Working with Risk
SKILLS FOR CONTEMPORARY SOCIAL WORK SERIES

Tony Evans and Mark Hardy, *Evidence and Knowledge for Practice*
Andrew Hill, *Working in Statutory Contexts*
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Working with Risk
Skills for Contemporary Social Work

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Risk assessment and management are core issues in social work across a range of settings and contexts. Responding to the risks posed by others, reducing risks to vulnerable persons and managing risks to themselves are all in a day’s work for busy practitioners. Managers and practitioners are routinely confronted with risk decisions, and such decisions are often central to the allocation of resources or the choice of interventions (Kemshall 2002a). Risk is a complex practice issue, and there are different views on the nature of risk, and how to assess and manage it effectively. This chapter will explore the nature of risk, the historical roots of risk as a concept and how it is best understood for those working in social work.

What is Risk?

Risk has been called the ‘world’s largest industry’ (Adams 1995: 31). We are faced with a bewildering array of risks in our everyday lives, ranging from health risks due to eating the ‘wrong foods’ to flood risks caused by climatic change. We are constantly told about such risks through the media, and constantly urged to be more aware and to ‘manage’ risk. At the turn of the century, one journalist expressed our preoccupation with risk in the headline: ‘Warning: You’re Risking Death by Being Alive’ (Thomson 2000: 21). Thomson painted the twenty-first century as a risky place, noting risks to newborn babies arising from their mothers’ kisses, to vaccines, to cot death, food risks and paedophile abductions on the way to school. As she put it, being a mother is a risky business, and
‘every day there is another reason to worry.’ Some risks we choose to accept (those associated with travel are readily accepted as the ‘price’ we pay for moving around); some risks we actively seek (like gambling or bungee jumping for the thrill); some we seek to avoid (like becoming the victim of crime). Other risks are beyond our personal control, for example those associated with nuclear power plant discharge, such as the Fukushima disaster in Japan, or acid rain. These are risks emanating from far away and often caused by others we do not know or control, or by the failure of regulatory systems set up to protect us.

The word ‘risk’ can also have different meanings. To some ‘risk’ means thrill, or the chance of gaining a reward for minimum effort (gambling), and risk-taking is an acknowledged and usually valued feature of entrepreneurship and venture capital (Higgs 1931), at least until the excesses of the global financial crisis of 2008. Increasingly, however, ‘risk’ has been linked to danger, peril and hazard (Oxford English Dictionary 2012) and used almost entirely with negative connotations. One consequence of this has been a developing culture of risk aversion (Power 2004), reflected in a precautionary or ‘better safe than sorry’ approach to risk. This in turn can lead to defensive practice, and organizational cultures that are focused on risk avoidance and blame.

The framing of risk as danger has a long history, and the English term ‘risk’ came into common usage in the seventeenth century with the development of marine insurance. The rise of the slave trade and the extensive shipment of cotton led to formal calculations of safety levels on shipping routes, in effect calculating whether a ship was likely to return to port safely or not and insuring appropriately against any loss (Kemshall 2003). Lloyd’s of London famously started this business, and utilized statistics, especially on death rates and shipping losses, to produce actuarial tables of risk (Hacking 1987). The insurance industry still operates in this way today. In 1762, Equitable Life set up the first life insurance and again drew on actuarial tables of death rates across the population as a whole to ensure calculations of life expectancy; life insurance policies were calculated and costed accordingly. The Napoleonic Wars saw further interest in life insurance, particularly for ‘soldiers of fortune’ selling their services. Many came from Scotland, and life assurance was sought for the widows and orphans that might be left behind. The company we now know as Scottish Widows has its roots in this era. By the nineteenth century, insurance was a common industry, and the notion of risk as a probability calculation based on tables of data was firmly
embedded (Hacking 1987, 1990). Probability and therefore prediction of risk were linked; risk could be known and assessed if only the right tools were used (Daston 1987).

The late nineteenth and early twentieth century saw the extension of insurance and probability calculations of risk into social life. For example, mutual societies enabled the working man to insure against accident or illness, and such societies were common in coal mining areas, extending later into many areas of industrial life. The Co-operative Society was one of the largest mutual societies and has its roots in the heavy industries of the north of England. The notion of pooling resources to deal with individual risks of misfortune was strongly embedded in the British welfare state for much of the twentieth century, and across other anglophone nations (Kemshall 2003). Personal risks and misfortune were not merely a matter for the individual, but were seen as part of the collective state response, for example through welfare benefits for those too ill to work.

