to potential risk on an individual basis in any situation
- Recognising potential warning signs that invite help and prompt enquiry about suicide, self-harm or other issues of client or community safety
- Asking directly about thoughts of suicide when there are any grounds for concern

RANGE STATEMENT

Informed suicide risk assessments involve:

- Recognising that any suicide thoughts or acts of deliberate self-harm signal significant distress, pose potential risk of injury or death and should be taken seriously
- Assessing factors that indicate suicide risk which include, but are not limited to, the following:
 - concern is aroused by the presence of suicide thoughts and things often associated with these thoughts (such as a desire to escape pain that feels unbearable, a sense of hopelessness, current difficulty seeing alternatives to suicide and feeling alone)
 - immediate risk increases when someone has begun acting on their suicide thoughts or is preparing to do so (for example possible suicide in progress, presence of a suicide plan, available means) and / or has expressed suicidal intent
 - risk can be further exacerbated if the person is under the influence of excessive alcohol or other drug use
 - pertinent background factors, particularly prior suicidal behaviour and the presence of significant mental health problems, should be carefully assessed

A wide variety of contextual or personal considerations also help inform assessments and may include such things as significant loss, trauma, the impact of another person's suicide or a pattern of extreme agitation, anger / violent behaviour

continued ...

Informed suicide risk assessments (contd):

- Identifying internal sources of safety and support (such as coping skills and beliefs) and those around them (such as family, friends and community services)
- Connections to life and living are usually present alongside thoughts of suicide and can provide foundations to build upon in increasing the safety of a person at risk

RANGE STATEMENT

Immediate risks (other than suicide) may include:

- Client threats to harm others
- Threat of harm initiated by another, directed at the client
- Disclosures of abuse
- Indicators of physical harm and/or domestic violence

Actions to reduce immediate danger and mobilise access to emergency assistance include:

Recognising that:

- Vigilance about safety with all risk related thoughts or behaviours is essential, even though the person may be influenced by a wide range of motives in considering or engaging in deliberate self-harm
- Risks to life and safety can often be greater than individuals recognise or intend, so safe outcomes are a primary focus, regardless of stated intentions

Actions appropriate to each specific situation, but typically including the following processes and tasks:

- Affirm and build on the desire for help and safety implicit in the counselling relationship
- Work with the person at risk to identify and act on clear cooperative steps that reduce the immediate risk
- Focus specifically on factors, plans and behaviours, including unsafe use of alcohol and other drugs that endanger the person at risk at this particular time and seek to engage them cooperatively in steps that safely manage and reduce immediate risk
- Enable prompt, timely action that increases informal and professional support, mobilises access to emergency medical help when needed and enhances personal safety

continued ...

RANGE STATEMENT

Actions to reduce immediate danger and mobilise access to emergency assistance include: (contd):

- Seek to create calm environment to promote safety for person at risk, caregiver and others involved in situation
- Access support and follow advice from organisation's supervisor/ coordinator that reflect lawful, good crisis intervention practice and follow crisis management and emergency procedures
- Attend to self and others in relation to OHS in the workplace

Unit Sector(s)

Not Applicable