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Handbook for using the Galatean Risk and Care  
Environment (GRaCE) web-based decision support  
system

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THIS VERSION IS FOR FRIENDS AND CARERS

DECEMBER 2016

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The purpose of this document is to explain how GRaCE can help you evaluate a person’s mental health and wellbeing. It will also explain the purpose of the assessment and the ways it can be used to help you provide the most appropriate support.

## 1 The Home page

Figure 1 shows the starting point for your assessment. You can choose one of three assessments, each of which has a different focus. The small ‘i’ icon will give more information if you put the cursor over it, which applies wherever you see the icon.

1. The “Full Life Assessment” lets you provide a comprehensive evaluation of the persons mental health and wellbeing, with access to every possible question.
2. The “Wellbeing” option concentrates on a subset of questions that are specific to a person’s wellbeing.
3. The “Safety” option gathers together those questions that are most relevant to assessing a persons safety in areas such as suicide, self harm, harm to others, self neglect, and vulnerability.

## 2 The “mind map” page

If you select the full assessment option, it will take you to a mind map that provides an overview of all the different areas with questions to answer. Figure 2 shows you what it looks like. Any one of the mind map branches can be selected and it will take you to all the questions associated with that branch. For

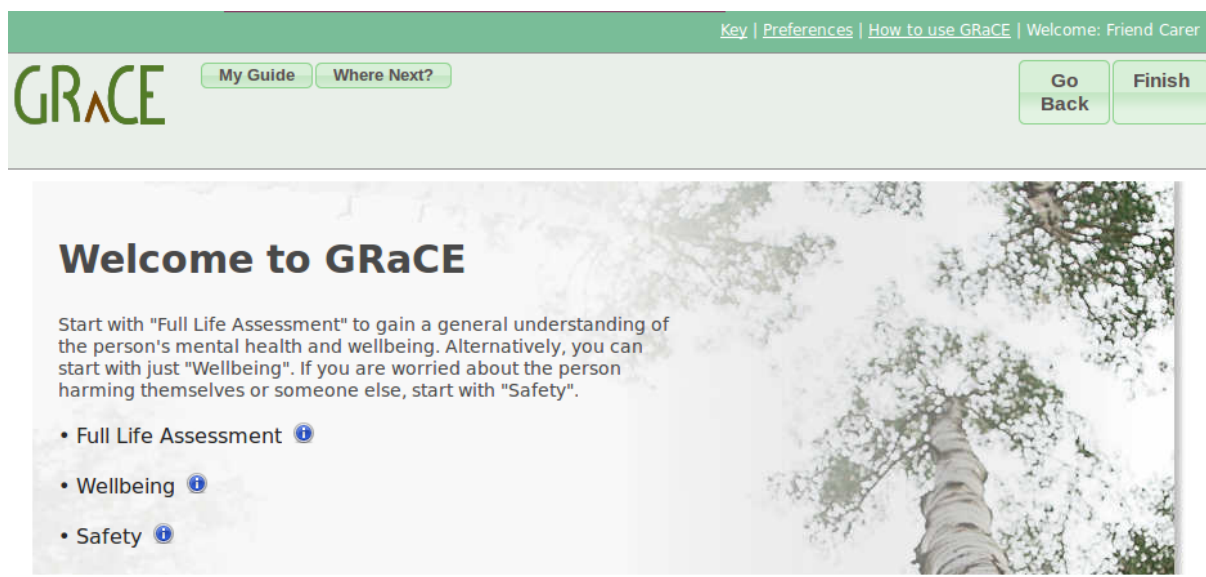


Figure 1: *The home page for the dynamic, mind-map version of GRaCE. The numbered options are the different types of assessment that can be chosen.*

example, Figure 3 shows the set of questions associated with the “state of mind” branch of the mind map. The left-hand panel with indented folders lets select any sub-part of the questions so that only these are shown. It is useful if you have a very large set of questions selected (for example, all those associated with suicide); you can open and close the tree to see how all the questions relate to each other and go to any subset in any order.

