

Support positive risk taking for individuals

[Health & Medicine](#), [Disability](#)



Understand the importance of risk taking in everyday life :

- Explain ways in which risk is an integral part of everyday life

For many people risk is an accepted part of everyday life. Every day activities such as catching the bus, travelling on holiday, playing football, setting up home and starting a family all carry some element of risk. Risk plays a part in our health, safety, security, well-being, employment, education, daily activities, using resources and equipment and in community participation.

But some adults, for example disabled people or older people, are often discouraged from taking risks. Traditionally they are not encouraged to take risks in areas such as budgeting, planning, employment and daily living skills. This may be either because of their perceived limitations or fear that they or others might be harmed. Everyone has a right to take risks and make decisions about their lives. There is a balance to be found between service user's participation in everyday activities and your duty of care.

Changes in social care and health policy mean that all adults are being actively encouraged to increase their independence by, for example, travelling independently, and by being fully involved in mainstream society through education, work and leisure. It is impossible ever to fully eliminate risk. It is however possible to minimise and prepare for risk by preventative action. To support people to live independently or to travel independently or take part in everyday activities means accepting that there are risks that cannot be avoided but can be minimised and prepared for.

- Explain why individuals may have been discouraged or prevented from taking risks.

For disabled people, a move away from a medical model to a social model of disability now means that there is an emphasis on the discrimination and exclusion created by social and cultural barriers. For some services, approaches to risk have in the past been concerned with avoiding potentially harmful situations to service users and staff. People may need to take risks to achieve their aspirations but people who need support can be discouraged from taking risks.

This may be because of their perceived limitations or because of fear that they or others might be harmed, resulting in criticism or compensation claims. A more positive approach to risk is now being developed, recognising that in addition to potentially negative characteristics, risk taking can have positive benefits for individuals, enabling them to do things which most people take for granted. Risk can be beneficial, balancing necessary levels of protection with preserving reasonable levels of choice and control.

A balance has to be achieved between the wishes of those who use services and the common law duty of Care.

- Describe the links between risk-taking and responsibility, empowerment and social inclusion.

Personalised care is for everyone, but some people will need more support than others to make choices about how they live their lives. Everyone has the right to personalised care and as much choice and control as possible. As

the pace on personalisation is picked up it is necessary to ensure that this includes the most vulnerable members of our society, including those who may lack capacity.

With effective personalisation comes the need to manage risk for people to make decisions as safely as possible. Making risks clear and understood is crucial to empowering service users and carers, recognising people as ‘experts in their own lives’. Risk management does not mean trying to eliminate risk. It means managing risks to maximise people’s choice and control over their lives. True empowerment means that people might make decisions service providers disagree with.

If the outcomes are part of the support plan and all risks have been fully discussed and understood, this can lead to real choice and control and a better quality of life for the individual. With support for positive risk taking it can help the individual to:

- gain self-confidence-achievement, development, new skills and knowledge
- develop skills-goalssetting, new activities, support
- take an active part in their community-involvement, participation, inclusion

Outcome 2

Understand the importance of a positive, person-centred approach to risk assessment . explain the process of developing a positive person-centred approach to risk assessment Every opportunity contains risks – a life without

risk, is a life without opportunities, often without quality and without change. Traditional methods of risk assessment are full of charts and scoring systems, but the person, their objectives, dreams and life seem to get forgotten. A person centred approach focus' on the individuals rights to have the lifestyle that they chose, including the right to make 'bad' decisions.

It is about helping people and those who care about them, think in a positive and productive way in order to achieve the changes they want while keeping the issue of risk in its place. Risk management is finding a balance between " positive risk taking" based on autonomy and independence and a policy of protection for the person and the community based on minimising harm. Bates and Silberman give a list of 7 criteria that any such approach would have to fulfil, these being:

1. Involvement of Service Users and Relatives in Risk Assessment.
Positive and Informed Risk Taking.
 2. Proportionality.
 3. Contextualising Behaviour.
 4. Defensible Decision Making.
 5. A Learning Culture.
 6. Tolerable Risks.
- explain how to apply the principles and methods of a person-centred approach to each of the different stages of the process of risk assessment

Working in a personalised way and developing a positive person-centred approach means accepting there are risks that cannot be avoided but which can be prepared for.

