

# ***Getting it right for every child***

## **Programme 3**

### **Day 2**

- 9.00 Registration & Refreshments
- 9.30 Outstanding questions from Day 1  
Additional information for Case Study
- 10.30 Comfort Break
- 10.50 Risk Assessment & Management in GIRFEC
- 11.30 Resilience Matrix
- 12.00 Child's Plan
- 12.30 Lunch Break
- 1.30 Constructing a Child's Plan
- 2.45 Comfort Break
- 3.00 Review of Exercise
- 3.30 Return to Concerns & Myths  
Return to Expectations of the Training  
Evaluation of Day 2
- 4.30 Close of Day 2

## LESSON PLAN

<b>GIRFEC Training Programme</b>	<b>Lesson Plan No. 5</b>	
<b>Lesson Title: Understanding Risk Assessment &amp; Management in GIRFEC</b>		
<b>Duration: 10.50 – 11.30</b>	<b>Trainers involved: Highland Pathfinder Team</b>	
<b>Aim:</b> Staff will successfully understand Risk Assessment & Management in GIRFEC and reflect into their personal practice.		
<b>Outcomes:</b> <ul style="list-style-type: none"> <li>• Understand the impact of risks on children’s development</li> <li>• Understand the GIRFEC risk assessment model</li> <li>• Understand how risk assessment relates to the assessment and planning process</li> </ul>		
<b>Time</b>	<b>Content</b> including teaching methods and key learning points to be covered	<b>Training resources</b> including audio visual aids, handouts and exercises
10.50	Tutor input – using slides to discuss Risk  Reflect the model back to the DVD & SHANARI	<ul style="list-style-type: none"> <li>• PowerPoint Presentation</li> </ul>

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Highland Pathfinder  
Programme 3 Core Training  
Day 2

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### Session 5 : Risk Assessment & Management in GIRFEC Learning Outcomes

Understand

- the impact of risks on children's development and well-being
- the GIRFEC risk assessment model
- how risk assessment relates to the assessment and planning process

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### What do we mean by risk?

- Hazard;
- Danger
- Chance of loss or injury
- Degree of probability of loss
- Person, thing or factor likely to cause loss or danger
- (v) to incur chance of unfortunate consequences by (doing something)

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## Why is risk assessment important?

- There are many ways that a child can be placed at risk:
- Pre- birth
- Early years
- Middle Years
- Adolescence

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## Risk

- Immediate, short term & long term
- Practitioners ALWAYS need to consider if a child is at risk of immediate harm in any way.
- All agencies have a part to play in ensuring children's safety and assessing and managing risk.

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## Risk Assessment Framework

- Systematic Practice Model  
*Developed by Professor Jane Aldgate and Wendy Rose – Open University*

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## How do we measure risk?

### Three main ways to measure risk

- Unstructured clinical assessment
- Actuarial approaches
- Structured professional judgement (incorporating a resilience/signs of safety approach)

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## Systematic Practice Model

- Brings together best of different approaches
- Combines knowledge, theory and best practice
- Uses scales/ tools where appropriate
- Immediate safety issues prominent but long term risk factors taken into account
- Reinforces principles and practice of *Getting it right for every child*

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## Aspects of GIRFEC Practice Framework used to assess and manage risk

1. The well-being indicators
2. The 'My World' Triangle
3. The Resilience Matrix
4. The Child's Plan

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## Using the well-being indicators in assessing risk

### Step 1. Identify risk when logging concerns

Also used later when

- Identifying goals that need to be addressed in the plan
- Reviewing outcomes against the well-being indicators

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### Step 2. Get the child and family's perspectives

#### Open process has many advantages -

- Children and families understand why sharing information is necessary
- Children and families can help distinguish what information is significant
- Participation encourages ownership
- Helps professionals to behave ethically
- Everyone is included in seeing if the plan has made a difference
- Even in cases of compulsion, better outcomes obtained by working in partnership with parents

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### Step 3. Consider evidence from research and literature to assess

- Level of risk
- Likely impact on child

and

#### Step 4.

- Likely recurrence of risk factor/harm

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### Potential risk factors relating to the child

