

Name of Tool	Dynamic Risk Assessment of Offender Re-Entry (DRAOR)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	Serin and Mailloux
Year	2009

### Description

- The DRAOR contains dynamic stable, acute and protective factors that assist staff in identifying and responding to change in the risk of reoffending and desistance from crime.
  - The DRAOR is scored using information obtained from interviews with the individuals, their families and partners, reports from treatment providers and other applicable persons such as the police ([Yesberg, Scalan and Polaschek, 2014](#)).
- The total score for the DRAOR is calculated by adding the stable and acute scores and then subtracting the protective total ([Yesberg and Polaschek, 2014](#)).
- The basis for this instrument is the 'risk-needs-responsivity' model, which categorises interventions based on risk and changing needs ([Yesberg et al., 2015](#)).

### Age Appropriateness

No age range specified

### Assessor Qualifications

Designed for use within the probation service. No assessor qualifications specified.

### Tool Development

- The DRAOR was firstly developed for probation staff in Canada to be able to manage the management of those in the community. Serin and colleagues extrapolated items from previous research on violent and sexual offending ([Serin, Lloyd and Hanby, 2010](#)).
- [Polaschek and Yesberg \(2018\)](#) looked at completers of an intensive prison-based treatment programme. Based on DRAOR scores, completers entered the community with higher protective and lower stable and acute dynamic factors and also showed less variability on acute risk factors.
- R. Serin (personal communication, October 2010) - initial validation research in New Zealand involved 283 individuals who offended and 35 probation officers. The researchers found that the DRAOR attained moderate to high accuracy in predicting recidivism: 'Stable' subscale scores in predicting any new offence (AUC = .75), 'Acute' subscale (AUC= .76). It was also found that repeating the DRAOR assessments resulted in better prediction. The first set of Stable scores attained an AUC value of .70 which increased to .79 by the fourth iteration. The tool was further refined and thereafter adopted as a national standard for probation in New Zealand ([Serin, Lloyd and Hanby, 2010](#)).
- Tamatea and Wilson (2009) found positive correlations between the Stable and Acute subscales and the risk of recidivism. The Protective subscale was negatively correlated to recidivism.

- Serin (personal communication, December 2012) - a 3-month follow-up pilot study conducted in Iowa, utilised a total of 926 DRAOR assessments obtained from individuals within probation and parole settings. Data was extracted at two time intervals, with a mean of 65.6 days between assessments. Small to moderate correlations were observed between the composite and subscale scores at time 1 and the outcome - which was defined as any violation of return to prison (Total score = .28; Acute score = .23; Stable -.25; Protective score = -.28). Similar trends in correlation were observed at time 2. Furthermore, the DRAOR attained moderate AUC values in predicting recidivism (Total score = .66, Stable = .60, Acute = .65, Protective = .67) compared to the LSI-R (.56).
- A doctoral thesis by [Hanby \(2013\)](#) found that the DRAOR has promise as a valid tool for risk assessment and management, with reconvictions being accurately predicted from monthly average Stable Risk for 12 months and the Protective Factors were predictive for 4 months.
- A sample of 287 high-risk males discovered that the DRAOR total score significantly predicted reconviction. Further, the score of stable items was found to independently predict reconvictions and imprisonment, indicating that this is the most important element to the tool in predicting outcomes ([Yesberg and Poalschek, 2014](#)).
- Research by [Yesberg and colleagues \(2015\)](#) on a mixed-sex sample found that the DRAOR predicted recidivism for the females but not the males.
- As part of Masters dissertation research, [Chadwick \(2014\)](#) sought to validate the DRAOR. Predictive accuracy was evaluated using ROC analysis. Findings indicated the stable domain and total scores produced the largest effects (AUCs of .61 to .62). It is concluded that case managers would benefit from utilising the DRAOR in the everyday supervision of individuals who have offended.
- A Masters dissertation administered the DRAOR to 85 individuals convicted of sexual offences released from prison to test its ability to predict sexual, violent and general recidivism. It was found that the domain scores significantly correlated with all recidivism, bar sexual offending ([Averill, 2016](#)).
- Using a sample 112 males convicted of IPV offences, a Masters dissertation looked at whether the DRAOR predicted repeat offending. While the DRAOR did not predict IPV recidivism in this sample, it appeared to be useful for informing case management decisions. IN terms of violence generally, the DRAOR's Total and Stable scores were significantly positive associated with offending (AUC=.65); whilst the Protective scores were negatively associated with violence (AUC=.35) ([Perley-Robertson, 2019](#)).

### General Notes

- Authors advise that the assessment should be completed on a monthly basis.
- Further validation is being undertaken in Australia, Canada and the United States ([Serin, Lloyd and Hanby, 2010](#)).
- Positive reports of the application of DRAOR from Department of Corrections New Zealand – 2013.

