

# **A Positive Approach To Risk Requires Person Centred Thinking**

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**2008**

This article looks at the issue of risk in the lives of people who are supported by human services.

More accurately, it looks at how the issue of risk, as it has traditionally been approached by these services, imposes a barrier to social inclusion and to an interesting and productive life.

The article also proposes an alternative person centred risk process that by beginning with a focus on who the person is, their gifts and skills, and offering a positive vision of success, could avoid the implied aversion to any form of risk embedded in the traditional approaches and attitudes. The full exposition of this process is described in the 'Person Centred Risk Course Book' (Allen et al 2008).

The problems of traditional risk assessment are becoming increasingly recognised by people who use human services, their families and carers, and now by many service providers, who are looking for alternative approaches to risk: 'thorough, professional, personalised risk management' (Bates and Silberman 2007 p6) that recognise that life and risk are inseparable, and that look at risk from the point of view of the person, their family and friends and the wider community, rather than solely from the point of view of the service provider.

Bates and Silberman argue that any such positive approach to risk would need to meet a number of requirements, and see it as the 'holy grail' of mental health and other services.

The authors of this article have been working on applying Person Centred Thinking Tools to the issue of risk, building them in to a 'Person Centred Approach to Risk'. We believe this alternative approach does not lose the person in a sea of tick boxes and charts, that it has a more balanced approach to risk, having an inbuilt assumption that the purpose of any risk assessment is just as much about the **happiness** of the person, their family and the community as it is about their safety.

We also believe that the 'Person Centred Approach to Risk' can be demonstrated to meet all the requirements set by Bates and Silberman in their article, and that it provides a productive way for many people who wish to take

meaningful steps forward in their lives, but find themselves trapped in a boring unproductive and segregated lifestyles by traditional service-centred approaches to risk.

Finally we argue that any positive approach to risk must include the basic tenets of all Person Centred Approaches; keeping the person at the centre, treating family and friends as partners, a focus on what is important to the person, an intent to build connections with the community, being prepared to go beyond conventional service options, and continuing to listen and learn with the person.

### **What is 'Risk'?**

The experience of many people who have to rely on human services for their support is that 'risk' is the reason given to them by services why they cannot do the things that other people are doing every day.

When we delve into the word 'risk', we find that it has a multitude of meanings, and that it is nowhere near as clear and precise as the advocates of traditional risk assessment assert, for example Hansson (2002) identifies five different common uses for the word risk, and Ekberg points out a "proliferation of risk definitions" and a whole range of different understandings of risk (2007 p345).

Risk literature often separates 'risk' from 'uncertainty', defining the risk as a measurable probability that something will happen, however, even where experts claim they can give an exact probability value to a risk, there is always a possibility that the experts may be wrong (Hansson 2002 p4). In common usage the words 'risk' and 'uncertainty' are often synonymous (Lupton 1999 p9)

Risk is sometimes used as a verb: a person 'risks' doing something, and sometimes a noun: a person is labelled as being a 'risk to society'.

The drive for a single definition of 'Risk' has been described as "a futile form of linguistic imperialism" (Hansson 2000 p3), he argues that risk in its popular usage is just as valid as the narrow technical values attached to the term, as this allows the inclusion of philosophical and ethical values, the bargaining and compromises that are excluded from "the expert-driven risk analysis process" but are essential for social and political decision making processes (ibid pp5-8).

Risk decision making is often complicated by the fact that the person or group taking the decision is not always the person or group affected by the risk. Hansson argues that "risks are inextricably connected with interpersonal relationships. They do not just 'exist'; they are taken, run or imposed" (2000 p4),

Differences in power and status affect the extent to which people influence risk decision making – the views of developers wishing to build a dam across

a river may well be given more weight than those of people living nearby that river. Where a person with less power and status might wish to take a risk, and the consequences of that risk would affect more powerful people, it is more likely that they will be prevented from taking it. This is the problem faced by people supported by services and professionals, where those services and professionals fear various real and imagined consequences to them of the risk taking of the people they support.

This problem is deepened in modern society as the power of the news media can mean that the unpredictable actions of an individual can now have an amplified impact on the reputation of services, and on political and corporate institutions. Services that are now becoming increasingly concerned with 'reputational risk management' find that this demands "The risk management of everything" (Power 2004 p36). In the case of human services, this means an ever more intrusive and obsessive focus on every aspect of the lives, behaviours and potential behaviours of the people they support. It can also mean the increasing 'proceduralisation' of work, as defensive practice and blame avoidance (ibid p46) become more important than the particular lives of individual people

Risk can become a highly charged and politically loaded issue. The parties involved can have very different interests at stake in debates about particular risks, and these can often be prone to become full on conflicts, leading to different parties taking entrenched positions that prevent cooperation, agreement and action and further trap the person.

