



Risk Enablement and Adult Risk Management Practice Guidance

Adult Social Care

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Division & Service:	Adult Social Care		
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1. Practice Statement

- 1.1 The Risk Enablement and Adult Risk Management (ARM) process provides professionals from all agencies with a framework to facilitate effective multi-agency working with individuals aged 18+ who are deemed to have capacity for specific decisions that may result in serious harm/death through severe self-neglect, risk taking behaviours. (Although it is noted that for high risk or complex transitions situations this policy may be relevant from 16+ in conjunction with children's services.
- 1.2 This process can also be utilised when there are conflicting views or concerns about a person's capacity or executive capacity in relation to specific decisions that pose high risks to an individual.
- 1.3 Central Bedfordshire Council recognises that risk is an inevitable consequence of people taking decisions about their lives.
- 1.4 This practice guidance highlights the arrangements that senior members of both the council and partner agencies will put in place to address complex risk situations which may arise due to different views of risk and risk mitigation, between a person, family carers or involved professionals and agencies.
- 1.5 This Risk Enablement guidance contributes to the overall framework of the council's response to the issue of risk and particularly deals with situations encountered in a social care or community context between practitioners, people with social care support needs and family carers.
 - A panel is NOT a substitute to routine MDT working, legislation, assessment and/or all other existing processes such as Mental Health Act (1983; 1999); Mental Capacity Act (2005), Safeguarding Adults (Care Act, 2014), Multi Agency Public Protection Arrangements (MAPPA), Multi Agency Risk Assessment Conference (MARAC) or Channel (framework around counter Terrorism).
 - Whilst these processes take precedence a panel referral could be considered alongside if it is felt that it may also support the individual.
- 1.6 The guidance will create a sound framework for decision making in relation to the management of risk. The following core considerations must be central within Risk Assessment and Risk Enablement:
 - Ensure that mental capacity is considered and, where appropriate, specific decisions assessed and recorded.
 - Ensure that all risk work is person centred and strengths based.
 - Ensure that all relevant legislation that might assist a situation is considered and applied and evidence based informed practice is central

- 1.7 Practitioners and services will support those involved to explore the issues and make arrangements which go as far as possible towards meeting the persons aspirations, whilst balancing the needs and risks to themselves, others, and the Council.
- 1.8 We want to ensure that risk is not only identified but that subsequent appropriate action and risk planning is then taken to support and enable customers to live the lives they desire whilst fully understanding risk and the impact of their decision making.
- 1.9 Practitioners always promote a culture of choice that entails responsible, reasonable, supported, and shared decision-making.

2. Key Principles

The principles under which this guidance operates are:

- 2.1 The rights of people to live independent lives and to take the risks they choose will carefully be weighed against the likelihood of significant harm arising from the situation in question.
- 2.2 We always seek to ensure that people who use our services are enabled to take informed risks as they go about their daily lives.
- 2.3 People will be involved in decisions about risk which affect them.
- 2.4 People are enabled to understand their responsibilities and the implications of their choices, including any risks and likely consequences.
- 2.5 We appreciate there will always be some risk and that trying to remove it altogether can outweigh the quality-of-life benefits for the person and would not be appropriate.
- 2.6 The identification, assessment and management of risk should promote the independence and social inclusion of people with social care needs.
- 2.7 Identification of risk carries a duty to do something about it, i.e., risk management. Where high risks are identified that are not able to be managed via routine care management, MDT meetings and working arrangements or CPA processes; escalating to a risk enablement panel might be the most appropriate route for guidance for the person, family, practitioner, and partner agencies.
- 2.8 Involvement of people who use services, their families, advocates, and practitioners from a range of services and organisations helps to improve the quality and robustness of risk assessments and decision-making.
- 2.9 Risk-taking can involve everybody working together to achieve positive outcomes.

- 2.10 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.
- 2.11 The standards of practice expected of practitioners must be made clear by their team manager / supervisor to give them the confidence to support decisions to take risk. Standards will be monitored via internal governance arrangements such as case work supervision and case audit.
- 2.12 The authority will support and develop practitioners through provision of learning and information in the form of policy and practice guidance. Practice guidance is currently available in areas such as:
- Safeguarding and Person-Centred Risk approaches
 - Risk and complex decision-making toolkits
 - Mental capacity and best interest assessing,
 - Self-neglect and hoarding.