### 3 Providing scores for items with a zero to ten scale

Research shows people are able to make meaningful distinctions along a scale of 11 numbers, such as the 0 to 10 scale used in GRaCE. However, with such a fine-grained measure, the exact number provided is not important and time should not be wasted agonising over whether it should be a 4 or a 5, for example. Research also shows that for these types of judgement, it is better to go with your instincts than spending a lot of intellectual effort thinking about all the reasons why it might be one rather than the other. Analysis of our database of assessments demonstrates that when all the patient information is put together, the risk judgements provided are highly reliable and thus not dependent on excessive precision of the values given for scale data.

#### 3.1 How to think about scale judgements: the Galatean approach

People remember exceptional rather than typical examples. Everyone has heard of Roger Federer because he is an exceptional tennis player and people will know more about him than the usual grand-slam tennis tournament player. The same idea applies to GRaCE: people have a clear understanding of the exceptional behaviour that suggests the highest value on the scale. Take anger, for example: think of someone who has been incandescent and then compare the person in front of you with that highest point on the scale. If the person you are assessing is about half way between somebody who is not angry and your conceptualisation of maximum anger, then give the score a 5 . . . and don't worry if it might be a 6 or a 4 because you are in the right general area.

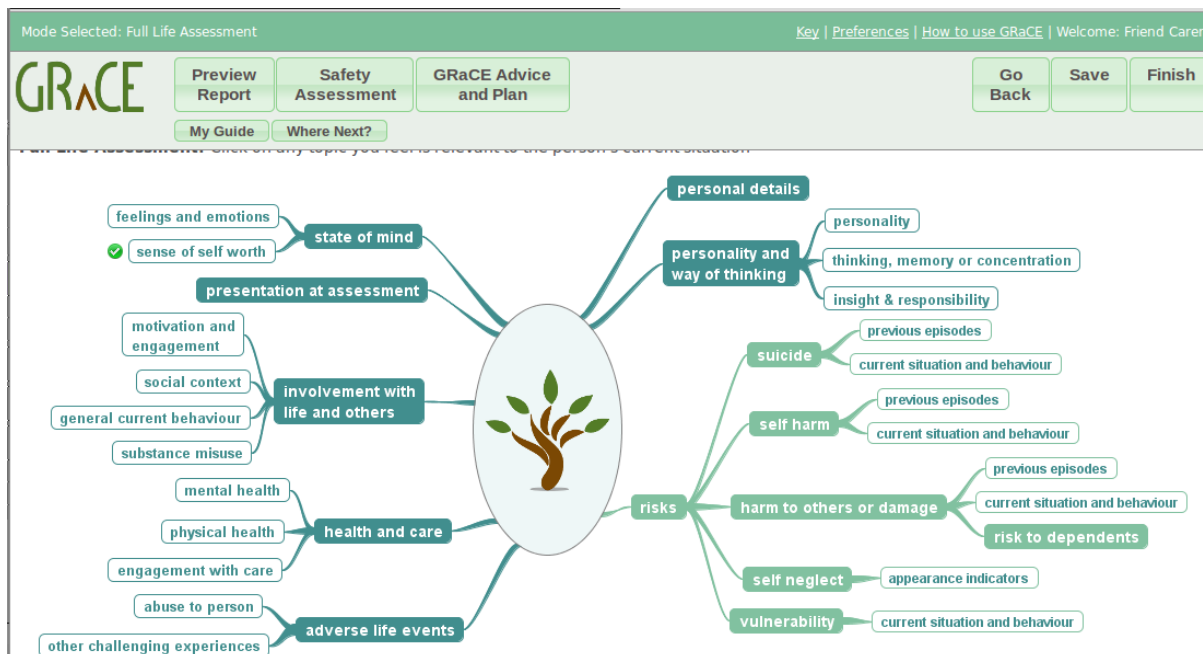


Figure 2: The mind-map screen for GRaCE. Each branch of the mind map can be selected and it takes you to the screen showing only questions associated with that branch.

