

HARINGEY LOCAL SAFEGUARDING CHILDREN BOARD RISK MANAGEMENT STRATEGY

1. Introduction

- 1.1 This strategy addresses the way in which risk is managed by children's agencies within Haringey. All assessments of children's circumstances are assessments of risks – they may conclude that there are no risks to address but they should all assess risk. It is right therefore that a coherent approach is set out and endorsed by the organisation and its partners through the LSCB.
- 1.2 This strategy starts from the understanding that risks to children exist – the job of social care (as the lead agency in statutory risk assessments) and partners is to understand and manage that risk effectively. Risk management does not mean risk taking, which exposes children to avoidable injury and harm, nor does it mean risk aversion which can lead to an overly interventionist role in the lives of children and their families. Risk management means understanding and analysing the risks children face and actively managing them to reduce their impact. It means balancing the risk of non-intervention with the risks associated with intervention.
- 1.3 The strategy takes as its underlying principle that it is the role of children's agencies to enable children to live safely at home in their families wherever possible. Therefore, input into families has to focus on identifying, reducing and managing risk to ensure children's safety at home. Where that is not possible, or cannot be made possible in a timeframe consistent with the needs of the child, then intervention needs to be purposeful and focussed.
- 1.4 Child protection work is essentially an inter-agency function – children can only be kept safe through agencies working together effectively and efficiently. The Police and various aspects of health provision share that responsibility with children's social care. Children's social care work is devoted to the management of risk; it is a risk management agency. The Metropolitan Police Child Abuse Investigation Command has developed an approach to risk management known as 'CRAM' – the Children's Risk

Assessment Matrix. The approach set out in this strategy is entirely consistent with CRAM but equally can be applied to those cases where social care remains the single agency involved.

2. Some Dangers in Managing Risk

2.1 Much has been written about some classic difficulties in child protection work. Largely they are a consequence of risk not being properly understood and managed. For example:

- *Rule of optimism* – comes as a result of not properly understanding the risks children face and results in leaving children in places of danger;
- *Rule of hopelessness* – a sense that no change can be arrived at and staff give up seeking positive changes. This can result in avoidable interventions or children left at risk;
- *Incident-led responses* – seeing only the presenting issue and not the history or context;
- *Assessment Paralysis/A focus on the adults* – staff aligning themselves with and seeking to assist adults and losing sight of the child. An accurate assessment of risk well managed ensures the needs of children are kept at the heart of the work;
- *Assessment Distortion* – a position adopted by a multi-agency network that is led by one agency to such an extent that other and potentially opposing views are not voiced or heard;
- *Inter-Agency communication failures* – key information not being shared either at all or in a timely manner;
- *Procedural Compliance* – a view in child protection work that risk cannot only be managed but be eliminated through an increasing adherence to and reliance upon procedures. Inherent within this approach is a focus on maximising compliance – from staff and from systems – such that all risk is effectively managed out of the system.

2.2 None of these positions are balanced and **balance** is essential to the effective management of risk. A degree of optimism is important in working with vulnerable families, so is a degree of scepticism; engaging with adults is absolutely unavoidable and an adherence to set procedures is necessary to avoid an anarchic response. The views of all agencies, particularly where they diverge, should be heard and balanced to arrive at an informed position. The key is that these, and other considerations, are well balanced and that the development of assessments, the gathering of information and the exploration of new hypotheses allows for the respective balance between these themes to be managed and amended as required.

- 2.3 This balanced position is often a difficult and challenging one to arrive at - it is a matter of fact that safeguarding children is a complex and multi-faceted task. It is managing this complexity and practitioners being able to adopt this balanced position which is what is meant by '**authoritative practice**'. One way authoritative practice can be evidenced is by social workers and fellow professionals attaining and holding that balanced position and being able to shift that position to reflect changing circumstances for children – there will be times when an optimistic and supportive position should take precedence and others when a more explicit scepticism and mistrusting approach is warranted.