- Age of child
- Poor health and disability
- Child unprotected
- Child presents as fearful
- Child is 'risk taker'
- Child not in school
- Child on compulsory measures



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### Potential risk factors in parent or caregiver

- Family history of past abuse
- Domestic abuse
- Mental health and/or substance misuse
- Behaviour violent or out of control
- Poor care-giving or neglect and unwilling to protect child
- High degree of stress
- Unrealistic expectations of child
- Incidents insufficiently explained



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### Environmental pressures

- Poverty
- Poor practical resources in community
- Unsafe neighbourhoods
- Feeling threatened and isolated
- Poor housing, lack of employment and lack of child care



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Step 5 Using the My World Triangle to identify strengths and pressures

- Identifying strengths for child around the triangle
- Identifying pressures including risks around the triangle



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Step 6 The Resilience Matrix

Two dimensions:

- Resilience - Vulnerability
- Protective factors – Adversity

Analyse vulnerabilities, pressures, risks, strengths, and protective factors.

Step 7

Weigh up the balance of evidence and decide how risk will be effectively reduced or managed.



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Record

- The kind of risk involved
- The likely impact on the child
- What is likely to trigger risk
- In what circumstances the risk is most likely to happen
- Factors which will reduce risk



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Step 8 Managing risk : Constructing and implementing the Child's Plan

- What is to be done?
- Who is to do it?
- How will we know if there are improvements and risk has been eliminated or contained?

**Action and review.**



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The systematic practice model  
8 steps

1. Use the well-being indicators to identify immediate risk
2. Get the child and family's perspectives on risk
3. Draw on evidence from research and developmental literature about level of risk and likely impact on the individual child
4. Draw on research to assess likelihood of reoccurrence of harm



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5. Look at the immediate and long term risks using the My World Triangle
6. Use the resilience framework to analyse the risks, strengths, protective factors
7. Weigh the balance of the evidence and make decisions
8. Construct a plan and take appropriate action, including reviewing the plan.



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# **A systematic practice model for assessing and managing risk**

## **Executive summary**

**Jane Aldgate and Wendy Rose**

**The Open University**

**July 2007**

### **Summary**

Developing a model of risk assessment most appropriate to *Getting it right for every child* is one which takes a developmental ecological approach to assessment and identification of risk. It adopts a **systematic practice model**. This allows for using evidence-based reviews of risk factors to guide practitioners in their thinking without adopting a rigid and unreliable actuarial prediction approach. Emphasis is placed on seeing risk in the context of a child's whole development and ecology, identifying strengths and pressures in a child's world and, above all, looking at the interaction between factors. The gathering of information about the whole child allows for identification of the balance between risks and protective factors. These can then be weighed in decision-making to inform planning and action, looking at strategies for preventing harm or further harm. There is an emphasis on risk management and this should be built into the child's plan.

This is a model which brings together the best from the different approaches so that practitioners can see how risk assessment and management of risk will help with assessment, decision-making, planning and action. Such a model will have elements that bring together the best knowledge and its application from different risk assessment models. Although in assessing risk, safety issues will be prominent, the impact of risk on other aspects of children's development must be taken into account and is an essential part of the management of risk. We call this a **systematic practice model** for risk assessment and management. There are eight steps in the model. These are:

- 1. Using the SHANARI to identify immediate risk**
- 2. Getting the child and family's perspectives on the risk**
- 3. Drawing on evidence from research and developmental literature about the level of risk and its likely impact on an individual child**
- 4. Using messages from research to assess what is the likely recurrence of harm**
- 5. Looking at the immediate and long term risks in the context of the Child's World Triangle**
- 6. Using the resilience framework to analyse the risks, strengths, protective factors and vulnerabilities.**
- 7. Weighing the balance of that evidence and making decisions**
- 8. Constructing a plan and taking appropriate action**

### **1. Using the SHANARI to identify immediate risk**

Practitioners will use the SHANARI to log initial concerns factors. They will need to ask:

- What is getting in the way of this child reaching the SHANARI outcomes?
- Why, do I think on initial contact with child and family, this child not safe?
- What have I observed, heard, identified from the child's history that causes concern?
- Are there factors of risk of significant harm present and what, in my view is the severity of those factors enough to warrant immediate action?