### 3.2 Rules of thumb for answering scale questions

1. Use the descriptors at each end of the scale for a clear definition of how to interpret the maximum and minimum values (see Figure 4).
2. Consider the person you are assessing and get a feel for where he or she comes between the two scale ends.
3. Give the value that feels right and do not spend long thinking about it because it will not improve on the accuracy of your intuitive judgement. Remember:
  - (a) there is no right answer;
  - (b) the 11-point scale (0 to 10) provides room for error compared to, say, a three-point scale such as low, medium, high and you don't need to worry about the precision of your answer.
4. If you want to put the scale back to its unanswered state, then select the "reset" button.
5. if a particular behaviour or circumstance is not a problem, then don't waste time trying to assess it further:
  - (a) put a zero;
  - (b) the item is clearly not an issue and thus not relevant to your concerns;
  - (c) don't waste time on issues that will have no impact on the eventual risks or their management.
6. Concentrate on the factors that influence risks or their management.

Figure 3: Data-collection screen for GRaCE when the “state of mind” branch was selected in the mind map. The questions are in the right-hand panel and the selected branch of the mind map is the knowledge “subtree” in the left-hand panel. Any part of the left-hand panel tree can be selected and then only those questions associated with it will show in the right-hand panel.

Figure 4: Scale answer for anger.

## 4 Comments and actions

For every question, there is the opportunity to provide a piece of text that gives additional useful information related to a quantitative answer such as dates, scale judgements, etc. See the folder icon next to the question in Figure 4. The idea is that it will clarify or add to the quantitative answer. Similarly, each question has an action box where some intervention or management of the particular risk item should be recorded; this is the box with a cross in it in Figure 4.

*Please note: there is no necessity to provide a comment or action for every question.*



GRaCE was designed to reduce the amount of free text to a minimum. It is far quicker to give a quantitative answer for a specific risk item than it is to write out the item and its answer in free text within a more general answer box, as many assessment tools require. The *only* reason for adding a text comment to a GRaCE answer is if it adds something to the understanding of risk or its management.

## 5 Actions or management plans




Actions or management plans are text boxes with a cross on the icon as shown in Figure 4). Their rules are similar to the ones for comments.

1. Action boxes are for providing management advice, specifically related to the particular risk item.
2. Always put something in the action box if it is something that will help manage the risk issue.
3. Only put something in the action box if it relates to that specific item.
  - (a) Trust the GRaCE structure of questions to have a more appropriate place for any related items.
4. Examples for a management action attached to the date of most recent suicide attempt:
  - (a) *BAD* “This anniversary raises the risk”: this is a comment about the risk and not about how it should be managed.
  - (b) *GOOD* “Make sure he is not alone on or around this date.”: it provides advice on how to lower the risk and is directly related to the particular risk item. The management plan may later add something more specific about who should be contacted for this but at least the idea is recorded at the right point and when it was thought about.





### 5.1 Issues relating to both comments and management plans

Do you have reason to be concerned about the person's risk of suicide?  

yes  no

Has the person ever made a suicide attempt? If yes, the questions about them should be answered with reference to the attempts in general rather than any specific one, unless otherwise stated.   

yes  no  don't know

When was the most recent suicide attempt?    

(Please enter a date in the format ddmmyyyy, mmyyyy or just yyyy)   don't know

Figure 5: Two questions about history of suicide demonstrating the role of the padlocks. The first question about whether a person has a history of suicide attempts is given a gold padlock because once the answer is “yes”, it is fixed: it can’t change unless it was incorrectly given. However, the date of the most recent attempt can change, although not usually very often, and so is given a silver padlock.

1. Whether or not a comment or management plan is carried forward from a previous assessment to the current assessment depends on the type of question that is being asked. This type is marked out by whether or not they have a “padlock” and the colour of the padlock, as shown by Figure 5.
  - (a) Historic data that will only change if they are wrong or added for the first time are given a gold padlock (e.g. previous suicide attempts); their answer will be carried forward to the current assessment and the report will show the most recent comment/action if a new one was not added in the current assessment.
  - (b) Data that do not change very often are given a silver padlock (e.g. when is the most recent suicide attempt); their answer will be treated the same as for the gold padlock data.
  - (c) Data with no padlock can change on a daily basis and so their answers are not carried forward. The report will only show a comment or action if it was provided for the current assessment.