Name of Tool	Female Additional Manual (FAM)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	de Vogel, de Vries Robbé, van Kalmthout and Place
Year	2014 (2012)

### Description

- The FAM is a tool with additional guidelines to the HCR-20<sup>v3</sup> that aids clinical assessment of violence risk in adult females who have committed prior violence offences. Similar to the HCR-20 / HCR-20<sup>v3</sup>, the FAM covers historical, clinical and risk management items (de Vogel et al., 2014). The historical items are personality disorder, traumatic experiences, prostitution, parenting difficulties, pregnancy at a young age and suicidality/self-harm. The clinical items are covert/manipulative behaviour and low self-esteem. The risk management items consist of problematic childcare responsibility and problematic intimate relationship.
- The FAM is comprised of additional guidelines to five of the historical HCR-20<sup>v3</sup> items or two HCR-20<sup>v3</sup> items and eight additional risk items specifically for evaluating females who have offended (de Vogel et al., 2014).
- The FAM items were constructed following a thorough review of the literature and clinical experience in relation to females. The nine new risk items reflect gender-responsive issues such as problems with childcare responsibilities, prostitution, low self-esteem and covert / manipulative behaviours ([de Vogel, Wijkman and de Vries Robbé, 2018](#)).
- In addition to making a final judgment on the risk of violent behaviour towards others, the FAM also allows for the individual to be assessed for their risk of self-destructive behaviour, victimisation and non-violent criminal offending ([de Vogel, Wijkman and de Vries Robbé, 2018](#)).

### Age Appropriateness

18+

### Assessor Qualifications

Assessors must possess a degree, certificate or licence to practice within health care settings (de Vogel et al. 2014).

Assessors must also possess the necessary training and experience in the administration, scoring and interpretation of clinical behavioural assessment instruments (de Vogel et al., 2014).

### Tool Development

- The FAM was developed due to there being a lack of gender-specific tools to be used for violence in female populations. A literature review, interviews with mental health professionals and a pilot study in a Dutch mixed gender forensic psychiatric hospital were used to develop the FAM ([de Vogel, Wijkman and de Vries Robbé, 2018](#)).

- A draft version of the FAM was implemented in 2007 for all female patients who were resided in the Van der Hoeven Kliniek, a Dutch forensic psychiatric hospital admitting both men and women. Interviews with mental health professionals revealed there were factors particularly relevant to women: covert behaviour, hiding or concealing the truth, manipulative use of sexuality such as exploiting it for personal gain and low self-esteem ([de Vogel and de Vries Robbé, 2013](#)).
- In 2011, the tool was revised subsequent to user feedback, new insights and experiences with coding of other tools, specifically the Structured Assessment of Protective Factors for violence risk (SAPROF) and the Short-Term Assessment of Risk and Treatability (START). In addition to a final judgement on risk to others it now also includes judgements on self-destructive behaviour, victimization and non-violent criminal behaviour. There was a further revision in 2013 so it could be used with the HCR-20<sup>v3</sup> ([de Vogel, Wijkman and Vries Robbé, 2018](#)).
- In 2011, research was conducted on the psychometric properties of the FAM in the Van der Hoeven Kliniek. The authors found good inter-rater reliability for the composite score and the different final risk judgements, except for victimization ([de Vogel et al., 2011](#)). Preliminary findings on the FAM's predictive validity during treatment were good for incidents of violence towards others as well as for incidents of self-destructive behaviour.
- A study by [Greig \(2014\)](#) into the psychometric properties of the FAM led to the conclusion that the tool may be useful in civil psychiatric populations.
- Griswold and colleagues (2016) used a sample of 28 female defendants adjudicated not guilty by reason by insanity in the United States. The FAM showed good inter-rater reliability and predictive validity for inpatient violence. In spite of this, the authors found no incremental validity of the FAM over the HCR-20.
- [Campbell and Beech \(2018\)](#) examined whether scores on the HCR-20 and FAM can be related to frequency of self-harm in 89 female psychiatric patients. The association between self-harm and HCR-20 scores was strengthened by the inclusion of the FAM. It is recommended that the FAM is used alongside the HCR-20 when assessing risk of self-harm in females.
- [de Vogel et al. \(2019\)](#) coded file information in 78 female forensic patients using a number of risk assessment instruments, including the FAM. Reconviction data was available for 71 of the patients. The FAM was one of the tools showing the highest predictive accuracy for all recidivism (including violence).

### General Notes

- [de Vogel, Wijkman and de Vries Robbé, 2018](#) suggested the FAM could be useful in general mental health settings and for detecting inpatient violence.
- The FAM assessor is invited to decide upon risks for various behaviours and scenarios: risk for future violence (influencing someone else to commit violence or being an accessory to violence is also included in the definition of violence); risk for serious physical harm; risk for imminent violence; risk for self-destructive behaviour; risk for victimisation; risk for non-violent criminal behaviour ([de Vogel et al., 2014](#)).
- In the manual, the developers maintain that the FAM may be possibly be partly useful for violence risk assessment in adolescent girls. This is said with caution, however, because there are some risk factors specifically valid for adolescent girls that are not included in the FAM, such as interaction with deviant peers, being a member of a gang and running away from home. Further to this, some of the FAM items are not applicable to adolescent girls, such as 'victimization after childhood ([de Vogel et al., 2014](#)). It is, therefore, recommended that scholars consider developing or adapting tools for risk in adolescent girls, as well as for assessing the risk of child abuse, intimate partner violence or psychopathy in female populations ([de Vogel, Wijkman and de Vries Robbé, 2018](#)).