“Authoritative practice means that professionals are aware of their professional power, use it judiciously and that they also interact with clients and other professionals with sensitivity, empathy, willingness to listen and negotiate and to engage in partnerships. They respect client autonomy and dignity while recognising their primary responsibility is the protection of children from harm and the promotion of their well-being.”

adapted from Jane Gilgun

- 2.4 It is this ability to shift perspective whilst hanging onto the centrality of the safety of the child that is a key element in authoritative practice and what is meant by the phrase - '**an assessment is an on-going process not a one-off event.**' (Key message from Haringey Serious Case Review, 2009).

3. Assessing Risk

“The challenge is not in finding the answer – it’s in identifying the next question”

- 3.1 Eileen Munro, in her work, 'Effective Child Protection'¹ states that in order to manage risk, there is a need to identify:

- (i) What has been happening
- (ii) What is happening now
- (iii) What might happen
- (iv) How likely it is
- (v) How serious it would be
- (vi) A combination of seriousness and likelihood leading to an overall judgement of risk

- 3.2 It is self evident that risk can only be properly managed if it is properly understood. That means assessments must be focussed on identifying and quantifying risk – Section 47 Children Act 1989 sets out the circumstances

¹ Munro, Eileen (2008) **Effective child protection**. Sage Publications, Los Angeles, USA. ISBN 9781412946957

under which an investigation into specific incidents or concerns should take place, but **all assessments are assessments of risks**.

- 3.3 'Assessment' is the purposeful gathering and analysis of available information. In the context of child protection, assessment should underpin professional judgements to inform and determine the level and type of intervention with vulnerable children and young people who may have been harmed or are at risk of harm.
- 3.4 Assessment of risk in child protection must consider both *past* and *present* factors in order to identify future risks to a child or young person. One of the dangers identified above is that of only seeing risks in relation to a specific and presenting incident rather than understanding what has already happened to affect the child. Typically, for example, children will have lived with incidents of domestic violence for some time before coming to the attention of the agencies and not to understand that history will seriously underplay the harm to the child. A key part of understanding the history is to inquire into the history of the adults/parents involved – their backgrounds and experience of being parented will be crucial to an understanding of their current behaviours.
- 3.5 Interventions should not be delayed until the end of an assessment, but should be determined in accordance with what is required to ensure a child or young person's safety, taking account of any indications of accelerated risks and warning signs. The type and level of intervention, irrespective of when it is made, should always be proportionate to the evidenced circumstances and risks to the child/ren.
- 3.6 There is no definitive, fail-safe method of predicting risk of harm to children and young people. Risk assessment matrices and check lists can be helpful in guiding understanding but they cannot be absolutely relied upon to provide definitive answers to levels of risks faced by children. For example, the risk assessment matrix developed by Barnados to better respond to domestic violence is a very helpful tool in enabling practitioners to more fully understand the risks to women and children and to help prioritise the seriousness of the situation before responding. What it cannot do and does not purport to do is to predict future risks or events – ultimately it can produce an evidence base to help inform future interventions, but that still must be driven by professional judgement. **Risk exists on a continuum rather than being a set score on a grid or matrix** and it can and does change over time dependent on a whole range of different factors.
- 3.7 Good risk assessments are characterised by certain factors – they construct a coherent story about the child's circumstances; they appreciate that there will be ambiguity and uncertainty about some matters; they have been constructed through the testing of hypotheses and a curiosity that

sees people in their contexts; they are considered and thoughtful and finally they allow for and enable change.