- (d) These behaviours of comments and actions in the report are to make it easier for prolonging the “lives” of comments that are still current. There is no point typing them out again or copying and pasting exactly the same one back into a question’s comment if the answer hasn’t changed and therefore the comment is still relevant.
2. If a question with a padlock (one where answers don’t change or not very often) does need to have its answer changed, you must ensure the comment is also updated so that it remains relevant to the new answer. The old comment will be carried forward into the report if no new comment is added, which may be fine if it still applies but care should be taken to ensure this is the case. Similarly, you might need to update a comment even if the answer has not changed.
  3. In general, when you add a new comment to a padlock item that already has a comment, the new one will replace the existing comment and the old one will not be seen in the subsequent report.
    - (a) Note that there is a comment diary that can show the whole history of comments for the interested party, but the historic ones are not all included in the individual risk reports. The comment diary can be found on the same page where the reports are accessed.

## 6 Safety assessments and management plans

GRaCE helps assess and manage many risks and the evaluation for each one is influenced both by information specific to that risk, such as the last risk episode, and “generic” information that influences all the risks, such as feelings and emotions. The risk judgement can be given at any time but would normally be when you have collected all relevant data, both specific to it (e.g. the most recent date of a suicide attempt) and more generally applicable (e.g. no plans for the future).

### 6.1 Providing the safety assessment score

1. If you are concerned about any risks, then please give a score for it.
  - (a) A report with risk data but no score is very difficult to interpret by others and makes it more difficult to give the person the most appropriate care.
2. The risk judgement is in the context of the normal level of risks applying to the person’s general population. Nobody is risk free but the idea behind the zero for a risk judgement is that it is no different to what one would expect from people in general.
3. The risk judgement should apply to the person’s current circumstances, not how they might be if there is a future change to them.
4. Don’t agonise over the exact risk number to provide.
  - (a) If you have obtained the relevant risk data from the assessment, you will intuitively have some idea about the risks.
  - (b) The exact number is not as important as getting the risk in the right general area. Although research shows that people can make meaningful distinctions between numbers along a 0 to 10 scale for judgements, the management of risk is based on the numbers falling into a broader range of values such as 7 to 10 for high-risk people. The precise judgement number just helps see whereabouts in the range a person might be. This is better than stressing over two categories that have a big jump between them, such as labels like high and medium risk.

- (c) When estimating where a person's risk are between the two opposite ends, try to think of how they compare to the very worst case you can bring to mind. If they are a long way from that, then they are not high risk.

## 6.2 Providing a risk summary for each risk

The GRaCE report is a clear and concise display of information that relates to the person's risks and how to manage them. However, it does not explain which are the most important factors that influenced your score. Therefore it is useful to give a brief explanation for your score in the comment box above the risk scale.

**Safety Assessment**

In your judgement, what is the risk that the person will attempt suicide?  0  1  2  3  4  5  6  7  8  9  10  don't know

0 = no risk, 10 = maximum risk

In your judgement, what is the risk that the person will self-harm?  0  1  2  3  4  5  6  7  8  9  10  don't know

0 = no risk, 10 = maximum risk

Figure 6: Risk judgement scale for suicide and self harm with respectively the overall risk comment and the risk management plan boxes above the scale.

Figure 6 shows that each risk has a box for overall comments about the risk and a specific management plan for that risk. The comment is where the risk judgement is explained. Use this risk summary box to bring out the key factors influencing risk and safety.

1. The risk report shows the risk inputs from each individual item of information but not their relative importance: some clearly influence the risk judgement more than others.
2. The idea for the *risk summary* box is to summarise those elements that have most influenced the risk judgement: to bring out the main risk picture.
3. The summary brings attention to the *key issues* that have raised the risk.
4. If there are no issues raising risk then there is no need to write much in the summary box. You can spend more time on the management plan instead.

## 6.3 Managing the risk

Risk assessment and management go hand-in-hand. As you assess people, you will automatically think about what needs to be done to manage the emerging risks. Hence GRaCE provides management boxes against each question. When the risk item has been answered, if it triggers an idea about how to manage the associated risk, the idea should be recorded in the management box for that item *but only if it is specific to that item*.