Reasonable risk is about striking a balance in empowering people with support needs to make choices ensuring that the person has all the information, tailored to their specific needs, in the appropriate format, to make their best decisions " 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 uses 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.

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. 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.

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" 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? enabling the process to be informed by the current law, including legislation such as theHuman RightsAct. " Proportionality": " The management of the risk must match the gravity of potential harm" Using the person-centered 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.

Contextualizing Behaviour": " why did the person behave in this way? At this time? In this Situation? " 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.

Defensible Decision Making": " there is an explicit and justifiable rationale for the risk management decisions" Following the person-centered 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. " 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. " 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.

- explain how a service focused approach to risk assessment would differ from a person centred approach

A risk assessment can only identify the probability of harm, assess the impact of it on the individuals, and pose intervention strategies which may diminish the risk or reduce the harm.

Assessments cannot prevent risk. Risk is a normal and often beneficial part of everyday life, but while it enables learning and understanding, in the case of potentially destructive consequences it may need to be monitored and restricted. 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. A service focused approach seeks to avoid all risks as far as possible.

Staff would be expected to behave and act in a synchronised way with regards risk, not taking into account the individuals wishes. It has no flexibility and is not a responsive approach to meet peoples` changing circumstances. A service centred approach to risk assessment would be guided by a standard procedure and can compromise individuals rights to make choices and take risks. Often concerns about minimising and attempting to eliminate risks are in the interests of the organisation, but not necessarily in the interests of the person they are attempting to support.

A person centred approach seeks to focus on people's rights to have the lifestyle that they chose, including the right to make 'bad' decisions. Person centred planning, requires that staff have a flexible and responsive approach to meet peoples` changing circumstances, guided by the principles of good planning rather than a standard procedure. Staff need to be constantly problem solving in partnership with the person and their family and friends. Person centred planning seeks to develop a better, shared understanding of the person and her situation.

A person centred approach to risk taking will find the balance between what is important to the person, their aspirations and the supports that they require. 4. identify the consequences for individuals of a service focused approach to risk-assessment. Risk is a normal and often beneficial part of everyday life. Risk taking can have positive benefits for individuals, enabling them to do things which most people take for granted. While risk taking enables learning and understanding, in the case of potentially destructive consequences, it may need to be monitored and restricted.

The problem with a service focused approach to risk assessment, is it reduces an individual's independence and can reduce the positive benefits for the individual. A service focused approach to risk taking tends to have a negative focus on what the individual is not able to do or what they cannot achieve and has a limited outlook on identifying the benefits of positive, person-centred risk assessment. It does not empower the individual or encourage independence.

Outcome 3

Understand the legal and policy framework underpinning an individual's right to make decisions and take risks . explain how legislation, national and local policies and guidance provide a framework for decision making which can support an individual to have control over their own lives There are many Legislation and policies which promote the human rights of individuals which support the individual's right to make their own decisions and to take risks. Some are as follows: TheEqualityAct 2010 is the law which bans unfair

treatment and helps achieve equal opportunities in the workplace and in wider society.