### **2. Getting the child and family's perspectives on the risk**

Any model which attempts to maximise prevention has to place children and families at the heart of assessing and preventing risk of harm. Seeing service users as experts is endorsed by writers who champion this approach (see Stalker 2003) but, as Stalker points out, service users' views are largely missing from risk literature.

*Getting it right for every child* sees the involvement and partnership with children and families being integral to successful risk assessment and management. Without families' perspectives on the risks to their children's difficulties, practitioners' information is incomplete and they cannot reach a good understanding of the risks of harm and needs of children. The way in which practitioners gather information from children and families, therefore, is as important as the information itself gathered for risk assessment. An open process which actively involves families and others has many advantages for both practitioners and families (see, for example Department of Health 2001). It helps because:

- children and families can understand why sharing information with professionals is necessary;
- children and families can help practitioners distinguish what information is significant;
- everyone who needs to can take part in making decisions about how to help a child; and
- everyone contributes to finding out whether a plan has made a positive difference to a child or family;
- professionals behave ethically towards families;
- even in cases where compulsory action is necessary, research has shown better outcomes for children by working collaboratively with parents.

### **3. Drawing on evidence from research and developmental literature about the level of risk and its likely impact on an individual child**

Risks need to be seen in the wider context of short and long term risks to children's wellbeing and development. Nevertheless, practitioners from all the children's services will always be most concerned about children's safety and the impact of abuse and neglect and find it helpful to have information about what when children with whom they are faced are at the greatest risk. Systematic reviews based on research findings help to identify the core factors that have been present in relation to abuse or neglect but these cannot

be used as predictors for current or future abuse without being considered in the context of the child's unique ecology. These factors should be used as a knowledge base to underpin a more detailed assessment of strengths and pressures based on the domains of the Child's World Triangle. An example of a list of evidence-based factors used by one local authority to help identify the possibility of significant harm is shown in Appendix 1.

#### **4.Using messages from research to assess what is the likely recurrence of harm**

In assessing how safe a child is, a frequently asked question is whether harm that has occurred is likely to occur again. Jones has identified the characteristics of those cases in which intervention was much less likely to be successful with respect to re-abuse and/or lack of success with attempted family re-unification (see Jones *et al* 2006). These factors were the following:

- A group of factors associated with severity (extensive harm, duration, and frequency);
- Mixed forms of maltreatment;
- Abuse with accompanying neglect or psychological maltreatment;
- Sadistic acts;
- A group of factors connected with denial. Absence of acknowledgement, lack of co-operation, inability to form a partnership and absence of out-reach;
- Parental mental health: personality disorder; learning disabilities associated with mental illness; psychosis; substance misuse.

Incorporating a developmental ecological perspective into identifying the likelihood of recurrence has been developed by Jones *et al* (2006). This includes a table of factors likely to be present if recurrence of harm takes place, as well as factors likely to prevent recurrence (see Appendix 2).

## **5. Looking at the immediate and long term risks in the context of the Child's World Triangle**

*Getting it right for every child* is not confined to identifying and preventing risk of harm caused by abuse and neglect within children's families. The ecological approach recognises that there are many ways in which children can be placed at risk and any system of risk assessment needs to include the wider context of children's environment. All the domains of the child's world triangle have been informed by research evidence and risks can come from many sources. Each domain of the Child's World Triangle provides a source of evidence contributing to a full developmental ecological assessment of an individual child. Each domain can be used to identify strengths and pressures which balance risk and protective factors.

Having identified strengths and pressures, standardised scales and tools can be useful to identify in more detail specific aspects of children's behaviour or demeanour as well as helping assess the parenting and wider environment.

## **6. Using the resilience framework to analyse the risks, strengths, protective factors and vulnerabilities.**

The resilience matrix drawn from Daniel *et al* (1999) can then be used to identify not only the factors contributing to strengths and pressures but also to gain a picture of the balance between positive and negative parts of the child's ecology.