Person Centred Approaches, with their focus on the person and strategy of building an alliance of supporters around the person can often cut across this entrenchment and generate new and creative ways forward, providing that services are prepared to face this challenge. This is now being recognised by government departments, the Department of Health publication 'Independence Choice and Risk' wholeheartedly commends person centred approaches for everyone because they "identify what is important to a person from his or her own perspective and find appropriate solutions" (DOH 2007 p4)

Regulators too want to see the balance of risk decision making shifting toward "supporting individuals who choose to take informed risks in order to improve the quality of their lives"( CSCI 2006 pvii) in this case CSCI are talking about older people, but this shift in attitude to risk is being advocated for all services that offer health or social care to human beings.

For the purposes of this article, we are considering 'risk' as it presents to people that use services – any issue, real or imagined, which is being used as an objection to their moving toward increased inclusion in community life.

## **What is Wrong with Traditional Risk Assessment?**

A focus on risk “encourages practitioners to look for what is going wrong rather than what is going right” (Booth and Booth 1998 p205)

Traditional technocratic and spuriously ‘objective’ approaches to risk ‘lose the person’ – philosophically they treat the person as an object to be assessed by the ‘experts’ rather than as an agent in their own lives, part of a family, community, society, with legal rights and choices. They focus on what is wrong with the person, often treating the person as a problem to be managed rather than a person to be enabled to fulfil their ambitions and offer a contribution to society.

Alaszewski and Alaszewski (2002) argue that “If agencies and their employees take a narrow hazard approach to risk, they will contribute to the disempowerment of people with learning disabilities”

Power (2004) calls for ‘intelligent’ risk management that does not “swamp managerial attention and independent critical imagination” is characterised by “learning and experiment rather than rule based processes” and which can be sustained subject to challenge, questioning and criticism (p61), while the Better Regulation Commission has called for an emphasis in risk management on “resilience, self reliance, freedom, innovation and a spirit of adventure” (BRC 2006 p3).

The government too is calling for “A culture of choice that entails responsible, supported decision making” (Lewis 2007 p1) and calls for everyone involved in the lives of people who use services to “work together to help people achieve their potential without compromising their safety” (ibid p2).

To give proper balanced consideration to issues of risk and achievement in the diverse and complex lives of human beings, we need an entirely different approach from the methods that services use to ‘risk assess’ their hoists, fridges and kettles.

## **Bates and Silberman’s ‘Holy Grail’ Criteria**

Bates and Silberman have described effective risk management as the “‘holy grail’ of mental health and other care services” (2007 p6)

They see it as finding an integrated balance between “positive risk taking” around the values of autonomy and independence and a policy of protection for the person and the community based on minimising harm. While they do not give an exact description of what such an approach would look like, they give a list of 7 criteria that any such approach would have to fulfil, these being:

- Involvement of Service Users and Relatives in risk assessment
- Positive and Informed Risk Taking
- Proportionality
- Contextualising Behaviour
- Defensible Decision Making

- A Learning Culture
- Tolerable Risks

## **A Person Centred Approach To Risk**

There are many different tools and approaches available to support Person Centred Thinking, many of which have come from 'deconstructing' the processes of Smull and Sanderson's (2005) 'Essential Lifestyle Planning' approach, while some have come from other strands in the growing family of Person Centred Approaches and by early work applying person centred approaches to risk by Duffy and Kinsella (Kinsella 2000).

Practitioners of Person Centred Approaches who were unsatisfied with the traditional repertoire of Risk Management tools have begun to recombine these Person Centred Tools in innovative and creative ways, and to apply them to thinking, acting and learning around real risk situations.

The learning from this experience, reflection and discussion has been refined and crystallised into a process that can be shared and applied constructively to different risk situations, bringing together people who use services and the people who know and care about them most to think about how they wish to move forward and the risks involved; making decisions, taking actions and learning together. We have called this process a 'Person Centred Approach to Risk' (Allen et al 2008).

In this section we will look at the 'holy grail' criteria put forward by Bates and Silberman and show how we believe the Person Centred Approach to Risk fulfils these criteria.