The act replaced previous anti-discrimination laws with a single act to make the law simpler and to remove inconsistencies. This makes the law easier for people to understand and comply with. The act also strengthened protection in some situations. The act covers nine protected characteristics, which cannot be used as a reason to treat people unfairly. Every person has one or more of the protected characteristics, so the act protects everyone against unfair treatment. They protected characteristics are:

- Age Disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

Human Rights Act 1998 - The Human Rights Act means that residents of the United Kingdom will now be able to seek help from the courts if they believe that their human rights have been infringed. It is likely that anyone working within health and social care will be working within the provision of the Human Rights Act, which guarantees the following rights:

- The Right to life The right to freedom from torture and inhuman or degrading punishment

- The right to freedom from slavery, servitude and forced or compulsory labour
- The right to liberty and security of person
- The right to a fair and public trial within a reasonable time
- The right to freedom from retrospective criminal law and no punishment without law
- The right to respect for private and family life, home and correspondence
- The right to freedom of thought, conscience and religion
- The right to freedom of expression
- The right to freedom of assembly and association
- The right to marry and found a family
- The prohibition of discrimination in the enjoyment of convention rights
- The right to peaceful enjoyment of possessions and protection of property
- The right to access to an education
- The right to free elections
- The right not to be subjected to the death penalty

Mental Capacity Act 2005 – The MCA applies to England and Wales. The primary purpose of the MCA is to promote and safeguard decision-making within a legal framework.

It does this in two ways:

- By empowering people to make decisions for themselves wherever possible and by protecting people who lack capacity by providing a

flexible framework that places individuals at the heart of the decision making process

- By allowing people to plan ahead for a time in the future when they might lack the capacity for any number of reasons Mental Capacity and Deprivation of Liberty Safeguards 2005.

The safeguards provide a framework for approving the deprivation of liberty for people who lack the capacity to consent to treatment or care in either a hospital or are home that, in their own best interests, can only be provided in circumstances that amount to a deprivation of liberty. The safeguards legislation contains detailed requirements about when and how deprivation of liberty may be authorised. It provides for an assessment process that must be undertaken before deprivation of liberty may be authorised and detailed arrangements for renewing and challenging the authorisation of deprivation of liberty. The Code of Practice contains guidance on the deprivation of liberty safeguards.

It is particularly intended to provide guidance for professionals involved in administering and delivering the safeguards, who are under a duty to have regard to the Code. The Code is also intended to provide information for people who are, or could become, subject to the deprivation of liberty safeguards, and for their families, friends and carers, as well as for anyone who believes that someone is being deprived of their liberty unlawfully. Mental Health Act 2007 - amends the Mental Health Act 1983 and the Mental Capacity Act 2005.

It introduces significant changes which include:

- Introduction of Supervised Community Treatment. This new power replaces supervised discharge with a power to return the patient to hospital, where the person may be forcibly medicated, if the medication regime is not being complied with in the community.
- Redefining professional roles: broadening the range of mental health professionals who can be responsible for the treatment of patients without their consent.
- Nearest relative: making it possible for some patients to appoint a civil partner as nearest relative. Definition of mental disorder: introduce a new definition of mental disorder throughout the Act, abolishing previous categories
- Criteria for Involuntary commitment: introduce a requirement that someone cannot be detained for treatment unless appropriate treatment is available and remove the treatability test.
- Mental Health Review Tribunal (MHRT): improve patient safeguards by taking an order-making power which will allow the current time limit to be varied and for automatic referral by hospital managers to the MHRT. Introduction of independent mental health advocates (IMHAs) for 'qualifying patients'.
- Electroconvulsive Therapy may not be given to a patient who has capacity to refuse consent to it, and may only be given to an incapacitated patient where it does not conflict with any advance directive, decision of a donee or deputy or decision of the Court of Protection. Safeguarding Vulnerable Groups Act 2006 - is in response

to the Bichard Inquiry 2005, into the failings around the Ian Huntley case.

The SVG act is intended to prevent unsuitable people from working with vulnerable people and to reform current vetting and barring practices. The act sets out a legal framework for the Independent Safeguarding Authority (ISA) scheme which was to be introduced in 2009 (but is currently under review as a result of the 2010 General Election). Valuing People (Department of Health, 2001) - was the first Government White Paper on learning disabilities in England for 30 years.

It stresses the important role that Person Centred Planning can play in helping people with learning difficulties take charge of their own lives. The Guidance (Department of Health, 2002) stressed that Person Centred Planning is not a professional activity done to people; instead people themselves and their friends, families or other allies, must lead it. However, professional services still have an enormous role to play in responding in a more person centred way to people with learning difficulties.