- Although it is preferable to use the most recent edition of the FAM (de Vogel et al., 2014), the original FAM can also be applied as an additional manual to the HCR-20<sup>v3</sup> with some adaptations.
- Enquiries regarding this risk assessment tool can be sent to the following e-mail address: [vdevogel@dfzs.nl](mailto:vdevogel@dfzs.nl).

Name of Tool	Structured Assessment of Positive Factors for Violence Risk (SAPROF)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	de Vogel and colleagues
Year	2009, 2012

### Description

- The SAPROF is a 17-item checklist based on the structured professional judgement methodology. It was developed to be used in a variety of settings: forensic and general psychiatry (both inpatient and outpatient); prisons and probation supervision.
- The items are categorised into 3 subscales: (1) internal items, characteristics that could offer protection against future violence; (2) motivational items, which encourage the individual to be a positive member of society; (3) external items, those environmental factors that could be of benefit. The most important items can be highlighted by marking factors as 'keys' most likely to offer protection or 'goals' that should focus on improvement for individuals.
- The SAPROF was designed to complement other SPJ risk assessment tools such as the HCR-20 or the HCR<sup>V3</sup> by considering both protective and risk factors in evaluating risk assessment for future violence.
- The tool considers the importance of dynamic factors and their role in achieving effective treatment programmes (de Vogel et al., 2009).
- The English version of the SAPROF was made available in April 2009; the second edition of the tool was published in 2012.
- Considering risk levels and protective factors may fluctuate over time The developers of SAPROF recommend that repeated assessments are carried out if there are changes in an individual's circumstances ([de Vogel et al., 2011](#)).

### Age Appropriateness

No age range specified.

### Assessor Qualifications

Experience and training in conducting individual assessments.  
Experience and training in the administration and interpretation of tests and semi-structured interviews.  
Assessors should also be familiar with the most recent professional and research literature on the causes and prediction of violence.

### Tool Development

- The SAPROF was initially developed for the forensic psychiatric population in 2007.

- [de Vries Robbé, de Vogel and de Spa \(2011\)](#) - SAPROF obtained an excellent ICC value of .85 for the composite score. SAPROF demonstrated high predictive accuracy in relation to post-discharge recidivism in a sample of forensic patients (AUCs .74 - .85).
- [Yoon, Spehr and Briken \(2011\)](#) - in a pilot study conducted with a German sample of individuals with sexual offences, the SAPROF had a significant negative correlation with other risk assessments such as the STATIC-99.
- [de Vries Robbé and de Vogel \(2012\)](#) - the authors cite the findings of studies in preparation for publication, which investigated the predictive accuracy of the SAPROF with those convicted of both violent and sexual offences. The investigations found high AUC values ranging from .71 to .85 in three follow-up periods (1-, 3- and 11-year follow-ups) for the composite score. These trends were observed across reconvictions for violent and sexual offences.
- Research carried out on 83 individuals convicted of sexual offences found that the SAPROF had good predictive validity for sexual violence ([de Vries Robbé et al., 2015](#)).
- [Yoon et al. \(2016\)](#) retrospectively rated 450 individuals convicted of sexual offences in Austria. The inter-rater reliability was shown to range from good to excellent for all SAPROF items; whilst the predictive accuracy was found to be low to moderate for various types of recidivism.
- A comparison of various risk assessment tools found that the SAPROF has good 'construct validity' with the START tool, showing that both instruments measure the same thing ([Abidin et al., 2013](#)).
- [de Vries Robbé, de Vogel and Douglas \(2013\)](#) coded the HCR-20 alongside the SAPROF on a sample of 188 patients who had been discharged from forensic psychiatric treatment. It was found that combining the risk factors of the HCR-20 with the protective factors of the SAPROF resulted in good predictive validity for violent recidivism after treatment.
- In a study of 52 individuals convicted of violent offences in a Swiss prison, SAPROF total scores showed good predictive validity for physically violent misconduct with an AUC of 0.84. Poor predictive validity was found for any misconduct and other misconduct, yielding AUCs of 0.64 and 0.61 respectively ([Abbiati et al., 2014](#)).
- A mixed-sex sample of 409 patients discharged from medium secure services in England and Wales utilised both the HCR-20 V3 and the SAPROF at six monthly intervals to test their predictive accuracy in determining which patients would carry out violence within the first year of release. It was found that only a few items in the SAPROF demonstrated any discriminative value in identifying which patients would not engage in violent behaviour ([Coid et al., 2015](#)).
- [Kashiwagi et al. \(2018\)](#) examined the inter-rater reliability and predictive accuracy of the SAPROF in 96 patients located in forensic mental health units in Japan. Since there are no widely used structured risk assessment tools for violence in Japan, the SAPROF was translated into Japanese. Moderate-to-good inter-rater reliability was evident, with an ICC of 0.70 for 30 randomly selected cases. The predictive accuracy was an AUC of 0.87 and 0.85 for 6 and 12 months respectively.