## **7. Weighing the balance of that evidence and making decisions**

Having gathered information about the protective and negative factors in a child's ecology, and weighed the balance of these factors, decisions need to be made about what to do to address his or her needs in the context of keeping the child safe. Then practitioners need to make decisions that will lead to a plan to protect to child and address the child's broader developmental needs simultaneously.

### ***An emphasis on openness and management of risk***

Jones *et al* (2006) suggest there are several reasons why openness, with respect to decision-making, is needed. This includes recognising the potentially serious consequences of poor decision-making and that 'children and their parents have a right to understand and be involved with the decisions that are being made about them, particularly because the results of decisions in this area are so far-reaching'.

In addition, 'openness also encourages the practitioner to distinguish between amassing facts, and evaluating the relative importance, positively or negatively, of the data that have been gathered'.

In practice, Jones *et al* (2006) go on to suggest that decision-making, needs to 'take into account both the limitations and imprecision of the evidence base when making decisions in this area' and that it demands 'a major move in the direction of risk management, rather than an emphasis on a risk assessment. Risk assessment, for all the reasons outlined above, is simply too imprecise and inexact to apply in this field. However, that is not to say that risk of future harm to the child cannot be managed in a sensible, logical and open manner.'

The following stages of decision-making are proposed in cases where there is risk of harm:

- 1 Data gathering
- 2 Weigh relative significance
- 3 Assessment of current situation
- 4 Circumstances which may alter child's welfare
- 5 Prospects for change
- 6 Criteria for gauging effectiveness
- 7 Timescale proposed
- 8 Child's plan (child in need plan, child protection plan or care plan, depending on status of the child).

From (Jones *et al* 2006, p. 282)

## 8. Constructing a plan and taking appropriate action

As shown above, Jones *et al*, have incorporated planning and action into their decision-making processes. Constructing the child's plan is a fundamental part of the Scottish Executive's *Getting it right for every child* initiative and is very much aligned with the approach Jones *et al* have taken. The Scottish Executive's *Guidance on the Child or Young Person's Plan (2007)* specifically incorporates the assessment of risk and its management into the child's plan. It confirms the processes and stages which have been set out in the **systematic practice** model described so far in this paper:

Getting it right for every child specifies that there will be a plan for a child in any case where it is thought to be helpful. This can be in both a single agency and a multi-agency context. The assessment of risk and the management of risk will be incorporated into the child's plan. This will include a summary of analysis of the child's or young person's circumstances based on the Child's World Triangle. This should cover:

- how the child or young person is growing and developing (including their health education, physical and mental development, behaviour and social skills);
- what the child or young person needs from the people who look after him or her, including the strengths and risks involved;
- the strengths and pressures of the young person's wider world of family friends and community; and

And assessment of risk, detailing:

- the kind of risk involved;
- what is likely to trigger harmful behaviour; and
- in what circumstances the behaviour is most likely to happen.

The plan should note risk – low medium or high – as well as the impact of the child or young person on others

(Scottish Executive 2007, p.13).

There are key questions the plan should address:

What is to be done?

Who is to do it?

How will we know if there are improvements?

The plan should be monitored and reviewed and amended as need circumstances and risks change (see Scottish Executive 2007).

## References

Aldgate, J. and McIntosh, M. (2006) *Looking After the Family: a Study of Kinship Care in Scotland*, Edinburgh, Astron.

Daniel, B. Wassel, S and Gilligan, R. (1999) *Child Development for Child Care and Protection Workers*, London: Jessica Kingsley.

Department of Health (2001) *The Children Act Now: Messages from Research*, London, TSO

Jones D.P.H., Hindley, N. and Ramchandani, P.G. (2006) 'Making Plans: Assessment, Intervention and Evaluating Outcomes' in J. Aldgate, D.P.H. Jones, W. Rose and C, Jeffery eds (2006) *The Developing World of the Child*, London, Jessica Kingsley Publishing.

Scottish Executive (2007) *Guidance on the Child's or Young Person's Plan*, Edinburgh, Astron.

Stalker, K.(2003) 'Managing Risk and Uncertainty in Social Work – A Literature Review', *Journal of Social Work*, 3(2), 211-233.