



ACT Health/ACT Corrective Services  
**Transfer to/from DMHU Security  
 and Escort Risk Assessment**

Complete details or affix label

URN: \_\_\_\_\_  
 ACTCS PID: \_\_\_\_\_  
 Family name: \_\_\_\_\_  
 Given names: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Sex: \_\_\_\_\_

This form is to be completed by ACT Corrective Services (ACTCS) prior to the transfer of a detainee between an ACT correctional centre and Dhulwa, or ACT Health will complete the intel holdings section under Security Concerns prior to the transfer of a consumer between Dhulwa and an ACT correctional centre or the courts.

**SECURITY CONCERNS** This section is to be completed by an ACTCS Area Manager prior to escort

**This information is based on information obtained through either ACTCS or ACT Health records**

Legal status	<input type="checkbox"/> Remand	<input type="checkbox"/> Sentenced		
Outstanding court?	<input type="checkbox"/> Yes	<input type="checkbox"/> No/Unknown		
Security classification	<input type="checkbox"/> Maximum	<input type="checkbox"/> Medium	<input type="checkbox"/> Minimum	<input type="checkbox"/> N/A
Current psychiatric rating	<input type="checkbox"/> P1	<input type="checkbox"/> P2	<input type="checkbox"/> P3	<input type="checkbox"/> PA <input type="checkbox"/> N/A
Current medical rating	<input type="checkbox"/> M1	<input type="checkbox"/> M2	<input type="checkbox"/> M3	<input type="checkbox"/> N/A
Current suicide risk rating	<input type="checkbox"/> S1	<input type="checkbox"/> S2	<input type="checkbox"/> S3	<input type="checkbox"/> S4 <input type="checkbox"/> N/A
Segregation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No or N/A	Non-associations?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Protection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No or N/A	Strict Protection?	<input type="checkbox"/> Yes <input type="checkbox"/> No or N/A
Sex offender?	<input type="checkbox"/> Yes	<input type="checkbox"/> No/Unknown	History of harm to others?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Current DVO/AVO (or other court order)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No/Unknown	Previous use or possession of weapons?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Intel holdings?	<input type="checkbox"/> Yes	<input type="checkbox"/> No/Unknown	Non compliant history/discipline?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Details (including where known - gang affiliations and associations)	Details (including where known - fire setting, weapons, standovers and threats)			

**SAFETY CONCERNS** This section is to be completed by an ACTCS Area Manager or Justice Health Services health professional (DMHU) prior to transfer

Recent incidents of violence?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown	Recent property damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Expressing intent to harm others?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown	Current or recent misuse of drugs/alcohol?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Current suicidal ideation or plan? <input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown			
Details:			
Visit restrictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown	Inappropriate sexual behaviour?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
History of absconding?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown	Plans to abscond?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Confused/disorganised?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown	Active symptoms of psychosis?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown
Distressed or agitated? <input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown			
Major disability or illness?	<input type="checkbox"/> Yes <input type="checkbox"/> No/Unknown		
Details:			

**VIOLENCE RISK**

- V1** Immediate threat or significant violence against authority figures – includes corrections officers, community corrections officers, and/or police

Guidance to assess risk:

- Significant violent incident has occurred or is likely to occur against authority figures;
- Has a significant violence history against authority figures; and/or
- Suspected or found to carry weapons in custody

- V2** Propensity/pattern of regularly using significant violence against others

Guidance to assess risk:

- Sustained pattern of significant violent behaviour towards others;
- Significant propensity of violence towards other;
- History of violent/intimidation to other person/s in custody resulting in significant intervention by authorities;
- Known to carry weapons or likely to seek access to them; and/or
- Known to become significantly violent when exposed to identified stressors

- V3** History of significant violence

Guidance to assess risk:

- Previous history of violent behaviour but not an established pattern of violence

- Nil** Not assessed as violent

**ESCAPE RISK**

- E1** Significant risk of escape

Guidance to assess risk:

- Has successfully escaped from a correctional environment

- E2** Moderate risk of escape

Guidance to assess risk:

- Has attempted to escape from a correctional environment

- E3** Low risk of escape

Guidance to assess risk:

- Has circumstances which could identify them as a potential escape risk (i.e. sentence longer than 5 years, intel holdings, psychiatric, previous escape from police custody)

- Nil** Not assessed as an escape risk

**FURTHER COMMENTS**

Comment/s or other relevant information

ACTCS Area Manager or ACT Health Clinician

Signature

Print name

Designation

Date