The above guidance can be located on the council's bespoke policy hub: [Central Bedfordshire APPP Resource – Central Bedfordshire APPP Resource \(centralbedsapp.co.uk\)](http://centralbedsapp.co.uk)

- 2.13 The principles within the following legislation must underpin all risk work:
- The Care Act (2014).
 - The Human Rights Act (1998)
 - The Mental Capacity Act (2005)
 - The Equalities Act (2010)

Responses must be reasonable, proportionate, accountable, and defensible. Working within these legal principles alongside this framework will support this.

3. Scope, Definitions, Model and Related Policies

Scope

- 3.1 This practice guidance provides a structured approach to the issue of balancing risk with choice and control and sets out the local aims in relation to supporting people in taking reasonable risks where doing so is judged to secure positive outcomes and does not put the wider community at risk.
- 3.2 This guidance should be read in conjunction with local safeguarding policies and guidance and considered within the health and safety and social care legislative frameworks.

3.3 This practice guidance is aimed at:

- People with eligible social care support needs
- Carers, families, and friends of people with social care support needs
- Central Bedfordshire Council practitioners working in Adult Social Care
- Partner agencies such as Police, Fire, Health and MH colleagues and Safeguarding Adults Board members.
- The wider community

Definition of Risk

3.4 “Risk is defined as the uncertainty of outcome, whether positive opportunity or negative threat, of actions and events. The risk has to be assessed in respect of the combination of the likelihood of something happening, and the impact which arises if it does actually happen.” (HMSO 2004)

Key Elements and Model of Risk Assessment.

3.5 Any risk assessment must include these key elements.

- The individual’s history
- The individual’s own view of risks
- Strengths and/or vulnerability. Support including natural support.
- The nature and extent of any risk
- The impact of potential harm. Including the impact in terms of threat to life, loss of independence and the likelihood of it happening again/ continuing.
- Anticipated future: What influences will increase risk? What influences will decrease risk?

Understanding and managing risk involves recognising that situations can change very quickly as can the nature of the risk. We will therefore need to look at how things might have been in the past, how this relates to the present and how environmental factors might influence the situation.

3.6 The risk assessment will need to be an integral part of the assessment process so that the process can be understood as a part of the individual’s story, to highlight their strengths and resources as well as their needs and difficulties.

Questions like “what has worked well in the past?” or “how you have managed this before?” are important.

3.7 Risk assessment is not a substitute for professional judgement and experience and should be informed by the worker’s knowledge, skill, and expertise. It is a process that involves considering the dangers and risks that individual’s face, recording these and considering

where the responsibility will appropriately lie. Equally it should not be used as an excuse not to do things unless the likely benefits are outweighed by the likely danger.

3.8 It is important to recognise that risk assessing starts and takes place at the point of contact. Your initial observations and mental capacity risk assessment inform subsequent decision making about services or any actions that are necessary. The act of formally documenting the risk assessment is merely to record your thought process and provide an evidence trail for our interactions with people.

3.9 The model of risk below is used to assess in both safeguarding and general case management. Risk assessments will be recorded in a variety of ways, including use of the safeguarding template and current assessment documentation. Profile notes are also key in documenting thought process and decision making occurring whilst performing first response, safeguarding or complex case management functions.

	Impact: Impact indicates the potential seriousness should the risk materialise.		
Likelihood: Likelihood indicates the chance of a risk materialising	Low	Medium	High
Unlikely	Minor Concern/Risk	Minor Concern/Risk	Moderate Concern/Risk
Possible	Minor Concern/Risk	Moderate Concern/Risk	Major Concern/Risk
Almost certain	Moderate Concern/Risk	Major Concern/Risk	Major Concern/Risk

Type of Risk

3.10 This practice guidance covers the most common risks:

- Risks to the person or family – where there has been complex or longstanding social work or health intervention and or safeguarding issues.
- Risk to life or serious harm for the person involved.
- Risks to paid carers, whether employed by CBC or a contractor
- Risks to the public
- Market risks: risks arising from local market conditions affecting the quality or availability of services
- Environmental risks: e.g., severe weather, public health, or pollution issues subject to emergency planning

- Financial and Budgetary risks arising from the availability and allocation of resources, fraud, or theft
- Legal and Regulatory risks: including the legality of items in a support plan or compliance with legislation
- Reputational risks: issues that could affect the public reputation of the organisation

4. Legal and Regulatory Framework

4.1 Regulatory and Policy Context

The legislative and framework which practitioners that work within social care and managers are required to work within is listed below:

- The Care Act 2014
- The Human Rights Act 1998
- Mental Capacity Act 2005
- The Equality Act 2010
- Mental Health Act 2007
- The Care Standards Act 2000 (Commencement No. 21) Order 2005
- Freedom of Information Act 2000
- Data Protection Act – including GDPR 2018

5. Responsibilities

5.1 Assessment and case management

- Identifying any potential risks highlighted through assessment and sharing this information with the service user as appropriate.
- Supporting people to make informed decisions and choices and to understand/be aware of the consequence of their choices or actions.
- Identifying the need to involve members of the multidisciplinary team where appropriate, encouraging shared decision making and joint working wherever possible.
- Keeping concise and accurate records of their assessment, support planning, discussion, and interactions with people in relation to risk and care management processes.
- Consideration of risk and any perceived restrictions in our interactions with people.
- Assessing, discussing, and recording risk as part of safeguarding procedures with the people preferred outcome central to the process.