By the late twentieth and early twenty-first centuries, actuarial or probability calculations of risk had become common across many aspects of social life, and formalized risk assessment tools began to play a key part in assessments of welfare entitlement, in social work, social care and crime management policies (Kemshall 2002b). Interestingly, as techniques for risk assessment improved, the idea of a collective response to individual risks began to wane. The burgeoning costs of welfare across all the anglophone countries resulted in aggressive social policies to reduce the size and responsibilities of the state, a situation given considerable impetus by the global financial crisis of 2008. Risk and responsibility became entwined, with much social policy placing responsibility for assessing and managing risks onto the individual. Personal misfortune became exactly that, and citizens are increasingly expected to foresee and manage their own risks (e.g. saving for old age, insuring against unemployment). In social work, risk has come to predominate as a way of categorizing users, cases and responses, and social work’s focus is often on those citizens who are deemed to take risks irresponsibly, or who pose risks to others and therefore require managing (Kemshall 2010a).

Understanding Risk in Social Work

We are all faced with numerous risk decisions in our personal lives, but professional decisions about risk are different. As Carson and
Bain put it, ‘professional risk-taking is undertaken for the benefit of others from a duty to assist them’ (2008: 31). This is the underlying imperative for risk decisions in social work.

Risks in social work can be separated into two broad categories:

- those risks which people pose to others; and
- those risks to which people are exposed, in other words, people who are vulnerable to risk. (Kemshall 2002a: 124)

One of the most obvious social work areas in which people pose a risk to others is in child protection. Parents and other adults may pose a range of risks to children, ranging from physical risks, sexual abuse, neglect and risks arising from particular adult lifestyles, such as alcohol or drug use. In these circumstances, workers will not only focus on the needs of the child but will be concerned to accurately assess the type of risks posed; how likely they are to occur, when and how; and what interventions can be put into place to reduce the risk. In such situations, the rights of the poser of risk can be limited in the interests of protecting others or of preventing further risks.

Assessing vulnerability to risk is equally relevant to a number of service-user groups and to a number of settings, for example, care of older persons, work with vulnerable adults, support for young people leaving care. What is critical to assessments of risk in this area is: a clear focus on the risks the person is exposed to; how they might impact on the person and with what consequences; whether such risks are acceptable or not; what risk reduction strategies can be used and how these might impact on the quality of life and autonomy of the person and with what benefit(s); and how risk management can be balanced with the promotion of autonomy, quality of life and individual rights (Kemshall 2002a: 125).

However, in daily practice, such neat distinctions don’t always apply. Some service users will fall into both the categories of posing risk and being at risk. For example, young people leaving care may commit offences and present risk to others, but will also be vulnerable to abuse from older adults, and at risk because of poor accommodation, lack of employment and lack of support and care. A number of high-profile cases have also highlighted the vulnerability of mentally disordered persons who have committed serious offences. The inquiry by Blom-Cooper, Hally and Murphy (1995) identified how failures in community care contributed to the escalation of risk in the case of Andrew Robinson and his subsequent killing of Georgina Robinson. The inquiry noted the failure of treatment, and the
failure to respond to Robinson’s deteriorating mental health and the
concerns of his family and friends. Andrew Robinson had a history
of mental illness since 1978 and had been in Broadmoor Special
Hospital following a conviction for possession of a firearm with
intent to endanger life. Robinson presents as both vulnerable and as
a potential poser of risk to others. The case also illustrates how the
risks that a person is exposed to can exacerbate the risks they pose
to others. In such cases, it is important that the practitioner assess
both types of risk – if the focus is only on vulnerability, the risks to
others are overlooked; if the focus is only on posing a risk to others,
then key issues in the person’s life will remain unaddressed and these
may heighten risk to others over time. Once the practitioner has
assessed risk and vulnerability, the important next step is to consider
how they interact, what will exacerbate risk and what might mitigate
those risks.

Addressing these difficult and challenging risk issues is the focus
of this book. The emphasis is not on risk assessment as a ‘tool’ or a
process, but on risk assessment as a decision and, in many cases, risk
assessment as a series of decisions. Complex, significant, life-changing
decisions require skill and competence, and acquiring skill and build-
ing competence are key themes in this book. While bureaucratic and
administrative procedures attempt to ‘tame chance’ (Hacking 1987),
and a plethora of structured risk-assessment tools have been devel-
oped, risks are not always assessable through formal probabilistic
assessment tools, due to lack of knowledge, and are subject to a
number of ‘it depends’. Social workers have to operate in a ‘climate
of uncertainty’, in which a proportion of decisions will have poor
outcomes. Practitioners have to make decisions in situations of stress
and under the spectre of potential blame, and in contexts where
service-user views of risk and those of workers may be at odds. As
Baker and Wilkinson put it: ‘Practitioners and managers are faced
with the challenge of making demanding decisions about risk with
the added pressures of working in a climate of limited resources and
intense media and political scrutiny’ (2011: 13). This book aims to
help both those training to become social workers, and those already
in the profession to make those demanding decisions.

