# Safeguarding – reactive phase/assumptive risk

Managing risk

Aims of session

- ❏ To be able to take a strategic view within the service/ organisation re. safeguarding in all aspects this underpinned by an understanding of risk

- ❏ To understand the structure and impact that a robust safeguarding CULTURE brings.

- ❏ To understand how the impact of risk and its' effective assessment is key to the management of risk

- ❏ To understand what individuals bring in terms of the perception of risk and bias
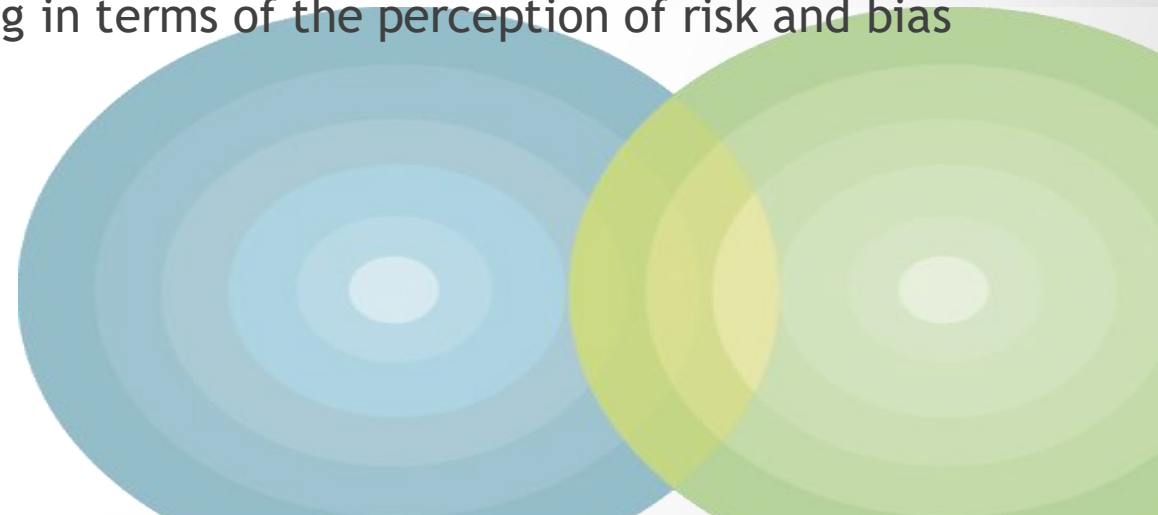
risks in **residential/service** care

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an overview of main risk areas

Risks FROM staff in residential care

- 10-12 allegations per 100 children across the UK
- 2-3 allegations per 100 substantiated
- ½ allegations physical abuse or excessive physical restraint – 75% about men – mirrors the data from education
- Heightened risk of neglect for disabled children
- Assumptions made and decisions based upon them
- Blurring of boundaries- never assume it does not happen-and "leeway" for that young person and the approach to safeguarding
- A person determined to come into to children's' services for their own reasons in accessing children will succeed
- Perception of risk changes with longer established members of staff- viewed as being less likely to abuse.
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What happens when cultures or systems go wrong?

- regression therapy (Leicestershire)1992

- pindown (Staffordshire)-report June 1990

- confrontational restraint (Aycliffe)report 1993

- Winterbourne View- 2012

- Hesley phase 1 report Oct. 2022

- IICSA final report October 2022

- "Out of Harms ' Way" – Ann Longfield report December 2022

- Officially sanctioned
- Publicly lauded and acclaimed as a "good thing"
- Not appropriately monitored and inspected
- Managers and leaders ALLOWED a culture of abuse to flourish

Systems and failures like this can happen anywhere- are you sure they could not happen in your home / your organisation?

Risks from other children and young people.

- child sexual exploitation/CCE
- peer on peer/child on child(latter KCSIE 2022) abuse....
- bullying
- violence
- abuse on social media- various forms
- emotional abuse
- Relationships
- Incel culture / misogyny (current example in following the influencer Andrew Tate)

Can you be sure that you have safeguarded as reasonably as you can for these issues? What others must you consider ? How do these issues feed into your wider culture?

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Building on the first session are these protective factors in place in your service and

your home?

