



Case – Risk Factors

MH Residential Job Aid

The *Risk Factors* screen allows the user to document the Consumer's risk factors that will need to be considered in the search for MH Housing as well as any substance use history they may have. Risk Factors documented in the Referral will carry over to the Case.

Risk Factors

▼ Risk Factors * ⓘ

Risk factors to include all current and past risk factors

Suicidal Ideation and/or Attempt (Active or passive thoughts, plan, and/or behaviors to carry out plan) *

☐ Yes ☐ No

Homicidally (Active or passive thoughts, plan, and/or behaviors intended to carry out plan) *

☐ Yes ☐ No

Physical harm or abuse to others *

☐ Yes ☐ No

Destruction of Property *

☐ Yes ☐ No

Fire Safety Issues (Fire setting, unsafe cooking or smoking) *

☐ Yes ☐ No

Victim of Trauma/Abuse: Sexually Abused, Physically Abused *

☐ Yes ☐ No

Sexually inappropriate or offensive behaviors leading to physical harm to self or others *

☐ Yes ☐ No

Reckless behavior leading to physical harm to self or others *

☐ Yes ☐ No

Megan's Law *

☐ Yes ☐ No

Access to weapons *

☐ Yes ☐ No

Medical risk (Physical illness, chronic or acute) *

☐ Yes ☐ No

▼ Substance Use History

Is the applicant currently using drugs or alcohol? *

-Select-

▼

Does the applicant have a history of substance abuse? *

-Select-

▼



Navigation

1. From the **Dashboard**: Locate the desired Case and click on the *Case ID* to bring the Case into focus.
 - a. Click on the **Case Information** tile. Then click on the **Risk Factors** tile.

Risk Factors

1. **Risk Factors**: For each risk factor, indicate whether or not it applies to the consumer using the ☐ Yes or ☐ No radio buttons.

Risk Factors * ⓘ

Risk factors to include all current and past risk factors

Suicidal Ideation and/or Attempt (Active or passive thoughts, plan, and/or behaviors to carry out plan) *

☐ Yes ☐ No

Homicidality (Active or passive thoughts, plan, and/or behaviors intended to carry out plan) *

☐ Yes ☐ No

Physical harm or abuse to others *

☐ Yes ☐ No

Destruction of Property *

☐ Yes ☐ No

Fire Safety Issues (Fire setting, unsafe cooking or smoking) *

☐ Yes ☐ No

Victim of Trauma/Abuse: Sexually Abused, Physically Abused *

☐ Yes ☐ No

Sexually inappropriate or offensive behaviors leading to physical harm to self or others *

☐ Yes ☐ No

Reckless behavior leading to physical harm to self or others *

☐ Yes ☐ No

Megan's Law *

☐ Yes ☐ No

Access to weapons *

☐ Yes ☐ No

Medical risk (Physical illness, chronic or acute) *

☐ Yes ☐ No

- a. Suicidal Ideation and/or Attempt (Active or passive thoughts, plan, and/or behaviors to carry out plan)
- b. Homicidality (Active or passive thoughts, plan, and/or behaviors intended to carry out plan)
- c. Physical harm or abuse to others
- d. Destruction of Property
- e. Fire Safety Issues (Fire setting, unsafe cooking or smoking)
- f. Victim of Trauma/Abuse: Sexually Abused, Physically Abused
- g. Sexually or physically leading to physical harm to self or others
- h. Reckless behavior leading to physical harm to self or others
- i. Megan's Law
- j. Access to weapons
- k. Medical risk (Physical illness, chronic or acute)



2. Marking a Risk factor as a ☒ Yes will open up a required text field. Document an explanation of how this risk factor applies to the Consumer including dates of significant events.

Suicidal Ideation and/or Attempt (Active or passive thoughts, plan, and/or behaviors to carry out plan) *

☒ Yes ☐ No

Explain (Include Dates of Significant Events):

Substance Use History

▼ Substance Use History

Is the applicant currently using drugs or alcohol? *

-Select- ▼

Does the applicant have a history of substance abuse? *

-Select- ▼

1. ▼ Substance Use History :

▼ Substance Use History

Is the applicant currently using drugs or alcohol? *

-Select- ▼ **A**

Does the applicant have a history of substance abuse? *

-Select- ▼ **B**

- a. *Is the applicant currently using drugs or alcohol?:* Indicate whether or not the Consumer is currently using drugs or alcohol by selecting "Yes" or "No" from the drop-down.
- b. *Does the applicant have a history of substance abuse?:* Indicate whether or not the Consumer has a history of substance use by selecting "Yes" or "No" from the drop-down.

2. Click **Save** at the bottom of the screen before navigating away from the **Risk Factors** screen otherwise any information that has been entered or updated will not be saved. The screen cannot be saved unless all of the mandatory [*] information has been entered.



For more information...

For assistance, please contact the Allegheny County Service Desk at ServiceDesk@AlleghenyCounty.US or call 412-350-HELP (4357). Select Option 2 for the DHS Service Desk.

To access I-Service, go to: <https://servicedesk.alleghenycounty.us>

This and other Job Aids can be found at: <http://s3.amazonaws.com/dhs-application-support/index.htm> or <http://dhsassist.dhs.allegheny.local> for internal users.