- 1. "Involvement of service users and relatives in risk assessment":**  
Involving the person concerned and the people that care about them most is one of the most fundamental tenets of any person centred approach. The process we have put together considers carefully the people that need to be involved, using the 'Relationship Circle' to help the person and their allies identify key people who could form the persons 'circle of support'. This group of people is involved from the outset, in the initial gathering of information, in the framing of what the risk under discussion actually is, in thinking that generates ideas and solutions, in evaluating these solutions, in decision making around the risk, in implementing the actions and in the learning that takes place during these actions. Bates and Silberman suggest that "staff must understand what service users and others want, how they view their own risks and what responsibilities each person has in managing risks effectively" (2007 p7). The Person Centred Approach meets this by asking for a clear picture of what the person wishes to achieve, why this is important to the person, what success would look like, a history of the risk and uses the 'doughnut' tool and decision making agreement tools to look at staff roles and responsibilities, and at who will be responsible for different important decisions in relation to the risk.

2. **“Positive and informed risk taking”**: The process is built around a positive view of the person – it seeks to learn what the person’s gifts and skills are, what people like and admire about them, as well as investigating what would be necessary to keep them and others safe while taking the risk. The process is based on finding creative solutions rather than simply ruling things out. Bates and Silberman argue here that quality of life should be “maximised while people and communities are kept as safe as can be reasonably expected within a free society” (2007 p7). Thinking around what it would take to keep the person and others safe while taking the risk is a key part of the Positive and Productive Process, as is the use of the ‘Happy/Safe’ grid, which looks at how much solutions would make the person happy, by meeting what is important to them, and how much they would keep them and others safe, by meeting what is important for them. One section of the process includes a question “What does the law say?” (Allen et al 2008 p20) enabling the process to be informed by the current law, including legislation such as the Human Rights Act.
3. **“Proportionality”**: “The management of the risk must match the gravity of potential harm” (ibid p8) Using the person centred thinking tools means flexibility. The more serious the issue, the more people and the more time can be spent considering it in greater detail. Unlike conventional risk assessment, the approach explores the consequences of NOT taking the risk, to the person, to their family, community and services, balancing these against the potential consequences of taking the risk.
4. **“Contextualising Behaviour”**: “why did the person behave in this way? At this time? In this Situation?”(ibid p8) Part of the process involves gathering together previous information about the person, including a history of the person’s experience of the risk issue from their own perspective, as well as other historical data, gleaned from a variety of sources including learning logs which look at what has worked and what has not worked in particular situations, and communication charts which explore a person’s words and behaviours, seeking their meanings and considering what the best response to these messages should be. The ‘4+1 Questions’ (What have we tried? what have we learned? What are we pleased about? what are we concerned about?) help not only to gain an understanding of a person’s behaviour in different contexts, but also to build a picture of what has been learned about what is the best support for that person.
5. **“Defensible Decision Making”**: “there is an explicit and justifiable rationale for the risk management decisions” (Ibid p8): Following the person centred approach generates a clear trail of written records of what has been discussed, the different perspectives, issues and solutions that have been considered, along with any legal issues, such as the human rights act or the mental health act that might affect the risk decision. The paperwork generated during the process provides a clear rationale for why the decisions that emerge during the process

have been taken, and why other options have been rejected. The rationale for decision making is also more clearly expounded and recorded than in traditional risk assessment forms in common usage.

6. **“A Learning Culture”** The positive and productive approach to risk has a deep emphasis within it on ongoing learning using learning and reflective tools like the learning log, the 4+1 Questions and What’s Working/What’s not working, and by clearly defining for staff their core duties and their zone of judgement and creativity in relation to the risk. If it is part of a serious and concerted attempt by services to change their philosophy and practice in a person centred direction, it can contribute significantly to building a learning culture within organisations.
7. **“Tolerable Risks”** A key aspect of the Person Centred Approach is that it uses creative thinking techniques around methods to mitigate the risk and improve quality of life, moving from situations which make the person happy but unsafe, to where they and the community are safer, and from strategies where the person is ‘safe but unhappy’, to where they can be happier. Experience of using the process is that it enables participants to take a more balanced and rational approach to risk, finding ways to enable the person to achieve what is important to them while considering what keeps that person and the community safe in a way that makes sense for that individual.