### General Notes

- The SAPROF is to be used alongside SPJs like the HCR-20 and may also be used with actuarial tools. It is highlighted that it is imperative to consider the circumstances of every individual, for every item on the SAPROF may also be a risk factor as well as a protective one ([de Vogel et al., 2011](#)).
- The authors maintain that whilst clinical use of the SAPROF is possible, results should be interpreted with caution. An update to caution statement was provided in January 2016: "Given the strong empirical findings regarding the psychometric properties of the SAPROF, in particular its inter-rater reliability, predictive validity for desistance in those with violent as well as those with sexual offending histories and the demonstrated relation between improvements in protective

factors and recidivism reduction, this tool may be used as a risk assessment and treatment guidance tool in clinical practice as well as research.”

- Fifteen translations of the tool are now available. Other validation research is currently underway in Canada, New Zealand, Germany, Italy, Switzerland, Portugal, Ireland and the UK ([de Vries Robbé and de Vogel 2012](#)).

- The authors have published an [online article](#) detailing the differences between the first and second versions of the SAPROF manual. This includes (but is not limited to) further notes regarding the time frames for the coding of SAPROF items, updates in SAPROF validation research and its application to practice and risk formulations.

- A number of other variations of the SAPROF are currently being developed (interested readers are directed to [de Vries Robbé and Willis, 2017](#)):

- A SAPROF Youth Version (SAPROF-YV) has been developed for use with youths with violence related problems. The intention is for the SAPROF-YV to be used in conjunction with risk-focused youth tools such as the YLS/CMI or the SAVRY. This was implemented nationally across juvenile justice institutions in the Netherlands; it is to be used in addition to the SAVRY tool ([de Vries Robbé and Willis, 2017](#)). The SAPROF-Sexual Offending (SAPROF-SO) is to be used to assess protective factors specific to sexual offending.

- For those with intellectual deficits, the SAPROF-Intellectual Disabilities (SAPROF-ID) is in progress of being designed.

- The SAPROF-Intensive Care highlights additional factors that are particularly relevant in an inpatient or forensic psychiatric care setting.

- Enquiries regarding this risk assessment tool can be sent to the following e-mail address: [saprof@hoevenkliniek.nl](mailto:saprof@hoevenkliniek.nl).

- Research and training enquiries can be made by contacting the authors using the following email address: [mdevriesrobbe@hoevenkliniek.nl](mailto:mdevriesrobbe@hoevenkliniek.nl)

- For more information about the tool please visit: [www.saprof.com](http://www.saprof.com).

Name of Tool	Workplace Assessment of Violence Risk (WAVR-21 V3)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	White and Meloy
Year	2016

### Description

- The WAVR-21 is the first and only SPJ instrument designed to investigate the risk of workplace and campus-related targeted violence, i.e., lethal situations where an individual enacts violence against a specific target in order to cause as much harm as possible ([Brunt, 2013](#); [Kienlen, n.d.](#)).
- The primary purpose of the WAVR-21 is to examine the risk for homicide; a secondary element to the tool is to assess the risk, frequency and severity of other workplace aggression such as stalking ([Meloy, White and Hart, 2013](#)).
- The WAVR-21 is a 21-item instrument examining violent motives, ideation, intent, weapons skills, pre-attack planning, negative personality traits, mental disorders, situational factors and any protective factors. Items are coded as absent, present, or prominent, with an additional “recent change” determination ([Brunt, 2013](#); [Kienlen, n.d.](#); [Meloy, White and Hart, 2013](#)).
- The WAVR-21 breaks down an individual’s thinking about violence into three categories: motives for violence; homicidal ideas, violent fantasies or preoccupation; violent intentions and expressed threats ([Brunt, 2013](#)).
- The intended users of the tool are qualified mental health professionals with experience of assessing violence risk and knowledgeable about workplace legal issues, or members of multidisciplinary threat assessment teams ([Meloy, White and Hart, 2013](#)).
- The WAVR-21 was first published in 2007; it is now in its third version which came out in 2016 (see [WAVR-21](#) webpage).

### Age Appropriateness

18+

### Assessor Qualifications

- Using the WAVR-21 requires training, a knowledge of threat assessment literature and risk management principles, and compliance with relevant local and national laws ([Brunt, 2013](#)).
- Printed manuals are available at [specializedtraining.com](#); training opportunities are regularly posted at [wtsglobal.com](#). One and two day trainings are available.

### Tool Development

- The existing literature on workplace violence, threat assessment and risk was reviewed to formulate the WAVR-21. It was pertinent that the tool captured both escalation to targeted or intended violence, as well as de-escalation where an individual ultimately decides against the violence they had previously contemplated ([Meloy, White and Hart, 2013](#)).

- Eleven raters assessed 12 cases of workplace threat situations chosen at random. The inter-rater reliability was found to be excellent for two items, fair to good for eleven and poor for eight of them. This may be countered, to some extent, by the fact that the raters having limited experience and no mental health background; the case materials were limited in their quality and quantity. The overall sum of the risk factors generated a good IRR of .67 ([Meloy, White and Hart, 2013](#)). When psychologists alone utilised the WAVR-21, interrater reliability was in the excellent range.
- Scalora, Cawood and Viñas-Racionero (in press) tested the predictive validity of the WAVR-21 using forty cases of violence that had taken place in workplaces and academic institutions. Raters were blind to the known outcomes. Substantial predictive validity was demonstrated with an AUC of .70, showing that final summary risk ratings correlated with physical violence, and correct classification of cases as either violent or nonviolent was comparable to other structured professional judgment instruments.

