Introduction to the Short-Term Assessment of Risk and Treatability (START)

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Presentation Overview

- Risk assessment review
- State of the field
- Overview of START
- Steps of START assessment

Risk Assessment Review

Risk Assessment

- Process of:
 - Identifying factors associated with threat(s) to public safety
 - Estimating likelihood and severity of future threat(s) to public safety
 - Informing decisions
 - Identifying strategies to mitigate risk
 - Monitoring risk over time
- Will occur with or without risk assessment instruments

Role of Risk Assessment Instruments

Structured risk assessment instruments are designed to inform (not replace) decision-making.

State of the Field

Approaches to Risk Assessment

- Hundreds of risk assessment instruments available
- Different approaches
 - I. Quantitative or computational
 - ▶ Set of items scored and combined to create risk score → probability of outcome based on group norm
 - Usually based on static factors, cannot change
 - 2. Structured professional judgment
 - Set of items scored to inform clinical judgment of risk for outcome
- Different factors
- Different outcomes



Types of Factors

- Describe characteristics of the person, their social environment, and/or their circumstances
- Many different types of factors
 - Risk factor vs. protective factor
 - Static vs. dynamic
 - ▶ Historical vs. static
 - > Stable vs. acute dynamic
 - Distal vs. proximal factors
 - ▶ Timing of risk

Characteristics of Other Tools

- ▶ Focus on:
 ▶ Little consideration of:
 - ▶ Historical/static factors → ▶ Dynamic variables

Static and Dynamic Factors

- Static factors
 - Happened in the past or cannot change
 - May speak to the absolute, lifetime risk
- Dynamic factors
 - Can change
 - May speak to the relative, short-term/current risk
 - 2 types:
 - Stable change slowly
 - 2. Acute change quickly

Broken Leg Dilemma

- Life events and circumstances change limiting applicability of risk assessment results
 - Examples
 - Physical incapacity
 - Setting
 - Interpersonal relationships
 - Employment
 - Intervention



Characteristics of Other Tools

- ▶ Focus on:
 ▶ Little consideration of:
 - ▶ Historical/static factors → ▶ Dynamic variables
 - ▶ Long-term risk
 → ► Short-term risk

Timing of Risk

Outcome Timeframe

- Immediate
 - Hours to days
- Short-term
 - Weeks to months

- Longer term
 - Years

Predictor Timeframe

- Proximal factors
 - Recent experiences, behaviors, or functioning

- Distal factors
 - Past experiences, behaviors, or functioning

Johnson, Desmarais, et al. (2016)

Characteristics of Other Tools

- ▶ Focus on:
 ▶ Little consideration of:
 - ▶ Historical/static factors → ▶ Dynamic variables
 - ▶ Long-term risk
 → ► Short-term risk
 - ▶ Risk factors
 ▶ Protective factors

Protective Factors



Protective Factors

- Characteristics of person or their environment that mitigate likelihood of adverse outcome(s)
 - More than merely the absence of risk factors
- ▶ 5 reasons
 - More balanced view of clients
 - 2. Therapeutic relationship
 - 3. Professional mandate
 - 4. Validity
 - 5. Foundation for intervention

Characteristics of Other Tools

- ▶ Focus on:
 ▶ Little consideration of:
 - ▶ Historical/static factors → ▶ Dynamic variables
 - ▶ Long-term risk
 → ► Short-term risk
 - ▶ Risk factors
 ▶ Protective factors
 - ▶ Risk to others or self ——→ ▶ Risk(s) to others and self

Co-occurring Outcomes

- Persons with behavioral health needs experience multiple adverse outcomes at heightened rates
- Predictors of these outcomes often overlap
 - Anger
 - Depressive symptoms
 - Anxiety symptoms
 - Risky neighborhoods
 - Substance use
 - Etc.

Often evaluated separately \rightarrow need for a comprehensive approach.



Short-Term Assessment of Risk and Treatability (START)

Short-Term Assessment of Risk & Treatability (START)

- Structured professional judgment
- ▶ 20+ risk and protective factors
- Estimate and mitigated likelihood of:
 - Externalizing behaviors
 - Violence towards others
 - Internalizing behaviors
 - Suicide
 - Self-harm
 - Substance use
 - Related high-risk behavior
 - Self-neglect
 - Being victimized by others
 - Unauthorized absences

Development Process

- Review of the research and theory
 - Hundreds of possible items
- Item identification and reduction through:
 - Consultation with colleagues and experts
 - Research
- Pilot implementations & validations
- Refinement
 - Items
 - Definitions
 - Outcomes
- Full scale implementations & revalidations

Early 2000s Mid 2000s

Ongoing

Webster et al. (2006); Nicholls et al. (2020)

START Assessment

Objectives include:

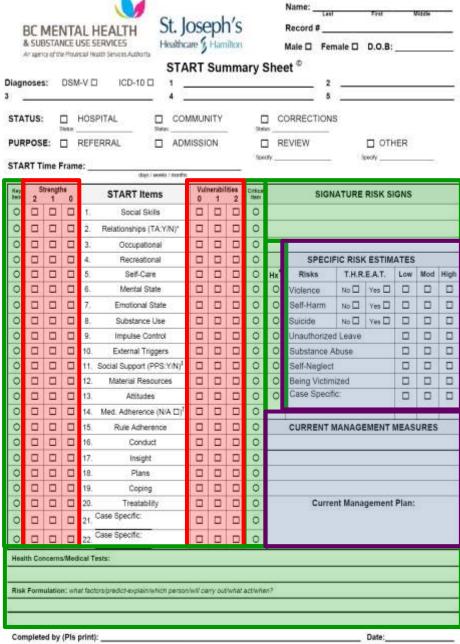
- Identify risk(s)
- Inform intervention and risk management
- Describe client and population profiles
- Monitor progress and treatment outcomes
- Improve management of transitions
- Provide common language across disciplines

Two versions

- Adults (18 years & older)
- Youth (12-18 years)

Summary Sheet

- I-page snapshot of:
 - Current psychosocial functioning
 - Future risks
- Completing START involves integrating
 - past and current evidence
 - to estimate and manage future risks



Current Status of START

- Used in diverse settings
 - Psychiatric (civil and forensic), corrections
 - Institution and community
- Adolescent version published 2014
- Recognized as:
 - Best practice for assessment and management of violence and related risks
 - Promising practice for assessment of inpatient aggression
 - Leading practice in mental health services
- Translated into many different languages (>10) and used around the world

Research Evidence

- START has been evaluated in more than 60 studies in 22 countries
 - Good interrater agreement & predictive validity
- Studies conducted in:
 - Behavioral health and correctional settings
 - Institution and community
 - Community-based programs, specifically
 - Distinguishes between clients at lower and higher risk
 - Predicts outcomes (better than other measures)
 - □ Importance of strengths

10 Steps of a START assessment

When should START be completed?

Assessment	Purpose	Information for Items		
Within 7-14 days of intake	•Inform risk & case management	•Past 3 months		
Quarterly review	•Inform amendment to risk & case management plans	•Past 3 months or since last START		
Prior to transfer, transition, or reentry	•Inform transition/reentry planning •Summary of current risks and needs	•Past 3 months or since last START		
Change in well- being, status	 Inform amendment to risk & case management plans Summary of current risks and needs 	•Past 3 months or since last START		

Process of Assessing Risk

- Built upon many kinds of knowledge
 - Historical records
 - Current presentation
 - Self-report
 - Information from others
 - Clinical impressions
- ▶ Each team member/assessor should:
 - Read START manual and/or attend START training
 - Be knowledgeable about item scoring
 - Have contact or familiarity with client

Step 1: START Items

- Each item scored for both strength and vulnerability
- Client's functioning over past 3 months
- Based upon all available information
 - Focusing on client's present attitudes, functioning, behavior
- Scored independent of each other
 - Can be high (or low) on both strength and vulnerability for any particular item
- Order not important

Item Scoring Guidelines

	Vulnerabilities	Strengths
0	Minimal evidence of problem"No" or "Not really"	Minimal evidence of strength"No" or "Not really"
I	Some / transient / occasional problem"Sometimes"	Some / emerging / occasional strength"Sometimes"
2	Chronic and / or severe problemClinically significant"Yes"	Significant / reliable strengthClinically significant"Yes"

Key Item	Strengths 2 1 0		SIARTHEMS		Vulnerabilities 0 1 2			Critical Item
0				Social Skills				0
0				2. Relationships (TA:Y/N)*				0
0				 Occupational 				0
0				4. Recreational				0
0				5. Self-Care				0
0				6. Mental State				0
0				 Emotional State 				0
0				8. Substance Use				0
0				9. Impulse Control				0
0				10. External Triggers				0
0				11. Social Support (PPS:Y/N)‡				0
0				12. Material Resources				0
0				13. Attitudes				0
0				14. Med. Adherence (N/A □) [†]				0
0				15. Rule Adherence				0
0				16. Conduct				0
0				17. Insight				0
0				18. Plans				0
0				19. Coping				0
0				20. Treatability				0
0				21. Case Specific:				0
0				22. Case Specific:				0

Example: Item 8. Substance Use

Key Features: Misuse of illegal substance(s), alcohol, prescribed medications, over the counter drugs.

STRENGTHS				VI	JLNERAE	BILITIES	
Key	2	1	0	0	1	2	Critical
Item	Maximally	Moderately	Minimally	Minimally	Moderately	Maximally	Item
O	Present	Present	Present	Present	Present	Present	O

Abstains. Drinks in moderation. Restricts intake. Remains responsible. Respects pertinent laws. Protects others from ill effects (i.e., is aware of the consequences of irresponsible use). Accepting of treatment (if needed).