- strong leadership
- positive staff culture
- close inclusive relationships with young people
- high quality supervision
- effective monitoring and placement review
- good interagency communication
- use of LADO
- child centred, rights based approach
- calm, authoritative staff, with strategies to respond
- external review-if not what are you going to do about it ?
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Managing risk and safeguarding "reasonably"

- **Uncertainty and risk** are features of child protection work…Risk management **cannot** eradicate risk: it can only try to reduce the **probability of harm**….
- Those involved in child protection must be "**risk sensible**".
- There is no option of being **risk averse** since there is **no** absolutely safe option

The Munro Review of Child Protection: A Child Centred System, May 2011

- "The big problem for society (and thus for professionals) is working out a realistic expectation of professionals ability to predict the future and manage risk of harm to children and young people"
- "Risk assessments are fallible and can err by overestimating or underestimating. A Well thought out assessment may indicate the risk to the family is low, However low probability events happen. "
- "Professionals, particularly social workers, currently face the possibility of censure – damned if they do, damned if they don't"

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Risks

- What influences our reactions to risk?
- Our own previous experiences- personal and professional
- Our knowledge/ training/ formal understanding of risk
- Bias / unconscious bias
- Competing issues e.g. financial
- Assumptive risk/ assumptions

- Any other factors?

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Unconscious bias

- **Unconscious biases** are social stereotypes about certain groups of people that individuals form outside their own conscious awareness. Everyone holds **unconscious** beliefs about various social and identity groups, and these **biases** stem from one's tendency to organise social worlds by categorising.

- **Affinity bias** refers to when you unconsciously prefer people who share qualities with you or someone you like. It occurs because your brain sees them as familiar and relatable, and we all want to be around people we can relate to.

- **Attribution bias** refers to how you perceive your actions and those of others. It stems from our brain's flawed ability to assess the reasons for certain behaviours – particularly those that lead to success and failure. We generally attribute our own accomplishments to our skill and personality, and our failures to external factors – to hindrances that we believe are beyond our control. We are less likely to blame and find fault in ourselves
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Examples of unconscious bias- recognise any?

- **Conformity bias** happens when your views are swayed too much by those of other people. It occurs because we all seek acceptance from others – we want to hold opinions and views that our community accepts.

- **Confirmation bias** refers to how people primarily search for bits of evidence that back up their opinions, rather than looking at the whole picture. It leads to selective observation, meaning you overlook other information and instead focus on things that fit your view. You may even reject new information that contradicts your initial evidence.

- **Contrast effect**

- This type of bias occurs when you assess two or more similar things and compare them with one another, rather than looking at each based on their own merits.

- **Gender bias** is simply a preference for one gender over the other. It often stems from our deep-seated beliefs about gender roles and stereotypes.

- **Halo and horns** effects you focus on either a positive or negative feature to the exclusion of all else

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Risk analysis – principles to consider