### General Notes

- The focused questions at the end of the WAVR-21 coding sheet allow for further exploration of issues pertinent to threat assessment ([Brunt, 2013](#)). The intake documentation form in the WAVR-21 V3 provides for an initial assessment for prioritising of the case.
- Participants who take part in formal WAVR-21 training are provided with an additional tool, the 'PROTECT' form, used to identify stabilisers against violence risk ([Kienlen, n.d.](#)).
- A digital version of the WAVR-22 V3 is available in two forms: an online tool as part of the Resolver platform ([resolver.com](#)); and licensing as intellectual property by White and Meloy so the WAVR-21 V3 can be formatted according to the wishes of the licensee and used behind a secure firewall.
- Typical users of the WAVR-21 are members of multi-disciplinary threat assessment and management teams or mental health professionals who consult or conduct formal assessments in work or campus settings. Other potential users of the WAVR-21 are workplace violence security consultants, as well as law enforcement professionals who assist the organisations in their communities (see [WAVR-21](#) webpage).
- Further details about the tool can be found here: <https://www.wavr21.com/>

Name of Tool	Extremism Risk Guidelines (ERG 22+)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	Her Majesty's Prison and Probation Service (HMPPS)
Year	2011

### Description

- The Extremism Risk Guidelines (ERG) 22+ is a structured professional judgement (SPJ) tool for assessing the risks and needs of those convicted of terrorist extremism offences, which may or may not include violent extremism ([HMPPS, 2019](#)).
- The tool includes 22 factors categorised into three domains: *Engagement*, *Intent*, and *Capability*.
- The “+” in ERG22+ represents the ability to add factors that are relevant for a given individual.
- The tool does not include a list of protective factors, but assessors are encouraged to consider whether each factor (or its absence) can act protectively.
- Assessors rate items as Present, Partially Present, or Not Present, then develop a formulation to explore the relevance and function of each indicator now and in the future, both in the context of the three domains as well as in disengagement or desistance. ([Powis, Randhawa-Home & Bishopp, 2019](#); [Lloyd & Dean, 2015](#); [Logan & Lloyd 2018](#)).
- The tool does not generate a score or a risk banding system ([van der Heide et al., 2019](#)). Identifying more risk factors as “Present” does not in itself indicate a higher risk; rather, assessors need to explore how these factors combine to tell an individual’s “risk story” ([Lloyd & Dean, 2015](#), p.13).
- The individual items are dynamic, except for *criminal history* ([Lloyd & Dean, 2015](#)).
- The tool has been used in risk assessment and management, including sentence planning and decisions relating to parole, relocation, recall, and licence conditions ([HMPPS, 2019](#); [Lloyd & Dean, 2015](#)).
- The tool is not limited to a specific extremist ideology, and has been used with individuals associated with Islamist, animal rights, far-right, far-left, and gang-affiliated groups ([Dean et al., 2018](#); [HMPPS, 2019](#)).
- The ERG22+ process includes an interview or written comments from the individual being assessed. However, it is possible to complete an ERG22+ without this ([HMPPS, 2019](#)).
- Assessors should use as many sources of information as possible, including interviewing family members in some cases, and work collaboratively with the individual to understand their pathway into extremist offending ([HMPPS, 2019](#)).
- The tool has been integrated into several interventions in England and Wales, such as the Healthy Identity Intervention (HII) and the Motivational and Engagement Intervention, which were informed by the tool’s 22 risk factors. All participants have an ERG22+ assessment completed, the outcome of which guides the interventions used ([Dean, 2014](#); [Herzog-Evans, 2018](#); [Dean et al., 2018](#)). These interventions have since been amalgamated into Healthy Identity Intervention: Foundation and Healthy Identity Intervention: Plus ([Dean et al., 2018](#)).

### Age Appropriateness

No age specification

### Assessor Qualifications

- Assessors must be chartered and registered psychologists, or experienced probation officers. They must work in a role that requires assessment of convicted extremist offenders and/or those for whom there is credible concern about their risk of extremist offending. ([HMPPS, 2019](#)).
- It is desirable if assessors also have experience with psychologically-informed risk assessment and formulation. ([HMPPS, 2019](#)).
- Assessors must undertake a 2-day training course. ([HMPPS, 2019](#)).
- Currently, use of ERG22+ is only licenced within HMPPS.

### Tool Development

- The ERG22+ was developed from an earlier Structured Risk Guidance (SRG) protocol (2009). The SRG was developed from casework with convicted extremist offenders and the literature on terrorism. Following a pilot phase and independent evaluation, as well as feedback from assessors, offenders, stakeholders, and peer reviewers, and developments in the body of literature, the SRG was revised and developed into the ERG22+ in 2011 ([Dean et al., 2018](#)).
- The tool was developed by HMPSS (formerly National Offender Management Service [NOMS]). An ERG22+ assessment is carried out for every individual convicted under terrorism legislation in England and Wales ([Powis, Randhawa-Horne & Bishopp, 2019](#)).
- The ERG22+ was informed by casework (approximately 30% of the convicted terrorist population at the time), the body of literature, and research commissioned by the UK government ([Lloyd & Dean, 2015](#)).
- The ERG22+ was developed to be applicable to extremist offenders with or without a history of violence. The developers note that the majority of those with terrorist convictions in the UK do not have a history of violent convictions ([Lloyd & Dean, 2015](#)).