- 3.8 Haringey's Local Safeguarding Children Board agreed a '**Multi Agency Risk Assessment: Practice Guidance**' in July 2009 which guides the work of the practitioner(s) in assessing risk. It needs to be read and understood alongside this strategy. (See 5 below)

4. Managing and Responding to Risk

- 4.1 Having arrived at an accurate and comprehensive assessment of risk, the task then becomes identifying the 'right' response to manage and reduce that risk.
- 4.2 Within the CRAM model referred to above, the Police have developed the notion of 'RARA' to identify the appropriate response to the assessed risk – Reduce, Accept, Remove and Avoid. The model set out below is entirely consistent with this approach and describes a similar and a simple approach to help judge how to measure and then respond to identified risks.
- 4.3 The key to this model is to identify and quantify '**likelihood**' and '**impact**'. Staff, managers, case conferences and other professional groupings are required to be specific about the **risks** (as opposed to **concerns**) that a child is facing and, in identifying them, setting out both the potential for those risks occurring and the impact upon the child if not managed or addressed. This process must be informed by accurate assessment, current research, expert opinion as necessary and supervisory and other scrutiny. The likelihood and impact judgements must be both transparent and defensible and should, wherever possible, be arrived at in conjunction with the family and be thoroughly informed by either the views of the child and/or an understanding of the circumstances of the child.
- 4.4 Effective risk management is essentially a reflective process – reactive risk management almost always means overly hasty and ill thought through actions will follow. Clearly some risks are such that immediate action is required – however no risk is so pressing that there is not room for some thought and reflection before proceeding and the evidence about the damage done to children through over hasty intervention is compelling.
- 4.5 An assessment of and response to risk must clearly separate out **risks** – which are matters that are causing or could cause **significant harm** to a child – from **concerns**. Concerns are about a child's quality of life which could be improved by some purposeful intervention. If possible they should be addressed and resolved. However, the reduction of concerns is not the same as lessening the risk to a child and it is crucial this separation is kept by practitioners and managers alike. Section 6 below sets out some tools and

aides to risk assessment which will help generate a factual and detailed account of the risks children face.

- 4.6 Risk assessments must separate facts from opinions – one of the key aspects of supervision and line management is to help practitioners separate out their observed evidence of risk from their opinions and help staff to arrive at professionally informed judgements.
- 4.7 What is particularly important in the management of risk is that professionals are also weighing up the risks associated with the intervention and balancing those against the current risks to the child. They must address both the needs of the child in the here and now and weigh up the likely impact both of intervention and non-intervention. **Risk management must relate both to the immediate problem and be forward looking.**
- 4.8 Child Protection Plans need to separately identify risks and concerns. It is the identification of risk that informs the decision to construct a plan just as it is a judgement that those risks have diminished or disappeared that informs the decision to cease the plan. The Child Protection Plan must be constructed on SMART lines, with clarity about who is responsible for what, when, how and why.
- 4.9 The Child Protection plan must identify:
- Who is at risk?
 - From whom or from what?
 - What specific actions will reduce/eliminate those risks?
 - Who will lead on them?
 - How agencies can measure reduction in risk?
 - Within what timescale are these changes to be made?
 - What are the contingency plans?
- 4.10 It then becomes the responsibility of the core group to define the detail of the Child Protection Plan and ensure that work between conferences is purposeful and focussed and that all agencies and parents are maintaining good communication to ensure the plan is delivered.
- 4.11 When the judgement is that cases need to move into the Court arena, the detailed intervention or Child Protection Plan becomes the outline of the local authority position. It will form the basis of the letter before proceedings and the beginning of discussions between the parties, setting out exactly what the concerns are and what the declared expectations on parents are and the court and guardians can more easily judge the reasonableness of that position. This approach therefore allows for there to be a very direct lead in to the Public Law Outline (PLO) process.