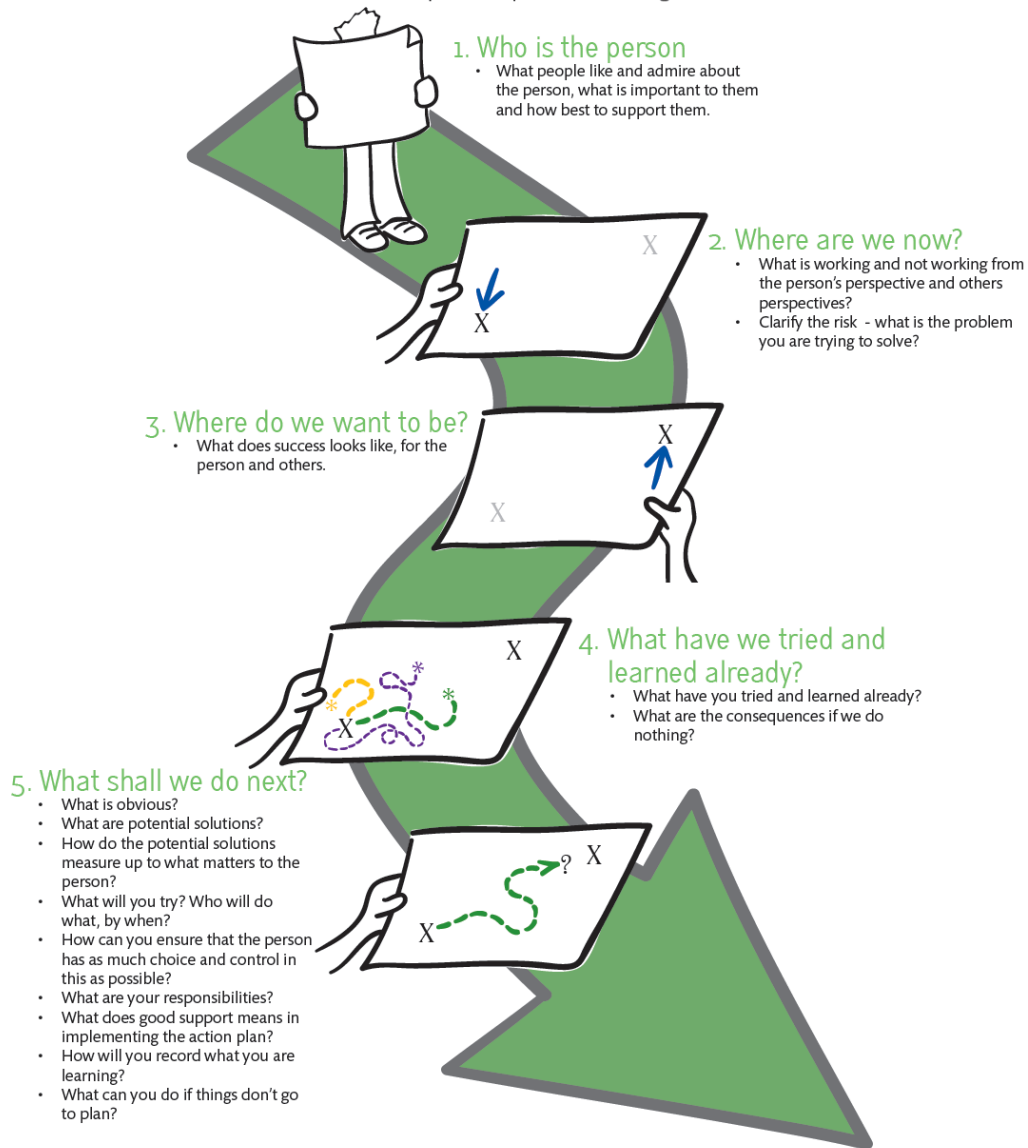
## The Process Summarised

A person centred approach to risk uses questions around a framework of purpose, people, process and progress – it is important that right at the beginning of the process we think seriously about what it is we are trying to achieve. Our thinking about how the process can be used to enable the person to have choice and control in their life, and to be a citizen in the community, will influence who the people are that are called to participate in the process.

## A Person Centred Approach To Risk



Purpose People Process Progress





## **Who is the Person?**

Once purpose is understood, and people are gathered, the first and biggest priority of the process is to gain an understanding of *who the person is*. The ultimate success of any strategies or solutions will depend on how well we listen for the person's capacities, gifts and skills, and to what is important to the person, as well as our understanding of what makes the best support for that person. The best support is what keeps the person healthy and safe in a way that is congruent with how they wish to live now, and what they wish to achieve in the future.

Tools to explore this include a full person centred plan, if the person does not have such a plan, then a 'One Page Profile' is used.

## **Where are we now?**

A picture of what is working and not working now, from the perspective of the person and from the perspectives of others is built up, and the risk issue is clearly defined. It's important to know what is working now, so that when strategies are developed, they do not conflict with what we know already works well.

## **Where do we want to be?**

Traditional risk assessments lack any sense of vision about how things could be different or better for the person. In the person centred approach it is central that a vision of what success could look like is put together, beginning with the person's perspective, then adding in others.

This vision, coupled with a picture of who the person is, can generate the energy and commitment within the group to work toward real and lasting changes.