### General Notes

- The tool is adaptable to any individual, regardless of age or gender. The factors are psychological, requiring a qualified assessor to interpret and apply them to a given individual. However, the developer notes that the tool may not be suitable in certain contexts, such as jihadi children taken abroad by their parents who are returning to the UK (M Lloyd, personal communication, 22 February 2021).
- [Herzog-Evans, \(2018\)](#) concluded that the ERG22+ may work best in countries with a legal threshold for terrorism offences that includes non-violent terrorist acts, such as in the UK and France.
- [Powis, Randhawa-Horne & Bishopp \(2019\)](#) applied the tool to a sample (n=171) of convicted Islamist extremists and used multidimensional scaling analysis (MDS) to examine construct validity and internal consistency reliability. The tool had good internal consistency overall, with an alpha coefficient of 0.80. Individual domains had varying results: the Engagement and Intent domains showed moderate internal consistency (alpha coefficients of 0.65 and 0.79, respectively). The Capability domain showed low internal consistency (0.46). The authors concluded that the 22 factors may be better organised into different domains (they suggest *Identity & External Influence; Motivation & Ideology; Criminality; Capability; and Status and Personal Influence* as preliminary categories) rather than the existing domains of *Engagement, Intent, and Capability*. They also suggest the mental health item could be refined and defined further.
- [Powis, Randhawa-Horne & Elliot \(2019\)](#) tested the inter-rater reliability of the tool using two formats: to test research reliability, two experienced raters assessed 50 randomly-selected

cases; to test field reliability, 33 raters of varying experience assessed two specially-developed test cases, which were then compared to “gold standard” ratings. The inter-rater reliability of the research reliability test was in the ‘excellent’ range, while the field reliability test had more varying results: the Intent domain had poor inter-rater reliability, while the engagement and capability domains were ‘moderate’ to ‘borderline good.’ Experienced raters had higher levels of agreement. The authors conclude that additional training and clearer definition of terms could improve inter-rater reliability.

- There is a screening version of the tool, the Extremist Risk Screen (ERS), for offenders with no previous convictions for terrorist offences. The ERS is meant to assist security staff, police liaisons, and offender managers in assessing the credibility of concerns related to potential involvement in extremism. It also informs intervention, which may include a full ERG22+ assessment ([Lloyd & Dean, 2015](#)). The ERS has good face validity and utility with assessors and offenders ([Lloyd, 2019](#)).
- The ERG22+ has also informed the Vulnerability Assessment Framework (VAF), a tool to assess risk of radicalisation as part of the Channel programme in the UK. The VAF uses the same items as the ERG22+ and groups them into the same categories of engagement, intent, and capability. The VAF can be used with non-offenders, and is used most often with people under the age of 20 ([Skleparis & Knudsen, 2020](#)).
- [Lloyd & Dean \(2015\)](#) state that the tool’s basis in literature and the pathways of terrorist offenders gives the tool some empirical grounding in the absence of validation data.
- A group of experts summarised the strengths and limitations of the tool. Strengths include:
  - the tool’s links to a treatment programme (HII);
  - that it is completed collaboratively with the individual;
  - the ability to add additional factors where relevant; and
  - the ability to explore pathways that do not necessarily involve violence.
- Limitations include:
  - the need for more research into the tool’s validity and reliability;
  - the lack of research proving that the factors included can predict risk, given the low base rate of extremist recidivism; and
  - that the casework that informed the tool was mostly focused on al-Qaeda-inspired extremism.
- The growing body of literature should be reviewed regularly to ensure the tool remains appropriate for use with groups such as women and young people ([Lloyd, 2019](#)).
- The ERG22+ is the intellectual property of HMPPS.

Name of Tool	Multi-Level Guidelines (MLG)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	Cook, Hart and Kropp
Year	2013

### Description

- The Multi-Level Guidelines (MLG) is a 16-item Structured Professional Judgement (SPJ) approach to assessing risk of group-based violence (GBV). This encompasses any violence by an individual who is aligned with, or a member of, a group. It includes terrorism as well as violence associated with gangs, organised crime, and cults. This may include lone actors who identify with, but are not a member of, a group ([Cook et al., 2019](#)).
- The tool lists 16 risk factors categorised into four domains in a nested model: individual, individual-group, group, and group-societal. These are rated for presence (Yes, Partial, or No) and relevance (Low, Medium, or High), and used to develop a formulation that includes scenarios and risk opinions that then inform case management. The tool does not include protective factors, but assessors should consider and include individualised protective factors in their formulation ([Logan & Lloyd, 2015](#); [Cook et al., 2019](#)).
- Rather than risk bandings, the output is a formulation that should communicate opinions on Future Violence/Case Prioritisation, Serious Physical Harm, and Imminent Violence ([Hart et al., 2017](#); [RTI International, 2017](#)).
- An interview with the individual is encouraged, but not required. Assessors use evidence such as mental health records, corrections records, security information and intelligence, and any additional information that may be relevant ([Cook et al., 2019](#)).
- Assessments should be completed in a team, with at least one member who is a Subject Matter Expert of the group the individual is affiliated with ([Cook et al., 2019](#)).
- Individuals should be reassessed as required, with a maximum of 12 months between assessments ([Cook et al., 2019](#)).