Structure of the Book

It is no accident that the word ‘skills’ features in the subtitle of this
book. Acquiring skills through reading is of course difficult, and
social workers can only improve their practice through practising and reflecting. Through the use of case studies and reflective exercises, this book fosters such an approach. The book attempts to follow the ideal practice journey of risk assessment, formulating risk plans and comparing options, implementing risk-management plans, reassessing and reflecting on impact and outcomes, and revising plans where appropriate. This cycle requires key tasks to be performed, including preparation for the assessment task, information gathering, analysis of what is found, risk-management planning, delivery as intended, and review, all of which should be supported by thorough recording. This is expressed in Figure 1.1.

The book focuses on this critical process, with chapter 2 introducing the assessment procedures, with an emphasis on purposeful information gathering and in-depth analysis. Chapter 3 looks at the exercise of ‘good judgement’ and argues that informed, balanced and critical reasoning are essential to sound decision making. The pitfalls of risk-decision making, for example those created by bias and discrimination, are explored, and challenging risk decisions are also recognized as ones which can lead to defensive practice. Chapter 4 examines risk planning and management and argues that effective plans must flow from a balanced, evidence-based risk assessment. Importantly, the chapter focuses attention on the identification of desirable risk reduction outcomes, and how planning must demonstrate how these are likely to be achieved. Plans also have to be

![Figure 1.1 The cycle of working with risk](image-url)
delivered and reviewed, but rightly the chapter encourages readers to consider the requirement for flexibility in the light of change and the dynamic nature of risk. Contingency planning and mechanisms for monitoring implementation are required, and plans require review in order to establish that they are working and delivering desirable outcomes.

Risk assessment and management also present key dilemmas and challenges for social workers. These are areas of work particularly prone to ethical dilemmas and can present tensions between ‘social control, social care, social justice and social change’ (Barry 2009: 111). Chapter 5 examines a range of such tensions and likely challenges for social workers and presents a number of exercises to encourage the reader to rehearse and reflect on how such challenges can be faced and resolved. The discussion is informed by contemporary ethical codes in social work, but the limits of such codes in resolving real-life ethical dilemmas are acknowledged.

Review and evaluation of risk management is critical, but this can involve more than the review of individual plans. Chapter 6 locates review and evaluation within the wider context of risk policies, procedures and systems, and looks at the role of managers as well as practitioners in delivering effective and balanced risk management. Learning from both good practice and risk failures is seen as critical for improving performance, and the chapter also examines how quality assurance can be improved.

Decisions about risk also take place under conditions of uncertainty. We can never truly know all there is to know, and decisions do not take place under ideal conditions (for example, there are almost always time pressures and resource constraints). These conditions can often make us feel anxious and stressed. It is therefore important that we can manage these impacts on ourselves, and chapter 7 examines in some detail how best to ‘manage self’ within the demanding organizational context of social work. Reflective practice is seen as one key technique for helping social workers deal with a demanding and stressful job, where blame is often only one decision away. To assist readers with critical reflection, the reader is invited to engage with a range of activities, case studies and reflective exercises throughout the book. These can be used on social work training courses, in work settings to review practice, and with social work teams for staff development. Where relevant, feedback is provided, and activities are boxed and numbered for ease of access.
Finally, the conclusion recognizes that risk decisions are often life-changing ones and seeks to reiterate a number of key themes and good practice messages from the book. Working positively with risk, and in an informed and balanced manner, is seen as critical. This book does not have all the answers, but aims to help social work practitioners to make positive, thoughtful, robust and ethical decisions about risk.
Risk assessment is not an end in itself; however, it must be purposeful. Figure 1.1 made clear that information gathering and analysis at the outset of any case should guide service delivery. As planned-for services are delivered, the impact of any actions taken (and of actions not pursued) should be reviewed, contributing to a developing picture and often necessitating new information gathering and analysis.

This purposeful risk-assessment practice will be built on a range of interrelated and mutually dependent skills and knowledge, including the practical use, in context, of relevant legislation and policy. Communication skills are important for example, but effective communication may also require skills in managing conflict and challenge (Keys 2009b), so that again the practical application of skills in context is central.

So how effectively have relevant risk-assessment skills and knowledge been applied in social work and if not always effectively, why not? There have been well-documented and publicized concerns about the effectiveness of the risk-assessment and management process in social work, particularly in relation to child protection (Laming 2003, 2009) and for those working with the mentally ill (NHS London 2006). While the hope is always that inquiries and investigations into practice will improve outcomes, they have not always had the intended effect. Responses by commentators and policy makers can be polarized; for example, Maden (2011) suggests that the debate about violence and mental health has been characterized by extremes, with focus on assaults by the mentally ill and concerns about their human rights being unhelpfully seen as mutually exclusive. Practitioners will find it harder to exercise skills with