*Trust the GRaCE structure because it will have the right place for a comment or action if it does not fit with the current item.*

There is an easy way to copy actions from risk-specific items into the risk-management plan where the risk judgement is made. This is facilitated by the copy tab function next to the risk management box as shown by Figure 7.

In your judgement, what is the risk that the person will attempt suicide? 🗨️ 📄 ⓘ

0 1 2 3 4 5 6 7 8 9 10  don't know

0 = no risk, 10 = maximum risk

Self-management Comment

**Current Actions**  
Select to paste from here ⓘ

**most recent suicide attempt**  
Don't leave him alone on this anniversary of his mother's death.

**insight into lethality of previ...**  
Try to get the person on a counselling course about risky behavio...

In your judgement, what is the risk that the person will self-harm? 🗨️ 📄 ⓘ

0 1 2 3 4 5 6 7 8 9 10  don't know

0 = no risk, 10 = maximum risk

Figure 7: Tab for copying management comments into the risk plan for suicide.

In your judgement, what is the risk that the person will attempt suicide? 🗨️ 📄 ⓘ

0 1 2 3 4 5 6 7 8 9 10  don't know

0 = no risk, 10 = maximum risk

Self-management Comment

Don't leave him alone on this anniversary of his mother's death.

**Current Actions**  
Select to paste from here ⓘ

**most recent suicide attempt**  
Don't leave him alone on this anniversary of his mother's death.

**insight into lethality of previ...**  
Try to get the person on a counselling course about risky behavio...

In your judgement, what is the risk that the person will self-harm? 🗨️ 📄 ⓘ

0 1 2 3 4 5 6 7 8 9 10  don't know

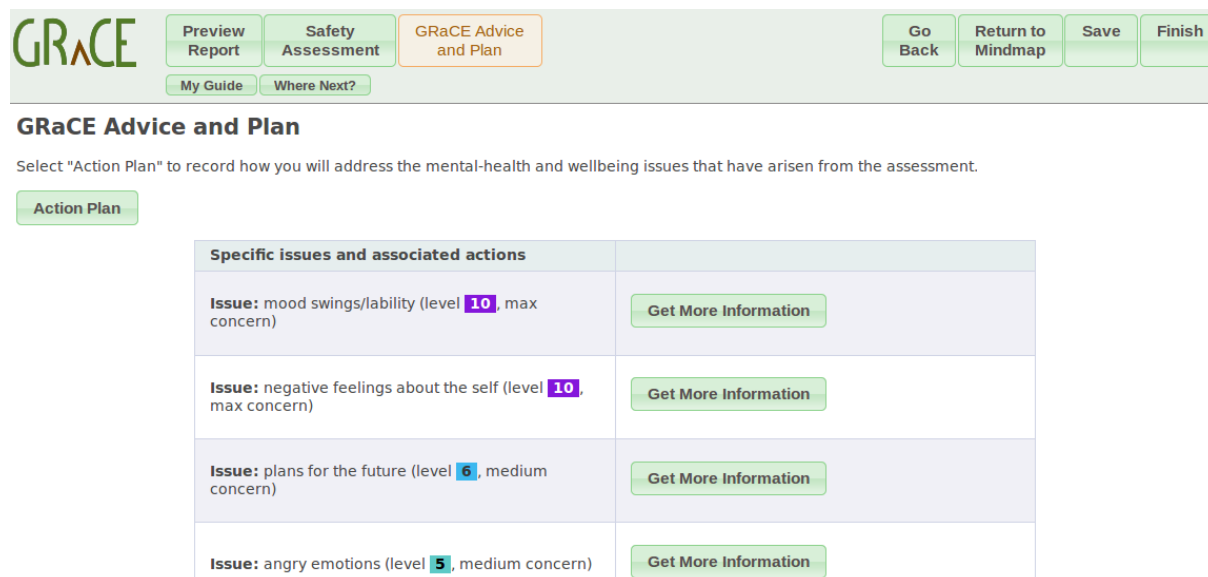
0 = no risk, 10 = maximum risk

Figure 8: Tab after one of the action comments has been copied, showing the heading greyed out.