## **What have we tried and learned already?**

A huge amount of people's learning and knowledge around risk issues is wasted when new strategies are tried without reference to what has gone before.

Here person centred thinking tools are used to gather the knowledge of the person and their allies around the history of the issue, and to bring all the information together using 4 questions 'What have you tried' 'What have you learned' 'What are you pleased about?' 'What are you concerned about?' The consequences of doing nothing are considered, including the opportunities that will be lost if we don't support the person to take the risk. What the law says on the issue is also thought about.

## **What shall we do next?**

Obvious solutions are considered first, then more creative 'blue sky' thinking techniques are used to generate a wider range of solutions – good bad and

indifferent. All the various solutions are mapped onto the 'Happy/Safe' grid, depending on how happy they make the person, and how safe they keep the person and the community. This clear mapping enables action planning giving a clear rationale for why some strategies have been adopted, and others rejected.

Strategies for ensuring the person has as much choice and control within this are developed using the 'decision making agreement' and people's responsibilities are made clearer using the 'doughnut' tool. Contingency plans are developed in case the agreed strategies don't go to plan.

Finally methods of reviewing progress are agreed, including a clear picture of how we will know things are not working.

## **Conclusion**

Services are good at highlighting the downside of risk – but poor at thinking about the great opportunities that facing up to risk and finding positive solutions in a creative and mindful way could mean for people, their families and their communities.

Traditional methods of risk assessment are full of charts and scoring systems, but the person, their objectives, dreams and life seem to get lost somewhere in the pages of tick boxes and statistics.

We feel it is important to remember people's rights, including the right to make 'bad' decisions, and to gather the fullest information and evidence to demonstrate that we have thought deeply about all the issues involved and made decisions together based on what is important to the person, what is needed to keep them healthy and safe and on what the law tells us.

The government say "It should be possible for a person to have a support plan which enables them to manage identified risks and to live their lives in ways which best suit them" (DOH 2007 p4). In order to achieve this, a person centred approach is required, based in the use of person centred thinking tools, to help people and those who care about them most think in a positive and productive way about how to ensure that they can achieve the changes they want to see while keeping risk in it's place.

## **References**

Alaszewski A & Alaszewski H (2002) Toward the creative management of risk: perceptions, practices and policies. *British Journal Of Learning Disabilities* **30** pp56-62

Allen J, Neill M, Woodhead N, Reid S, Erwin L & Sanderson H (2008) Person Centred Risk Course Book, Stockport, HSA Press.

- Bates P & Silberman W (2007) *Modelling Risk Management in Inclusive Settings* [online] London: National Development Team. Available from: [http://www.ndt.org.uk/docsN/ET\\_Slrisk.pdf](http://www.ndt.org.uk/docsN/ET_Slrisk.pdf) [accessed 21/05/2007]
- BRC (2006) *Risk Responsibility and Regulation – Whose Risk Is it Anyway?* London: Better Regulation Commission.
- Booth T & Booth W (1998) *Growing Up With Parents Who Have Learning Difficulties*. London: Routledge
- CSCI (2006) *Making Choices: Taking Risks*. London: Commission for Social Care Inspection.
- DOH (2007) *Independence Choice and Risk: A Guide to Best Practice in Supported Decision Making*. London: Department of Health
- Ekberg M (2007) The parameters of the risk society: a review and exploration. *Current Sociology* **55** pp343-366
- Hansson S O(2002) *Philosophical Perspectives on Risk* [online] Stockholm: Royal Institute of Technology. Available from: <http://www.infra.kth.se/~soh/PhilPerspRisk-text.pdf> [accessed 21/05/2007]
- Kinsella (2000) *Person Centred Risk Assessment*, London, Paradigm. Available from: <http://www.pardigm-uk.org/pdf/Articles/personcentredriskassessment.pdf> [Accessed 26/06/2008]
- Lewis I (2007) Foreword: *Independence, Choice and Risk: A Guide to Best Practice in Supported Decision Making*. London, Department of Health pp 1-2.
- Lupton D (1999) *Risk*. London: Routledge
- Manthorpe J, Walsh M, Alaszewski A, Harrison L (1997) Issues of risk practice and welfare in learning disability services. *Disability and Society* **12(1)** pp69-82
- Power M (2004) *The Risk Management of Everything; Rethinking The Politics of Uncertainty*. London: Demos
- Smull M, Sanderson (H) (2005) *Essential Lifestyle Planning For Everyone*. London: Inclusion Press
- Stalker K (2003) Managing risk and uncertainty in social work. *Journal of Social Work* **3(2)** pp 211-233