We need to **distinguish…**

what has brought things about in the **past**

what keeps things going in the **present**

what is likely to happen in the **future**

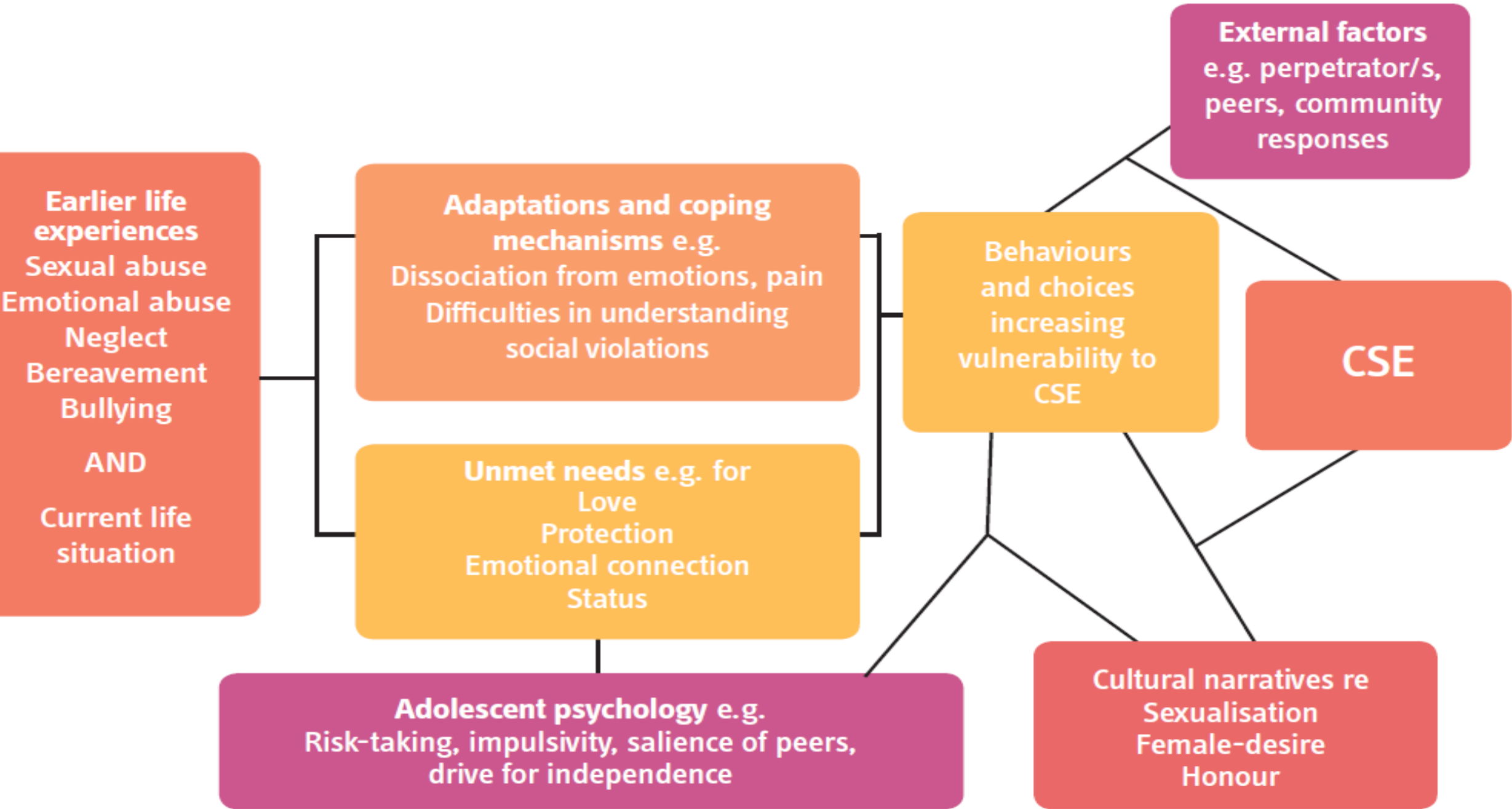create a balance in terms of our approach to risk

Figure 1 *An illustration of the presenting and underlying causes for CSE*

Impact risk assessment

- Initial identification of risk in tender/care plan docs
- What do we know? What <u>don't</u> we know?
- Pre-placement assessment
    - Social work reports
    - Voice of young person, family, significant others
    - Previous carers – what makes <u>you</u> so different?
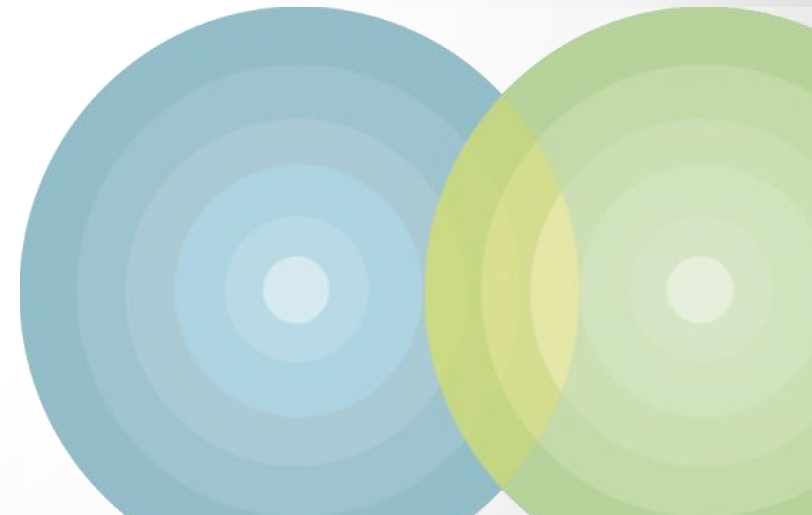   - Interagency contribution