For 2009 -10 the key priorities include: to ensure that the Personalisation agenda is embedded within all local authority services and developments for people with learning disabilities and their family carers, and is underpinned by person centred planning. " 'Valuing People Now', is the 'refresh' of this white paper in 2009 and is a new three-year strategy for people with learning disabilities (2009), DH and clearly state that good person centred planning should be happening, and will lead to better lives for people.

Putting People First - “ A shared vision and commitment to the transformation of Adult Social Care (2007), Department of Health. ” In the UK the government policy 'Putting People First' stated that person centred planning must become mainstream. Putting People First recognises that person-centred planning and self-directed support are central to delivering personalisation and maximising choice and control. In 2010 guidance was issued to help councils use person centred thinking and planning to deliver the personalisation agenda.

Putting People First is a public service reform programme, which is co-produced, co-developed and will be co-evaluated. It recognises that to achieve real change, users and carers must participate at every stage. This marks a change in status of people who use services, from ‘ consumers’ to ‘ co-producers’. set out four areas on which councils and their partners should focus in order to personalise services.

These areas are:

1. universal services – transport, leisure, health, education, housing and access to information and advice;
2. choice and control – shaping services to meet people’s needs, rather than shaping people to fit in with the services on offer;
3. social capital – care and support that individuals and their carers can get from their local community (friends, family, neighbours or community groups); and

4. early intervention and prevention – support that is available for people who need help to stay independent for as long as possible, to keep their home or garden tidy, or to start taking regular exercise.
- describe how a humanrights-based approach supports an individual to make decisions and take risks.

A human rights based approach (HRBA) to risk management means ensuring individuals know their rights and are being supported to participate in making choices and decisions. A human rights based approach to risk assessment balances the human rights of service users, their carers, and members of their communities. This is so risks can be managed more positively. A HRBA looks at risk through a ‘ Human Rights’ lens, identifies relevant equality and diversity issues, and maximises service user participation and empowerment.

A human rights based approach to risk, means ensuring service users are as involved as they can possibly be in their own risk assessment process. Whether the service user participates fully or contributes to a small aspect of their risk assessment, some involvement will almost always be possible. The ways in which you possibly apply this in your work practice is through things such as advocacy, direct payments, personalised services, person centred planning and support planning.

Outcome 4

Be able to support individuals to make decisions about risks 1. support an individual to recognize the potential risk in different areas of their life 2.

support the individual to balance choices with their own and others' health, safety and Wellbeing Positive risk taking is a process which starts with the identification of potential benefit or harm. The desired outcome is to encourage and support people in positive risk taking to achieve personal change or growth. The individuals could face risks in many different areas of their life including, risks relating to their health, their social life and also their finances and it is important to support the individual to recognise those potential risks.

The risk assessment looks at four areas of risk; risks to self, risks to others and risks from other and risks to property. Within each area of risk, common risk issues and difficulties (for example self harm, physical aggression, abuse issues) are itemised. It is also important that the individual realises that although they have a right to take risks they also have a responsibility towards themselves and others, including:

- Colleagues
- Families or carers
- Friends
- Other professionals
- Members of the public
- Advocates

And it is important that whilst maximising their quality of life they also need to maintain their safety, responsibilities to themselves and others for social emotional and physical reasons. Supporting an individual to recognise

potential risks whilst balancing the choices with their own and others health, safety and well-being involves:

- Empowering people to access opportunities and take worthwhile chances.
- Understanding the person's perspective of what they will gain from taking risks and understanding what they will lose if they are prevented from taking the risk. Ensuring the individual understanding the consequences of different actions - An informed choice means that a person has the information and support to think the choice through and to understand what the reasonably expected consequences may be of making that choice.
- Helping the individual to make decisions based on all the choices available and accurate information - It is important to remember that too much information can be oppressive and individuals have differing needs in relation to how information is presented to them.
- Being positive about risk-taking. Understanding a person's strengths and finding creative ways for people to be able to do things rather than ruling them out.
- Knowing what has worked or not in the past and where problems have arisen, understanding why
- supporting people who use services to learn from their experiences.
- ensuring support and advocacy is available
- sometimes supporting short term risks for long-term gains.
- ensuring that services provided promote independence not dependence

- assuming that people can make their own decisions (in line with the Mental Capacity Act) and supporting people to do so working in partnership with adults who use services, family carers and advocates and recognize their different perspectives and views
- developing an understanding of the responsibilities of each party
- promoting trusting working relationships. 3. describe how own values, belief systems and experiences may affect working practice when supporting an individual to take risks Giving people who use services choice and control over the care they receive is important if personalization is to become a reality.

The responsibility for encouraging risk-taking can make you feel they are being put in a difficult position trying to balance personalization with your own values and beliefs and also your duty to keep people safe. Because of your own past experiences you may feel that the risks involved, will result in problems, but you should not let this interfere with the individual's desires. Because you had a bad experience following a course of action does not necessarily mean this will happen to others. An example could be an individual wanting to join a 'lonely hearts' club.

Your own thought may be negative towards this course of action, possibly because you have personally had a bad experience or possibly because you feel this is not the best way to meet people. Your beliefs and experiences should not cloud the issue. It is important that you feel confident and equipped to support people you are caring for to assess and evaluate their own risks. Advice is readily available when facing difficult cases in the form

of risk enablement panels, which can share responsibility for making complex decisions when signing off a person's support plan.

The panel would usually involve the individual or any advocates or carers representing them; members of the local safeguarding adults board; the allocated social worker; and specialists such as a psychiatrist.

- record all discussions and decisions made relating to supporting the individual to take risks

It is important to ensure that any discussions and decisions made relating to supporting the individual to take risks or concerning risks, are recorded in their support plan. Records will need to be understandable to all the members of the team.

The aim of record keeping is to ensure that the right people have the right information to provide the best care for the service user and they also provide a record of what you and the individual have discussed and decided with regards risk taking. The records should also record any incidents which have taken place.

The reason for keeping the records are:

- To show that you have offered the individual choices
- To show that you have agreed the desired outcomes
- To show that the individual has given their consent.

This is important for two very important reasons: Responsibility – The records will indicate who is responsible for what parts of the plan, this avoids confusion as everyone is clear of what their responsibilities are

(Responsibility (for) can be defined as a set of tasks or functions that an employer, professional body, court of law or some other recognised body can legitimately demand.)Accountability- means the person is contractually accountable to their employer and also accountable to the law, for any actions or omissions in their practice and must always be able to justify their decisions.

When work is being either distributed or delegated, the individual who carries it out needs to be competent to do so. Competence is an individual's ability to effectively apply knowledge, understanding, skills and values within a designated scope of practice. (Accountability describes the mechanism by which failure to exercise responsibility may produce sanctions such as warnings, disciplining, suspension, criminal prosecution, or deregistration from professional status. It can be called 'answerability').

Where a professional or organisation makes a decision not to support an individual to pursue a particular decision or course of action, they must be able to explain this and demonstrate that they have thought through and discussed in a balanced and proportional way the potential consequences of refusing to support the risk. Where the individual is able to make an informed choice and still wishes to pursue a high risk decision or choice, having a signed risk assessment is one way of showing that they are aware of the risks and are willing to take them.

This provides organisations and professionals with a significant degree of protection for their support of the decision should things go wrong.

Outcome 5

Be able to support individuals to take risks 1. complete a risk assessment with an individual following agreed ways of working Risk assessment is the activity of collecting information through observation, communication and investigation.