- Consideration of risks associated with non-engagement and application of non-contact and escalation protocols.
- Requesting and attending Risk Enablement panels (as/when required); where all other social work and joint working MDT avenues have been exhausted but risk remains high.

5.2 Operations Managers

- Acting as the main contact for their service and its management on risk matters and ensuring that corporate information and requirements are communicated.
- Representing their service at Risk Enablement Panels (as/ when required).
- Promoting the benefits of risk enablement across their service.
- Ensure that the team are aware of their responsibilities in terms of the management of risk and that clear lines of accountability are in place.
- Ensure that contingency planning is in place as appropriate to mitigate any identified risk.
- Support team managers to identify training and development needs of staff based on the evidence collected via practice audit and performance monitoring.
- Being able to identify and / or clarify when a risk is an unwise decision.
- Ensuring statutory requirements and management complex case instructions have been followed prior to the request to ensure the panel is the most appropriate action after exhausting other avenues to support and resolve/mitigate risk.
- Escalation of situations where risks are high, and complexity is at its greatest to senior management and consideration of the requirement or need for legal consult and instruction.
- Identifying whether the risk panel requires safeguarding involvement or should be led by community assessment services with partner agency involvement.

5.3 Partners and Other agencies

- Any agency can initiate a risk enablement panel meeting, not just Adult Social Services. Those attending should have the authority to commit to actions/resources or make decisions on behalf of their agency.
- The agency requesting the panel will be required to chair the meeting.
- A panel is requested via an email to either the Head of Service for Safeguarding or Head of Community Assessment Services or to senior health colleagues.
- Your request should outline the rationale for a risk enablement meeting and attach relevant information such as most recent assessment of social care needs, mental capacity, and risk assessments. Following receipt of your email it will be agreed which agency will arrange the meeting.

- The lead agency is responsible for initiating, co-ordinating and leading the process (this includes arranging the panel meeting, collating partnership comments, circulating the minutes and completing the Risk Plan.
- The lead agency is responsible for seeking consent from the adult to hold the meeting and they (or their advocate/family/carer), should be encouraged to participate in the process. If this is not possible, the reason should be recorded in the meeting minutes.
- A lack of consent would not prevent a panel from taking place. Under common law and the Care Act 2014, a person may act to prevent serious harm from occurring if there is a necessity to do so

6. Monitoring and Outcomes

- 6.1 Monitoring of practice in relation to risk assessment, judgement and enabling people will take place through pre-established governance and support arrangements including audits, themed practice reviews and supervision.
- 6.2 Cases presented and decisions made via a risk enablement panel will be monitored by the Heads of Services on a quarterly basis.
- 6.3 Safeguarding and Quality Improvement Team will be responsible for recording examples of cases presented and disseminating this information on a quarterly basis to capture learning from good practice and to influence organisational culture.
- 6.4 Outcomes. The benefits of successful Risk Enablement include:
 - Maximum choice and control, with minimal risk to people, others, or the organisation
 - Risk mitigation
 - Effective operational performance
 - Reduction of the possibility of failure and the uncertainty of achieving the organisation's overall objectives
 - Better organisational understanding of risks
 - More comprehensive arrangements for safeguarding people (vulnerable adults, the public and staff).
 - The development of a culture which is accepting and enabling of risk through strengths-based practice.
 - Robust mechanisms for multi- agency working when risks for an individual are at their greatest and shared decision making and planning is required across multiple agencies or service areas.

7. Equality and Diversity

- 7.1 All SCHH policies and guidance are accompanied by an EIA (where applicable) and an implementation plan that sets out monitoring and reporting arrangements available in relation to this policy.
- 7.2 The Council is proactive about putting in place arrangements to ensure that they do not unfairly discriminate against individuals on the grounds of their protected characteristics. Equality should be integral to the way in which any support is prioritised and delivered

8. Related Policies and Guidance

- Risk Enablement Panel Procedure

9. Evaluation and Review

- 9.1 This guidance will be reviewed in 1 year.