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  - Locality
  - Staff
  - Physical environment

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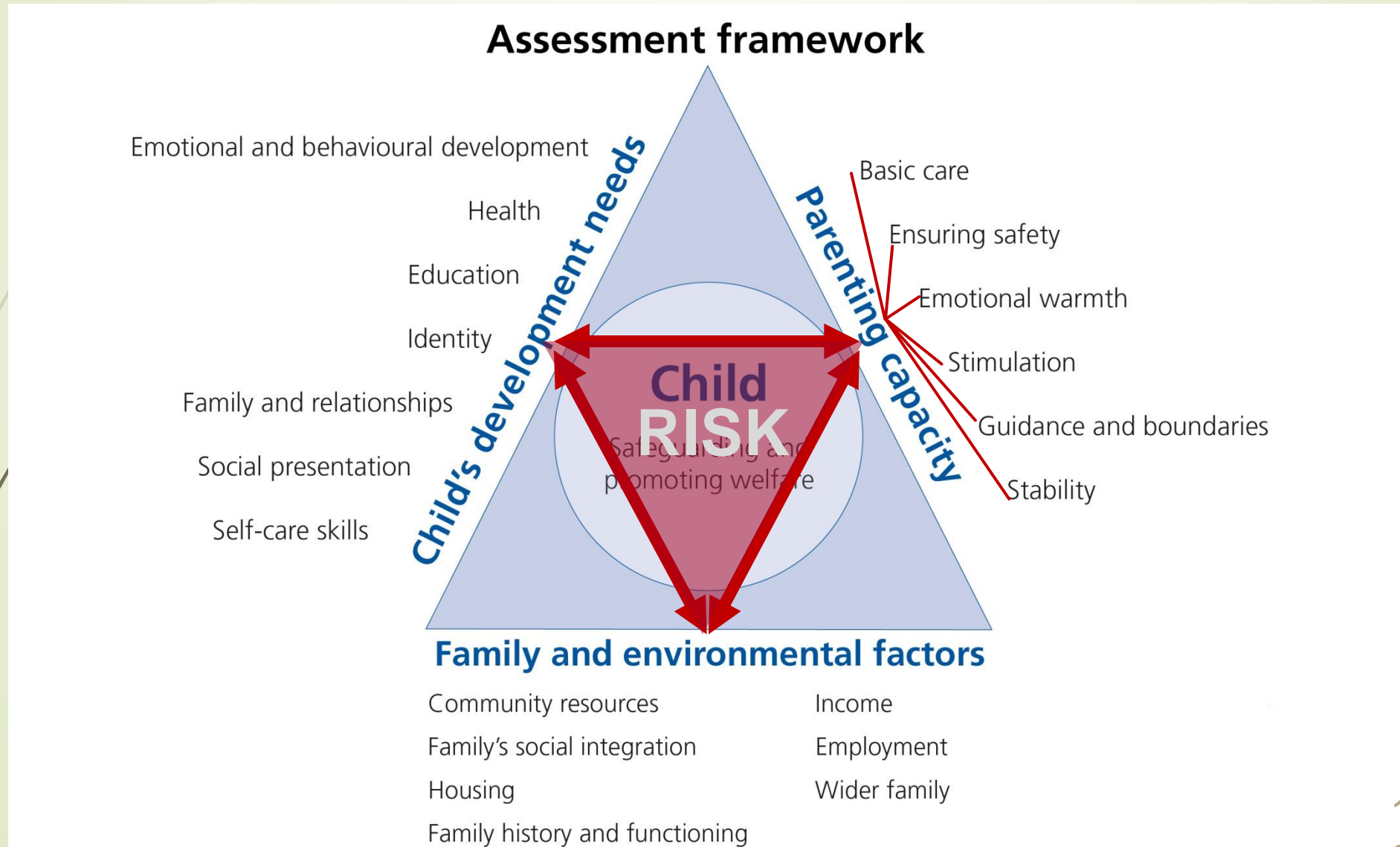- Is