

19 - Actuarial instruments

Actuarial instruments

© SPMM Course SARA: Spousal assault risk assessment guide SARA is a 20 item set of risk factors for use in the assessment of spousal assault. It can be used to help gauge the risk of future violence in men arrested for spousal assault. SVR-20 is a sexual violence risk 20 scale - this is a 20 item guide for assessing violence risk in sex offenders. SAD PERSONS Score: 10 major demographic risk factors used in a mnemonic to assess immediate suicidal risk often in acute general hospital setting. The scores can guide in making a decision to admit or discharge a patient. S - Sex: 1 if male; 0 if female; (more females attempt, more males succeed) A - Age: 1 if < 20 or > 44 D - Depression: 1 if depression is present P - Previous attempt: 1 if present E - Ethanol abuse: 1 if present R - Rational thinking loss: 1 if present S - Social Supports Lacking: 1 if present O - Organized Plan: 1 if plan is made and lethal N - No Spouse: 1 if divorced, widowed, separated, or single S - Sickness: 1 if chronic, debilitating, and severe

Beck Hopelessness Scale consists of 20 true-false statements focused on pessimism and negativity about the future. The degree of hopelessness measured using this tool is a good indicator of suicidal risk with scores: 0 -3 indicating minimal, 4 - 8 mild, 9 -14 moderate, and 15- 20 severe risk. Beck Scale for Suicidal Ideation is a self-report 24-item scale (5 screening items) that assesses a patient's thoughts, plans and intent to commit suicide. The total scores could range from 0 to 48 (each item scored from 0 to 2). Higher scores reflect greater suicide risk though no defined cutoffs are identified for categorizing the risk profiles. Actuarial instruments Group data is obtained from high-risk individuals and then to applied to the patient in question. It gives a group risk, and it should be applied with caution. Different types include: VRAG (violence risk appraisal guide - Quinsley 1995) entirely reliant on historical factors. Validated at Canadian prisons. It is made of 12 items and includes PCL_R as a subscale.

© SPMM Course Violence risk appraisal guide PCL-R Absence of schizophrenia (Presence is counted to decrease risk!) Elementary school difficulties Victim injury (minimal or none) Personality disorder Alcohol abuse Younger age Female victim Separated from parents before age 16 Failed conditional release/supervision order Never married History of non violent offence

Violence Risk Scale has 23 dynamic and 6 static variables. PCL-R (Hare) is a scale to diagnose Psychopathy, informs risk assessment and treatment decisions. 0 - 40 score range; 0-2 for each item; 20 items in total. Cut off of 25 used to diagnose psychopathy. In the strictest sense, PCL was not designed to be an actuarial tool for risk assessment on its own. The Static-99 is a ten item actuarial assessment instrument created by Hanson and Thornton, for use with adult male sexual offenders who are at least 18 year of age at the time of release to the community. SORA (Sexual

risk offender appraisal guide) is a 14 item actuarial instrument that incorporates PCL_R. The Manchester Self Harm Rule (MSHR) is an actuarial instrument for self-harm risk assessment produced by Cooper et al. 2006. It has high sensitivity but low specificity.

© SPMM Course Notes produced using excerpts from: □ Achenbach, T. M. (1991). Manual for the Child Behavior Checklist/4-18 and 1991 Profile. Burlington, VT: University of Vermont, Department of Psychiatry. □ Bouch, J., & Marshall, J. J. (2005). Suicide risk: structured professional judgement. *Advances in Psychiatric Treatment*, 11(2), 84-91. □ Burns, A., Lawlor, B., & Craig, S. (2002). Rating scales in old age psychiatry. *The British Journal of Psychiatry*, 180(2), 161-167. □ Casey, P. & Kelly, B. (Ed) *Fish's Clinical Psychopathology*. 3rd ed. RCPsych publications. □ Cooper J, Kapur N, Dunning J, et al. A clinical tool for assessing risk after self-harm. *Ann Emerg Med*. 2006;48:459-466. □ Cox JL, et al. Validation of the Edinburgh Postnatal Depression Scale (EPDS) in postnatal women. *J Affect Disord* 1996;39:185-9. □ <http://www.static99.org/> □ http://www2.massgeneral.org/schoolpsychiatry/screeningtools_table.asp □ <https://www.cnsforum.com/educationalresources/ratingscales/psychiatry> □ Jackson. C. The General Health Questionnaire. *Occupational Medicine* 2007 57(1):79; □ Kaplan & Sadock's *Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry*, 10th Edition. Lippincott Williams & Wilkins 2007 □ Morgan et al.(1999), SCOFF Questionnaire. *BMJ* 319:1467 □ Sharp LK, Lipsky MS. Screening for depression across the lifespan: a review of measures for use in primary care settings. *Am Fam Physician* 2002;66: 1001-8. <http://www.aafp.org/afp/2002/0915/p1001.html> □ Ware Jr, J. E., & Sherbourne, C. D. (1992). The MOS 36-item short-form health survey (SF-36): I. Conceptual framework and item selection. *Medical care*, 473-483.

DISCLAIMER: This material is developed from various revision notes assembled while preparing for MRCPsych exams. The content is periodically updated with excerpts from various published sources including peer-reviewed journals, websites, patient information leaflets and books. These sources are cited and acknowledged wherever possible; due to the structure of this material, acknowledgements have not been possible for every passage/fact that is common knowledge in psychiatry. We do not check the accuracy of drug-related information using external sources; no part of these notes should be used as prescribing information.

Revision #1

Created 2026-01-04 20:05:44 UTC by Omar Ayman

Updated 2026-01-04 20:05:44 UTC by Omar Ayman