### Age Appropriateness

14+ ([Cook et al., 2019](#))

### Assessor Qualifications

- The tool can be used by professionals in mental health, criminal justice, or security services working with individuals who are at risk or involved in group-based violence. There is no standardised training for the MLG ([Cook et al., 2019](#); [Hart et al., 2017](#))

### Tool Development

- MLG was developed from a literature review of group-based violence, as well as feedback from experienced threat analysts ([Cook et al., 2019](#)).

- The risk factors in the Individual domain are modelled after HCR-20 V3 factors ([Hart et al., 2017](#)).
- In a doctoral thesis, [Cook \(2014\)](#) examined the utility and inter-rater reliability of the first version of the MLG with a sample (n = 42) of assessors across 11 GBV cases. Inter-rater reliability was tested for individual items (ICCs ranged from poor to excellent), domains (fair to excellent), and conclusory opinions (good to excellent). Ratings for individual items, domains, and conclusory opinions spanned all possible rating options, indicating the tool can communicate various levels of risk ([Cook, 2014](#)). The MLG subsequently underwent a revision, where four risk factors were removed ([Hart et al., 2017](#)).
- [Cook \(2014\)](#)'s doctoral thesis states that the tool has face- and content validity, as well as practical utility, after evaluating assessors' confidence and knowledge gains following training and practice in using the tool.
- [Hart et al. \(2017\)](#) examined inter-rater reliability for individual items (presence and relevance) and domains. While there was variation, the average was in the "excellent" range. Summary risk ratings were more varied: inter-rater reliability regarding future violence was in the "good" range, while ratings for Serious Physical Harm and for Imminent Violence were in the "fair" range.
- [Hart et al. \(2017\)](#) demonstrated concurrent validity in overall risk ratings between the MLG and the HCR-20, concluding that those at risk of GBV would also be identified as at risk of general violence. The developers caution that this does not indicate the reverse, and that those at risk of general violence cannot be assumed to be at risk of GBV.

### General Notes

- The tool is in use in North America and Europe ([Cook et al., 2019](#)).
- The tool can be used in pre- or post-crime scenarios. It is intended for use with those at risk of committing GBV as well as those who are suspected of or known to have engaged in GBV ([Hart et al., 2017](#)).
- A group of experts summarised the strengths and limitations of the tool. Strengths included:
  - the tool's empirical grounding that included input from subject matter experts and live practice with the tool;
  - the tool situates the individual in a social- and societal/political context;
  - the tool can be used for various types of group-based violence; and
  - the tool demonstrated good inter-rater reliability in its development.
- Limitations included:
  - the individual level factors possibly being too general for a detailed assessment of terrorist risk;
  - the potential to miss relevant pathway offences that do not reach the threshold of terrorist violence; and
  - the need for assessors to be experienced in risk assessment, as the framework is described as "lean" ([Lloyd, 2019, p. 32](#)).
- The MLG is open-access and available to purchase without attending a standardised training course. Cook, Hart and Kropp hold the copyright for the MLG in Canada ([Hart et al., 2017](#)).

Name of Tool	Violent Extremist Risk Assessment 2 Revised (VERA-2R)
Category	Violence Risk (Awaiting Validation)
Author / Publisher	Pressman, Rinne, Duits, and Flockton
Year	2016

### Description

- The VERA-2R is a structured professional judgment (SPJ) tool that aims to assess the risk of violent extremism in those with histories of extremist violence or convictions for terrorism-related offences. It includes 34 indicators related to violent extremism and protective factors, and an additional 11 evidence-based indicators such as mental disorders and non-violent criminal history ([Pressman et al., 2018](#); [Pressman et al., 2019](#)). The latest update to the tool regarding the evidence base for risk factors was in 2018 ([Pressman et al., 2019](#)).
- The VERA-2R focuses on terrorism motivated by extremist ideologies of all types, carried out alone or within a group ([Hart et al., 2017](#); [Pressman et al., 2019](#)). The items of the tool are divided into six domains: (1) beliefs, attitudes, and ideology; (2) social context and intention; (3) history, action, and capacity; (4) commitment and motivation; (5) protective or risk-mitigating items; (6) Additional factors. Items are rated low, medium, or high, with protective and risk-mitigating indicators being scored in reverse with low indicating no change, moderate indicating some positive change and high indicating a significant positive change. The final output uses risk banding as well as a narrative formulation based on a weighting of all of the available evidence, including the findings from the risk and protective indicators ([Pressman et al., 2018](#); [Pressman et al., 2019](#)).
- Assessors integrate all known information from available sources including case file and background reports, interviews, intelligence and security assessments, and court records to determine individual item evaluative ratings. The totality of this information is considered in generating a final judgment relating to the risk of extremist violence ([van der Heide et al., 2019](#); [Pressman et al., 2019](#)).
- The tool is available in English, Dutch, French, and German. Finnish and Swedish versions will follow in the near future ([Pressman et al., 2019](#)).
- The VERA-2R is used in both pre-crime and post-crime situations, and can inform risk assessment, risk management, and intervention decisions ([Pressman & Flockton, 2014](#); [Pressman et al., 2019](#); [van der Heide et al., 2019](#)).
- Writing about the VERA-2 (2012), the developers note the tool should be used alongside, and not in place of, other applicable assessments, which may include general violence risk, intellectual functioning, and personality assessments. The developers express caution when using the tool for individuals under surveillance who do not have a history of convictions for violent extremism ([Pressman & Flockton, 2012](#); [Pressman & Flockton, 2014](#)).

