

Addendum to HN273's Risk Assessment dated 23/03/2021

1. The addendum risk assessment was commissioned in the light of new material evidence including in relation to sensitive roles held by HN273 and medical evidence.
2. The author of the addendum risk assessment was the peer reviewer of the original risk assessment dated 28/06/2018. The addendum risk assessment was peer reviewed by the author of the original risk assessment.
3. A further meeting was held with HN273 but the medical evidence was not available at the time of the meeting. HN273 stated that he/she would like to assist the UCPI but finds it difficult to contemplate how they would do so due to their medical situation.

Health of HN273

4. The psychological health of HN273 was dealt with in the original risk assessment. HN273 described their psychological health at that time as 'good', but qualified this with their fear that the UCPI would disclose their true identity which increased their anxiety levels. From the medical evidence obtained in respect of HN273 it is clear that their physical and mental health have deteriorated since the completion of the original risk assessment. The medical report details this deterioration and the medication prescribed to HN273.

Conclusion

5. The original risk assessment considered that confirmation of HN273's name would be the most effective way of managing the risk to HN273. It should be noted that the assessment of the increase in physical harm and interference to HN273, if his/her true identity were confirmed by the UCPI, was critical; the highest level available. The likelihood of physical attack and interference was assessed as low, and considered unlikely. In the risk assessor's view this conclusion has not changed.
6. What has changed is the declining health of HN273. The original risk assessment considered the risks from others to HN273 and not HN273's own vulnerability. The medical evidence states that the health of HN273 is likely to deteriorate further as a result of the disclosure of their true identity, to the extent that there would be a potentially life-threatening change to their physical and mental health. An independent assessment of HN273's physical and psychological health could be considered for completeness.
7. The media interest due to HN273 being the author of the SDS closing report was dealt with in the original risk assessment. The new medical evidence may also impact this. The media will likely have an interest in the SDS closing report due to the significance of it, and potentially its author. It is hoped the media would abide by any restriction order if the cipher only was to be disclosed. The risk remains that HN273's identity may be discovered. This is less likely if the restriction order were on medical grounds, and the logistical arrangements of the provision of evidence may assist to mitigate this with some degree of control over the content before being made public.
8. In terms of mitigation, extraction and relocation remain the only option for HN273 and their family should HN273 be identified. The cipher of HN273 is not in the public domain and remains a real option for HN273 should his/her real identity be withheld. Screening should remain a consideration. Evidence in private should remain a consideration as it may benefit HN273 in terms of their well-being.