It is an ongoing process that involves considerable persistence and skill to assemble and manage relevant information in ways that become meaningful for the users of services (and significant other people) as well as the practitioners involved in delivering services and support. To be effective it needs disabled adults and older people, their families, carers, advocates and practitioners to interact and talk to each other about decisions that have been taken and their appropriateness in the light of experience.

Where a risk assessment is needed, a decision then has to be taken about whether or not positive risk-taking is necessary to achieve certain outcomes for the person concerned. It will not always be appropriate to take positive risks but this has to be determined in partnership with the person affected, and their family where appropriate. It is a professional judgement that should not be influenced by an overly cautious approach to risk.

At the same time though, positive risk-taking is not negligent ignorance of the potential risks – nobody benefits from allowing risks to play their course through to disaster. . communicate the content of the risk assessment to others It is important to communicate and work in a consistent way with all those supporting the individual. Information gathering and sharing is important. It is not just an essential part of risk assessment and management, but also key to identifying a risk in the first place. It is

important to communicate the content of the risk assessment to all relevant staff. It will also be important to discuss and explain the risk assessment with the individual's carer and family.

The individual's goals and targets should be discussed with all concerned, to aid understanding regards the risk assessment and to ensure all those involved are aware of the desired outcomes. However, the use and sharing of information must respect the principles outlined in the Data Protection Act 1998.

- support the individual to take the risk for which the assessment has been completed

Once the support plan has been completed and the risks defined it is important to support the individual to take the risks. This may involve discussing the risk assessment in depth with the individual's family.

The individual's desired outcomes could conflict with those of carers, especially when the latter placed more emphasis on safety while the individual was prepared to accept a greater level of risk in order to maintain independence. Differences in attitudes to risk had to be tackled through 'good social work', to reinforce the individual's preferences while helping the family to distinguish between unconventional and dangerous behaviors. Another way of supporting the individual to take the risk in the first instance, could involve a trial run.

An example could be where the individual wants to make an independent trip in to town using public transport.

- On the first trip you could accompany the individual on each step of the journey.
- On the second trip, you could accompany them to the town and then arrange to meet with them later in the day.
- On the third trip, you may just accompany them to the bus stop. Gradually you can reduce the amount of support you provide. Another method of support could be to have a contingency plan in case things don't quite go according to plan.

If we look again at the last scenario, what would happen if the individual missed the last bus home? By ensuring they have a pre-arranged telephone number of their next of kin or carer they can make them aware of the problem. Alternatively, they may have the telephone number of the local minicab office who would bring them home as an alternative. It is also important that the individual knows what to do if things do go wrong. You can support them to take risks by ensuring they have clear information and advice about what to do if they have any concerns.

For example, they should be aware of and be able to recognize and identify abuse or neglect and know where and how they should seek help if necessary. Your support doesn't end once the risk assessment has been carried out. 4. review and revise the risk assessment with the individual After each risk assessment has been agreed it is important that it is monitored and reviewed in case any revisions are necessary. Risks may change as circumstances change, so they should be reviewed regularly. An assessment is a snapshot, whereas a risk assessment is an ongoing thing.

Risk assessments should be reviewed periodically and whenever circumstances change to ensure they remain current. At the time the risk assessment is made it should include the signatures of everyone involved in the assessment and a review date should be identified. It is important to review and revise risk assessments so that the success of the positive risk-taking can be assessed and any necessary adjustments can be made. It may be necessary for the individual to have access to further resources to enhance the plan or adaptations could be made to help the individual meet their planned outcomes.

When positive risk-taking has a negative consequence, it is necessary to identify what has gone wrong and how the assessment and management of the risk contributed to this. Inevitably if we are supporting individuals to have more choice and control in their lives through positive approaches to managing risk, things are likely to go wrong from time to time. If this happens and the risk taken results in a negative outcome for the individual, there is no doubt that the risk-taking process will come under scrutiny and the way in which this process worked to minimize the foreseeable risks will be considered.