### Age Appropriateness

Youths and adults ([Pressman et al., 2019](#)).

### Assessor Qualifications

- Intended for use by a range of professionals trained in a variety of disciplines (security and intelligence analysts, forensic social workers, police, psychologists, and psychiatrists) in any judicial setting (forensic mental health, court, police, intelligence, prison, prosecution or any other relevant setting). It is preferred that assessors have experience in undertaking individual assessments or are professionally authorised to conduct risk assessments (Pressman et al, 2019).
- Assessors must complete standardised VERA-2R training and demonstrate an understanding of the radicalisation process, violent extremism and terrorism. A follow-up training day every year afterwards is recommended ([Pressman et al., 2019](#)).

### Tool Development

- Items on the VERA (2009) were developed based on the literature related to violent extremism. A revised and updated version, the VERA-2, was developed in 2010 following consultation with and feedback from stakeholders ([Pressman & Flockton, 2012](#); [Pressman & Flockton 2014](#)). The VERA-2 was further updated and revised in 2016 into the VERA-2R. The current VERA-2R was most recently updated in 2018 ([Pressman et al., 2019](#)).
- The structure of the VERA-2R is based on empirically validated SPJ tools designed to assess violence risk in adults and adolescents, including the HCR-20 (Webster et al., 1997) and SAVRY (Borum et al., 2006) ([Pressman & Flockton 2014](#); [Pressman et al., 2019](#)).
- [Beardsley & Beech \(2013\)](#) applied the VERA (2009) to five case studies of high-profile terrorists, using publically available information through an online search engine. The authors found that the VERA risk factors were easily applied to the case studies, across a range of ideologies and regardless of whether the individual acted alone or in a group. VERA items were relevant, thus supporting their inclusion in the tool. The inter-rater reliability between two raters in the study was good, with kappa values >0.76. The authors note that a risk formulation exploring an individual's pathway to violent extremism is necessary for proper weighting of the indicators.
- [Herzog-Evans \(2018\)](#) notes that the protective factors are the inverse of six of the tool's risk factors, and questions why the inverse of the remaining risk factors are not included as protective factors as well.
- [Herzog-Evans \(2018\)](#), examining VERA-2R in a French context, notes that the tool appears not to be suitable for low-level extremists, those who have not yet committed an act of violent extremism, or those who law enforcement are vaguely concerned about but for whom they lack credible evidence of extremism. Therefore the tool's definition of violent extremist or terrorist may have a higher threshold than the definition used in some countries.

### General Notes

- VERA-2R is in use in Europe, North America, Australia, and Asia ([Pressman et al., 2019](#)).
- A group of experts summarised the strengths and limitations of the VERA-2R. Strengths included:
  - the inclusion of protective factors;
  - the tool's applicability to all ideological types;
  - well-described criteria; and
  - that the tool provides a rich source of information for risk assessment and risk management.

Limitations included:

- the time and resources required;

- potential lack of access to classified information for some users; and
- the need for more empirical studies to support claims of content and deductive validity ([Lloyd, 2019](#)).
- [Pressman \(2016\)](#) states that the VERA-2R demonstrates deductive validity (measures factors relevant to a given conviction) when used within a legal system that uses risk factor definitions in line with those used in the tool.
- [Pressman \(2016\)](#) states the tool has high consumer validity, in that experts reported that it assists and supports them in their assessments and professional judgements, and good face validity, in that the tool appeared relevant to users.
- [Pressman & Flockton \(2014\)](#) state that the tool demonstrated good construct validity in an unpublished study in a high-security correctional facility in Australia.
- [van der Heide et al., \(2019\)](#) reported on a study by Van der Heide and Schuurman (2018) that found a Dutch probation service had implemented the VERA-2R but scarcely used it, citing limited practical utility due to capacity issues and lack of information. Similarly, an initiative to adapt and implement the tool in Indonesia was not successful, in part due to the resources required ([Sumpter, 2020](#)).
- There is cyber-version of the VERA (CYBERA), adapted from the VERA-2 and meant to function alongside it as a complimentary tool ([Gilpérez-López et al., 2017](#)).
- The VERA-2R is a restricted-access tool only able to be purchased by individual professionals and multidisciplinary teams carrying out threat assessments, and who have undertaken the standardised training ([Hart et al., 2017](#)).
- Within Europe, the trademark and copyright for the VERA-2R is held by the NIFP, Dutch Custodial Services. Outside of Europe, copyright and trademark are held by D.E. Pressman.