

## SAMPLE – For Illustrative Use Only

### Risks to Sexual Safety Screening Tool

Name: \_\_\_\_\_ Site: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Record Number: \_\_\_\_\_

Prepared By: \_\_\_\_\_ Date of Screening: \_\_\_\_\_

**Purpose:** To ensure that the facility has identified those at heightened risk of being sexually victimized and those at heightened risk of being sexually abusive so that facility staff can make housing and programming decisions with the goal of using this information to reduce the risk of sexual abuse.

**Procedure:** Complete with all patients/clients/residents/consumers on admission, at 30 days, annually, and at change in condition. Information gathered during this screening can be used to create a person-centered care plan to help reduce the risk of sexual abuse. Responses to the screening questions below are not required.

#### **Vulnerability: Mental, Physical, or Developmental Disability**

Does the client have a mental, physical, or developmental disability? Y / N

#### **History of Abuse Victim—Physical and/or Sexual**

Has the client previously been a victim of abuse? Y / N

Has the client previously been a victim of sexual assault? Y / N ®

#### **History of Abuse Aggressor—Both Physical and Sexual**

Has the client previously been convicted of or treated for abusive behavior? Y / N

#### **History of Trauma**

Does the client/patient have a history of trauma? Y / N

Does the client/patient have a known ACE score of 5 or higher? Y / N

#### **Family Advocate Present**

Does the patient/resident have an advocate who visits at least weekly? Y / N

#### **Vulnerability: Sexual Orientation**

Does the patient/client/resident identify as gay, lesbian, bisexual, transgender, intersex (LGBTI), or gender nonconforming? Y / N

Does the screening staff perceive signs of the above? Y / N

#### **Vulnerability: Personal Perception**

What is the patient's/resident's own perception of vulnerability?

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**Determined Risk:** \_\_\_\_\_ High \_\_\_\_\_ Moderate \_\_\_\_\_ Low

- Low Risk: Follow current policies and procedures to reduce risk
- Moderate Risk: Follow oversight, education, and support to reduce the risk of sexual abuse
- High Risk: Follow heightened protocols; increased oversight; education; additional support such as requiring two-person care, a chaperone at all times, or gender-specific care; and increased surveillance. Consider placing client in a room near the nurses' station, camera monitoring, and additional safety measures.