If the risks taken do not meet the planned outcomes for the individual then they may have to be reviewed and revised. 5. evaluate with the individual how taking the identified risk has contributed to their well-being. Well-being describes the way we think and feel about ourselves and others, our confidence, and our ability to control things in our life. We all need to protect our wellbeing and this can be done by taking part in physical activity and

having opportunities for relaxation and social activities. These can increase our resilience to cope with life's difficulties and the ability to enjoy life.

You will need to evaluate, with the individual, how taking the identified risks has contributed to their well-being and quality of life. This will involve looking at the positive and the negative consequences and outcomes of their choices. Has taking the risks met the individual's needs and achieved their desired outcomes. Taking the identified risks should result in the individual feeling empowered and having greater independence, control and a sense of 'normality' about their lives. By supporting an individual to take positive risks, it can help them to evaluate alternative courses of action and can build confidence.

The experience of failure, as a result of risk-taking in a safe environment, can help to build resilience to setbacks and help individuals to manage risk better in the future.

Outcome 6

Understand duty of care in relation to supporting positive risk-taking 1. explain how the principle of duty of care can be maintained while supporting individuals to take risks Ultimately, you have a statutory duty of care and a responsibility not to agree to a support plan if there are serious concerns that it will not meet an individual's needs or if it places an individual in a dangerous situation.

Whilst an individual can choose voluntarily to live with a level of risk and is entitled to do so (with the law treating that person as having consented to

the risk) the local authority is not obliged to fund it. There is an important distinction between putting people at risk and enabling them to choose to take reasonable risks. Inevitably if we are supporting individuals to have more choice and control in their lives through positive risk taking, things may go wrong from time to time.

A defensible decision is one where those involved in the risk assessing process:

- Used reliable assessment methods
- Acted responsibly in relation to their duty of care
- Were not negligent
- Assessed and took steps to manage and minimise foreseeable risks
- Recorded decisions and subsequently checked they were carried out
- Followed policies, procedures and guidance
- Involved the person and other relevant people in the process
- Supported people to make informed decisions
- Identification of positive and negative risks

Involvement of people who use services and those who are important to them – this includes people who form the individual's informal 'circle of support', who are involved from the beginning to gather information, define what the risks are from the individual's point of view and to discuss ways to enable and manage these risks. Positive and informed risk-taking – this is built on a strengths-based approach to the person and looks at creative ways for people to be able to do things rather than ruling them out. Proportionality

- this means that the time and effort spent on managing a risk should match the severity of that risk.

The approach should also explore the consequence of not taking the risk in question, such as loss of autonomy or restriction of choice. Contextualizing behavior – this means knowing about the person's history and social environment, their previous experience of risk, what has and has not worked in previous situations.

Defensible decision making – this means recording a clear rationale for all the decisions made and the discussions that led to the decisions, including reference to relevant legislation such as the Mental Capacity Act or the Human Rights Act. A learning culture – this requires a commitment to ongoing learning and the use of reflective practice for people working at the frontline. Tolerable risks – this involves negotiating and balancing issues of risk and safety to identify what is acceptable for everyone concerned (the individual and others including the community) on a case by case basis.

- describe what action to take if an individual decides to take an unplanned risk that places him/herself or others in immediate or imminent danger

“Imminent danger” refers to any danger or dangerous condition that would not normally take place. If you think an individual is about to take an unplanned risk which will place them or others in immediate or imminent danger it is important to take appropriate corrective and preventative action and stop the activity immediately. An individual who is injuring himself/herself or is threatening physical harm to others may be restrained in

an emergency to safeguard the individual and others. Risk assessments should include contingency measures that address risks arising from unplanned events.

Physical intervention is: " A method of responding to the challenging behaviour of people with a learning disability and/or autism, which involves some degree of direct physical force. " Physical intervention may be the only course of action. Staff should be equipped with a range of skills to deal with and de-escalate potentially violent situations, as well as a range of restraint techniques that will allow for use of the minimum level of force possible. Physical intervention is only used in response to challenging behaviour and to restrict the movement and mobility of the person concerned.