1. Select the risk-plan icon (the one on the right) and you will see a tab with a blue header and “current actions” written in white, as shown in Figure 7.
2. When you select the tab, it opens up a scrollable box that shows the label of the risk item in blue and the comment associated with it beneath. Figure 7 illustrates the tab for the suicide-specific plan.
3. Any actions you placed against items specifically about this risk will show below the header with the label of the risk item and the comment you gave it.

4. When you put the cursor over an item it becomes shaded to show that it can be selected.
5. If you select any of these labels and comments, the comment will be copied into the management box.
6. The item heading (label) then goes the same colour as the comment to show that you have already copied it, although it can still be copied again, as shown in Figure 8.
7. Whenever you make a selection, the comment is placed at the end of whatever is already in the risk plan.
8. When you have selected all the comments you want for the risk plan, you can edit them to provide the final version.
9. The drop-down management tab saves you having to remember and then rewrite actions entered earlier.

When comments and plans have been completed for all assessed risks, each one will have a judgement of the level of risk, the reasons for that level, and how to manage the specific risk issues to reduce the risks, both in the short term and the longer term. This will be invaluable for explaining the situation if you need additional clinical support.



**GRaCE Advice and Plan**

Select "Action Plan" to record how you will address the mental-health and wellbeing issues that have arisen from the assessment.

**Action Plan**

Specific issues and associated actions	
<b>Issue:</b> mood swings/lability (level <b>10</b> , max concern)	<a href="#">Get More Information</a>
<b>Issue:</b> negative feelings about the self (level <b>10</b> , max concern)	<a href="#">Get More Information</a>
<b>Issue:</b> plans for the future (level <b>6</b> , medium concern)	<a href="#">Get More Information</a>
<b>Issue:</b> angry emotions (level <b>5</b> , medium concern)	<a href="#">Get More Information</a>

Figure 9: Page that appears if the GRaCE Advice and Plan button is selected. The “Action Plan” button is where you can write down your own ideas about how to manage the person’s health and wellbeing. The other part of the page contains issues that GRaCE is bringing to your attention, with buttons that will take you to advice about how to address the problems.

## 7 GRaCE advice and your safety plan

When you feel you have enough answers to understand the person’s risk and safety issues, you can see what advice GRaCE is giving for the most important issues and also start writing down your own plan for helping the person. This can be done at any time, and many times, by selecting the “Safety Plan and GRaCE Advice” button.

1. When you select the button, you will see a page with another button for entering your plan and also some issues that GRaCE thinks should be brought to your attention. See Figure 9 for an example, where the person has high scores on emotions.
2. If you select the Action Plan button, a pop-up box will appear with some headings already entered that will help you structure your plan. Add in your thoughts under the appropriate headings and save them. If you want further help, there is a button that will provide it.

**GRaCE** Preview Report Safety Assessment GRaCE Advice and Plan Go Back Return to Mindmap Save Finish

### Your Finished Assessment

Assessment Context ⓘ  
[Show more](#)

**GRaCE Advice and Plan**  
 Select "Action Plan" to record how you will address the mental-health and wellbeing issues that have arisen from the assessment.

Action Plan Show Report

Specific issues and associated actions	
Issue: mood swings/lability (level <b>10</b> , max concern)	Get More Information
Issue: negative feelings about the self (level <b>10</b> , max concern)	Get More Information

Submit Assessment Suspend Assessment

Figure 10: The “Finish” button screen, where you can record any particular issues about the circumstances of the assessment, if you think it is relevant (e.g. if it took place in a very distracting environment).

## 8 Finishing your assessment

When you have done all you need for the assessment, you can select the “Finish” button. This will take you to a panel where you can have a final review of your activities, including seeing the completed report, and the advice given by GRaCE.

If you decide you want to continue the assessment, you can simply return to any part of the assessment using the buttons at the top. If you want to continue but don’t have time to do it right away, then you can suspend the assessment and finish it off later. If you are happy with everything, then submit the assessment and, if you have time, give us some feedback on the evaluation form.