5. **Risk Management – Assessment Practice Guidance (Haringey LSCB July 2009; reviewed July 2010)**

- 5.1 This guidance usefully helps professionals to construct an assessment of risk. The guidance forms the basis of LSCB risk assessment training.
- 5.2 One of the key conclusions of that guidance is as follows:
“By identifying risks, vulnerabilities, and protective factors, a full and balanced assessment provides agencies with:
- *An evidential basis on which to proceed and justify decisions and actions*
 - *A platform for future planning*
 - *A framework for managing and minimising risks*
 - *A clear idea of what needs to be done to protect the child (and how)*
 - *A means against which achievements (or otherwise) can be measured”*

6. Aides to Risk Assessment

- 6.1 Within this broad strategic framework and the assessment guidance, there are a number of more detailed and readily available tools designed to help understand levels of risk faced by children and to help identify the right response to that risk.
- 6.2 The **London Child Protection Procedures** and the **Haringey Children and Families Procedures Manual** (both available electronically through Harinet for Local Authority staff) set out national and local obligations and expectations and are designed to ensure statutory expectations and accepted notions of best practice are met.
- 6.3 Ready **access to all managers** in all the services is part of the culture in Haringey. Front line staff need to feel able to seek guidance and advice as required and at times when it is most needed. The delivery of a front line service to vulnerable children is our core activity and all managers are committed to ensuring that that work is carried out to the very highest standards and will support staff to ensure it is.
- 6.4 That said, the provision of regular and structured **supervision** is the core process by which staff are managed and where risks are identified, explored and responded to. The construction of an effective relationship between supervisor and supervisee will enable social workers and other front line staff to be able to voice doubts and concerns, reflect on their practice, identify any of the distorting factors identified in 2.1 and think what they are bringing to bear to any given situation – and from the explicit identification of these themes comes safe practice. The procedures set out the service’s expectations of supervision and much training and development work is in place to ensure it is an effective process in the

borough. The LSCB has agreed a set of supervision standards applicable to all agencies regardless of the specific supervisory cultures and processes within their disciplines.

6.5 In line with 4.7 and 4.9 above, the **Child Protection Plan** and **Care Plan** are key documents setting out identified risks and how they should be managed and practitioners and their managers should be actively using them to steer their day to day activity. Equally, **core groups** are the key arena for ensuring risks are being well managed by the partnership and **review conferences** the arena to review the extent to which the protection plan is effective in managing and reducing risk.

6.6 A number of **detailed tools** are available to help practitioners identify the extent of risk to a child. As stated in 3.6, these actuarial approaches to risk identification are helpful as long as their limitations are understood. The completion of questionnaires may help practitioners identify the details of a child's experience and where specific areas of risk lie – what they cannot do is quantify that risk and lead to defined responses. That requires the professional judgement of staff, in discussion with partner agencies and with parents and other family members. However, these tools are helpful in being clear what the experiences of children and their parents are. Their use will ensure that all areas are considered and may often ensure staff explore areas they might not have ordinarily considered. The tools include:

- The Barnado's Domestic Violence Risk Assessment Matrix
- The Police CAIT CRAM
- The DUST screening tool
- The Family Pack of Questionnaires and Scales produced by the Department of Health, which includes:
 - Strengths and Difficulties Questionnaire
 - The Parenting Daily Hassle Scale
 - Home Conditions Scale
 - Adult Well Being Scale
 - Adolescent Wellbeing Scale
 - Recent Life Events Questionnaire
 - The Family Activity Scale
 - The Alcohol Scale

6.7 It is expected that supervisors, Child Protection Advisors and others are familiar with these tools and are able to recommend their usage as appropriate in supervision, in case conferences to ensure that informed assessments are arrived at and that all risks have been properly explored.

7. Conclusion

7.1 Haringey's LSCB and the Children's Trust, through the Child and Young People's Plan and the Safeguarding Action Plan, explicitly commits

agencies in the borough to work towards the generation of excellence in service provision to children and families. There is a clear and realistic appreciation that the criticisms that emerged as a consequence of the death of Peter Connolly were well-founded and required sustained and substantial attention.

- 7.2 The progress made by agencies towards excellence will be specifically judged against how well they serves the most vulnerable and those children facing the greatest risks. This strategy sets out an overarching approach to those children and will be used to inform future training programmes, service investments, practice developments and policy and procedural guidance. It recognises that protecting children from harm is a complex and difficult task and requires all involved to approach the work from a similar position and with a clearly shared understanding about how children are best protected.

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