

Name of Tool	Risk for Sexual Violence Protocol (RSVP)
Category	Sexual Offending (Validated)
Author / Publisher	Hart and Colleagues
Year	2003

Description

- The RSVP produces a structured professional judgement assessment which has been guided by psychological theory. It is intended to help evaluators conduct comprehensive assessments of risk of sexual violence in clinical and forensic settings.
- The RSVP is a 22-item structured guide for the assessment of those who have committed sexual offences, divided into five domains: sexual violence history, psychological adjustment, mental disorder, social adjustment and manageability.
- It can be used to identify the nature of risk for sexual violence and to develop and inform risk management strategies. It defines sexual violence as the “actual, attempted or threatened sexual contact with another person that is non-consensual” (Hart et al., 2003).
- The instrument does not employ actuarial or statistical methods to support decision-making about risk, but instead offers guidelines for collecting relevant information and making structured decisions. The manual recommends that identified scenarios should discuss the nature, severity, imminence and likelihood of future sexual violence.
- It is aimed at evaluating men aged 18 and over and may also be used with older male adolescents aged 16 and 17 and adult women with a degree of caution. It is not to be used with children aged 15 and younger ([Hart and Boer, 2010](#)).

Age Appropriateness

18+

Assessor Qualifications

The manual prescribes that training may be completed via self-study or attending lectures and workshops. The authors recommend 16 to 32 hours of training covering the following areas: Knowledge of sexual violence; Expertise in individual assessment; Expertise in mental disorder ([Hart and Boer, 2010](#)).

Strengths

- Provides a means to measure the presence of risk factors
- Identifies factors for treatment
- Provides a checklist for ensuring relevant factors have been considered.
- The primary intended use of the instrument is to allow for forward planning in individual cases, guiding clinical decisions about risk assessment and management. A secondary use is ‘backward-

looking evaluations' to be used as a basis to evaluate the quality of risk assessments completed by other people ([Hart and Boer, 2010](#)).

- The RSVP can be used at various stages of the legal process from sentencing through to parole and in both inpatient and outpatient settings ([Jackson, 2016](#)).

Empirical Grounding



The instrument was developed through literature review, revising guidance and feedback from users. It also underwent field testing of improvements in Canada and the UK ([Hart and Boer, 2010](#)).

Inter-Rater Reliability



a) UK Research

- [Sutherland et al. \(2012\)](#) found fair to moderate levels of agreement in relation to the summary judgement risk ratings and supervision recommendations in a sample of professionals within forensic mental health and learning disability settings. The highest inter-rater reliability (IRR) was observed for professionals who were highly trained in forensic risk assessment. Other factors such as the complexity of the case and the number of training days attended for the RSVP also affected the IRR.

- [Sutherland \(2010\)](#) - for steps 2-3 ('Identification of risk item presence and relevance') and 6 ('Summary Judgements'), the level of overall agreement was .53 (ICC2) amongst multi-disciplinary forensic mental health clinicians.

b) International Research

- Watt and Jackson (2008) - Excellent intra-class correlation (ICC) obtained for 'Presence-Past Ratings' (.95), 'Present-Recent Ratings' (.85), 'Case Prioritisation' (.75) and 'Risk of Harm' (.81).

- [Hart, Michie and Cooke \(2007\)](#) - moderate predictive validity between the 'Case Prioritisation' scores and recidivism ($r = .31$) in a sample of adult males.

- Watt and colleagues (2006) found similar ICCs within the .90s for 'Presence-Past Ratings' (.96), 'Present-Recent Ratings' (.96) and 'Conclusory Opinions' (.92).

- An unpublished doctoral thesis found the IRR of the RSVP was excellent for individual risk factors, summary risk ratings and total scores, ranging from .85 to .96 ([Jackson, 2016](#)).

Validation History

General Predictive Accuracy									
a) UK Research		<ul style="list-style-type: none"> • Darjee et al. (2016) found that in a population that were likely to pose a higher risk of harm than a general sex offending population, they reported case prioritisation was significantly associated with time to sexual offending and time to breach but not time to violent offending. They also indicate that predictive validity is influenced by the level of case management. A decision on predictive validity for sexual offending or other offending is, therefore, unrealistic. 							
b) International Research		None available at present.							

Validation History	
Applicability: Females	
No empirical evidence at present.	

Validation History	
Applicability: Ethnic Minorities	
No empirical evidence at present.	

Validation History	
Applicability: Mental Disorders	
There is a specific section in the evaluation that addresses mental disorder as relate to Diagnostic and Statistical Manual of Mental Disorders (DSM-5) or International Statistical Classifications of Diseases (ICD-10) diagnoses.	

Contribution to Risk Practice	
<ul style="list-style-type: none"> • Darjee et al. (2016) argued that "tools such as the RSVP are good for identifying low risk individuals who do not require risk management". • The RSVP produces explicit guidelines for risk formulation centring on risk scenarios and management strategies (Hart and Boer, 2010). • The instrument showed good concurrent validity with the SVR-20, Static-2002R and the SORAG (Jackson, 2016). 	

Other Considerations

- The RSVP is a derivative of the SVR-20 (Hart et al., 2003: 50), with a greater emphasis on psychological risk factors and developing case management plans. It is based on the sexual offending literature.
- The instrument should not be used to determine whether someone who committed acts of sexual violence in the past nor to estimate the probability that sexual violence acts will be committed in future ([Hart and Boer, 2010](#)).
- [Darjee et al. \(2016\)](#) suggested that the RSVP may be a better tool for assessing the risk of serious harm in individuals who commit sexual offences rather than assessing their risk of sex offending. Findings of their study support the use of the instrument for the minority of those who pose a risk of serious harm. The authors related these findings to the Scottish criminal justice process, findings that the RSVP may be suitable for those being managed at MAPPA levels 2 and 3 and under consideration for an Order of Lifelong Restriction.