Adverse effects on self or others when under influence. Uses illegal substances. Indiscriminate in intake. Takes prescription/non-prescription drugs improperly. Denies need for treatment (if indicated). Use is out of control. Intoxicated. Dependent.



Example: Item 10. External Triggers

Key Features: Degree to which client is affected by changing circumstances, external/environmental influences.

STRENGTHS				VI	ULNERAE	BILITIES	
Key	2	1	0	0	1	2	Critical
Item	Maximally	Moderately	Minimally	Minimally	Moderately	Maximally	Item
O	Present	Present	Present	Present	Present	Present	O

Prosocial associates. Suitable living conditions. Acts independently of changing circumstances and pressures. Is not easily influenced to act irresponsibly or unlawfully.

Influenced by disruptive peers.
Seeks out unsuitable
environments. Affected by specific
destabilizers (e.g., access to
weapons) and changing demands
in the environment.



Step 2: Key & Critical Items

Key Items

- Particularly relevant strengths either at present of historically that could be used in treatment and risk management.
- AKA "therapeutic lever"

Critical Items

- Particularly relevant vulnerabilities either at present or historically – that need specific and close attention in treatment planning and supervision.
- AKA "red flag"

Considered independently of:

- each other
- strength and vulnerability ratings



Step 3: Signature Risk Signs

- Behaviors, situations, beliefs, or concerns that over time are recognized as early and reliable signs of impending relapse and/or increased risk
 - Unique to specific client
 - May be seemingly unrelated
- Clients themselves may have insight and be able to describe their unique signature risk signs.
- ▶ Consider historical and current evidence.



Step 4: T.H.R.E.A.T.

- ▶ Indicate whether a T.H.R.E.A.T. exists
 - Are there THREATS of HARM that are REAL, ENACTABLE, ACUTE and TARGETED?
 - If so, defer or accelerate the START assessment.
- Always complete
 - Even if no history
- Not the same thing as English language or legal definition of "threat"

Step 5: Specific Risk Estimates

- Risk (low, moderate, high) for each domain over the next
 3 months
- Based upon all available information, including
 - Strength and vulnerability ratings
 - Key and critical items
 - Historical factors
- Important that estimates be based upon:
 - client's condition right now
 - historical factors
 - for the agreed upon time period (i.e., START Time Frame)
- Always complete every specific risk estimate
 - Even if no history

Risk Estimate Scoring Guidelines

Estimate	Definitions	Implications
Low	•Minimal risk	• No supervision or management strategies required.
Moderate	•Greater than average risk	•Development and implementation of risk management plan necessary.
High	•Serious/ imminent risk	•Urgent and immediate management strategies necessary.

Example: Violence

- Actual, attempted, or threatened harm to others
 - Includes
 - verbal aggression
 - aggression against property
 - physical aggression
 - > sexual aggression
 - Excludes self-directed violence
- ▶ History of violence (Hx)?

SIGNATURE RISK SIGNS									
SPECIFIC RISK ESTIMATES									
Hx*	Risks	T.H.R.	E.A.T.	Low	Mod	High			
0	Violence	No 🗆	Yes 🗆						
0	Self-Harm	No 🗆	Yes 🗆						
0	Suicide	No □	Yes 🗆						
0	Unauthorized	Leave							
0	Substance A	buse							
0	Self-Neglect								
0	Being Victimi	zed							
0	Case Specific Risk:								
	CURRENT N	IANAGE	MENT I	MEAS	URES				
Current Management Plan:									

Step 6: Management Measures

- Using and describing Critical and Key Items, briefly outline the recommended treatment plan under Current Management Plan.
- Based upon RNR model
 - Risk Level of intervention match risk level
 - Focus on moderate and high risk domains
 - Need Target individual risk factors relevant to risk of adverse outcomes
 - Critical and key items
 - Responsivity Adapt treatment for individual client by considering factors that can affect treatment outcomes



Step 7: Health Concerns

- Note any specific health issues that might contribute to risk to self or others or that require follow-up.
- This section may need to be considered before (rather than after) completing Specific Risk Estimates
 - Factors contribute to gross negligence to self?
 - Physical health issues that escalate behavioral risk?



Step 8: Risk Formulation

- Write a short summary and conclusion stipulating:
 - who is at risk from which person(s)
 - under what circumstances
 - with what likely adverse effect(s)
 - over what period of time
- Important to:
 - consider what behavior is being prevented
 - specify what will be the focus in treatment
- ▶ Aids in monitoring and evaluating change in the client
- Must include Critical Items and any Specific Risk Estimate that is moderate or greater



Step 9: Management Plan

Assessment should conclude with risk management statement that pulls together all aspects of START.

Example:

Fraction of the state of the st



Step 10: Finalize the Assessment

- Review for completeness and accuracy
 - Any missing information or ratings?
- Ask yourself:
 - "Does assessment adequately convey client's current (and historical) strengths and problems, as well as what I anticipate could realistically happen in the next 3 months?"
- Sign and date the form!

Q & A

Thank you!

