

Positive risk taking and personalising choice & control

Risk is the probability that an event will occur with beneficial or harmful outcomes for a particular person or others with whom they come into contact.

Positive risk taking is a process which starts with the identification of potential benefit or harm. The desired outcome is to encourage and support people in positive risk taking to achieve personal change or growth.

Positive risk management does not mean trying to eliminate risk. It means managing risks to maximise people's choice and control over their lives. Helping people take positive risks does not override the need for risk assessments where there is a degree of complexity. Practitioners should ensure they use their own agency's risk assessment documents and procedure where vulnerability is identified.

Positive risk taking recognises that in addition to potentially negative characteristics, risk taking can have positive benefits for individuals, enabling them to do things which most people take for granted. In the right circumstances, risk can be beneficial, balancing necessary levels of protection with preserving reasonable levels of choice and control. A balance has to be achieved between the wishes of adults at risk of abuse or neglect, and the common law duty of care.

Risk Assessment and Identification

Risk should be considered and assessed before it occurs. This should include identifying the probability of the risk occurring and the impact if it does. It should be remembered that the impact of a risk can be positive and that not all risks will require management.

Risk assessment practice is dynamic and flexible and should respond to change.

Therefore it will:

- Include the views of individuals and those of their families/carers which should have prominent focus in the assessment, identification and management of risk.
- Have a focus on a person's strengths to give a positive base from which to develop plans that will support positive risk-taking. The strengths and abilities of the person, their wider social and family networks, and the diverse support and advocacy services available to them should inform a balanced approach.
- Be proportionate to the risk identified, potential impact and subject to ongoing monitoring and review.
- Use the principles of multi-agency working in proportion to risk and the impact on self and others.
- Use a person-centred approach to assess, identify and manage risk.
- Ensure that staff have access to appropriate training to support them to promote positive risk taking.

- Ensure that written assessments identify a review date and include the signatures of everyone involved in the assessment.
- Include historical information which is of value in the assessment and management of risk. Historical information should not prejudice a positive approach to risk taking in the future.

Risk management and personalising choice & control

Risk management entails broad range of responses and may involve preventative, responsive and supportive measures to reduce the potential negative consequences of risk, and to promote the potential benefits of taking agreed risks. These will occasionally involve more restrictive measures and crisis responses where the identified risks have an increased potential for harmful outcomes.

Risk management strategies and measures should be personalised to the individual circumstances and context of the adult. Personalisation is not about maximising freedom. As the term implies it is primarily concerned with how to design support arrangements so they are more "personal" - which means they need to fit the person, and be suitable for them.

One of things you can personalise is control itself. Not only can you personalise control but personalised control is sometimes the key to excellent support. Control can be personalised, just like any other aspect of a support service. But it must be justified with due regard for (a) mental capacity, (b) effectiveness, and (c) proportionality.

Personalised approaches to adult safeguarding are not just about gaining and focusing on the desired outcomes of the adult, although this is important. It is also about ensuring any support the adult needs to manage risk of abuse or neglect - including measures that may need to restrict or control an adult's choices and freedoms - is tailored to their individual circumstances, and takes account of their history, preferences, culture and values.

Principles

A number of important issues need to be considered when carrying out risk assessments and risk management:

- a) The identification, assessment and management of risk should promote the independence and social inclusion of adults with disabilities, older people and people with health conditions and mental health problems.
- b) Risks change as circumstances change and should be reviewed on a regular basis.
- c) Risk can be minimised, but is unlikely to be eliminated.
- d) Information used and recorded will be as comprehensive and accurate as possible.
- e) Identification of risk carries a duty to do something about it, i.e. risk management.

- f) Involvement of adults who use services, their families, advocates and practitioners from a range of services and organisations helps to improve the quality of risk assessments, risk management and decision-making.
- g) 'Defensible' decisions are those based on clear reasoning, with due regard to appropriate legislation, policies and procedures. They demonstrate clear and precise record keeping and, where possible, signed consent.
- h) Risk-taking should involve everybody working together to achieve positive outcomes.
- i) Confidentiality is a right, but not an absolute right and may be breached in exceptional circumstances when people are deemed to be at serious risk of harm or it is in the public interest and only where the benefits of doing so, supported by meaningful safeguards, clearly outweigh the risks of negative effects.

Case Study

This case reflects the importance of reasoned judgement; empowering Alan to make decisions independently.

Alan is living with dementia and has difficulties with his comprehension and memory. Alan disclosed that his son had his bank card and PIN number and he trusted his son to do what was right with his money, but his son was demanding money from him. Whilst there was no evidence to suggest Alan's son had acted fraudulently, some additional checks were carried out to ensure his financial position was not at risk.

Both Alan and the social worker agreed together that he needed to obtain a greater understanding of his own finances. The social worker investigated whether Alan's assessed care contribution was being paid, and subsequently discovered Alan owed money to the local authority which amounted to thousands of pounds.

It was important that Alan was not placed at continuing risk of abuse and the required actions completed in a timely manner. There was evidence to suggest that Alan's finances were being mismanaged by his son yet the fact remained that his son still visited regularly and provided social and emotional support.

At this stage Alan had not been made aware of the debt he owed to the local authority and the social worker wanted to ensure he was aware of his own financial circumstances. After speaking to Alan about the debt he was in, he was visibly distressed. Together a decision was made to write a letter to his bank requesting copies of his bank statements to be sent directly to the address of his residential home. Alan understood this would grant him access to additional information about his finances. Once the bank statements arrived Alan and his social worker went through his transactions and identified Alan's son was using his money like it was his own. Alan wished for further action to be taken in respect of this and an agreement was made to work with him to make his finances safe. However, Alan also wanted to give his son another chance to do right by him.

Given the financial mismanagement taking place and Alan's capacity to make decisions about his financial arrangements, the social worker was keen for a mental capacity assessment to be completed. The purpose of this was to determine his capacity to make the decision regarding whether he wanted his son to continue to manage his finances on his behalf. Alan was unable to understand the salient information required to make the decision and as a result Alan was unable to weigh this up as part of the decision making process. However, on both occasions Alan appeared somewhat shocked and upset when informed he was in debt as a result of his son mismanaging his finances.

Due to Alan lacking capacity it was appropriate for Alan to have some impartial representation and an Independent Mental Capacity Advocate (IMCA) was appointed. Alan was in agreement that the police should be informed about these safeguarding matters. At this stage, Alan's son had not been involved in the process, to avoid jeopardising any police investigations.

The police were part of the safeguarding strategy discussion and investigated further by contacting the son. They decided not to charge him as the action taken was deemed sufficient to achieve the outcomes Alan wanted. These were to make his finances more secure and to give his son another chance in order to maintain the relationship. Police action is an option to consider in the future should concerns arise again and there will be a police log of this first concern raised with them.

The IMCA's report for Alan stated that in order to prevent Alan's finances from further risk of misuse the local authority should support him with his financial management and make decisions in his best interests. The appointeeship team were involved to take over responsibility of Alan's finances and displace Alan's son. Alan was very pleased with the outcome; he was happy that his money was safe and that he still got to see his son. It was positive to know that Alan's son, even though he no longer managed his father's finances, continued to see Alan regularly and maintained a positive relationship with him.