this a match?? Whose decision is this?
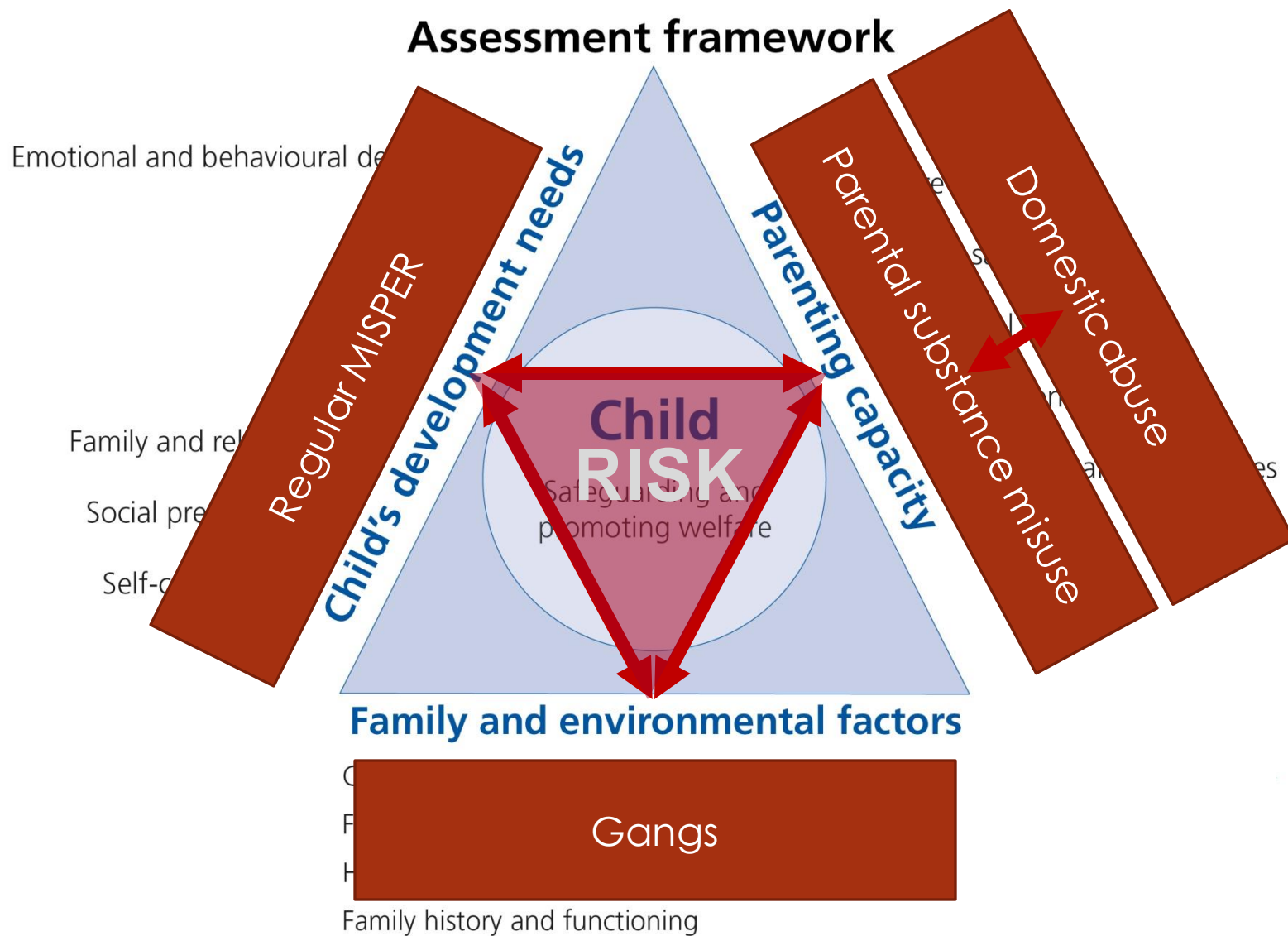-

Impact Risk Assessment – summary page

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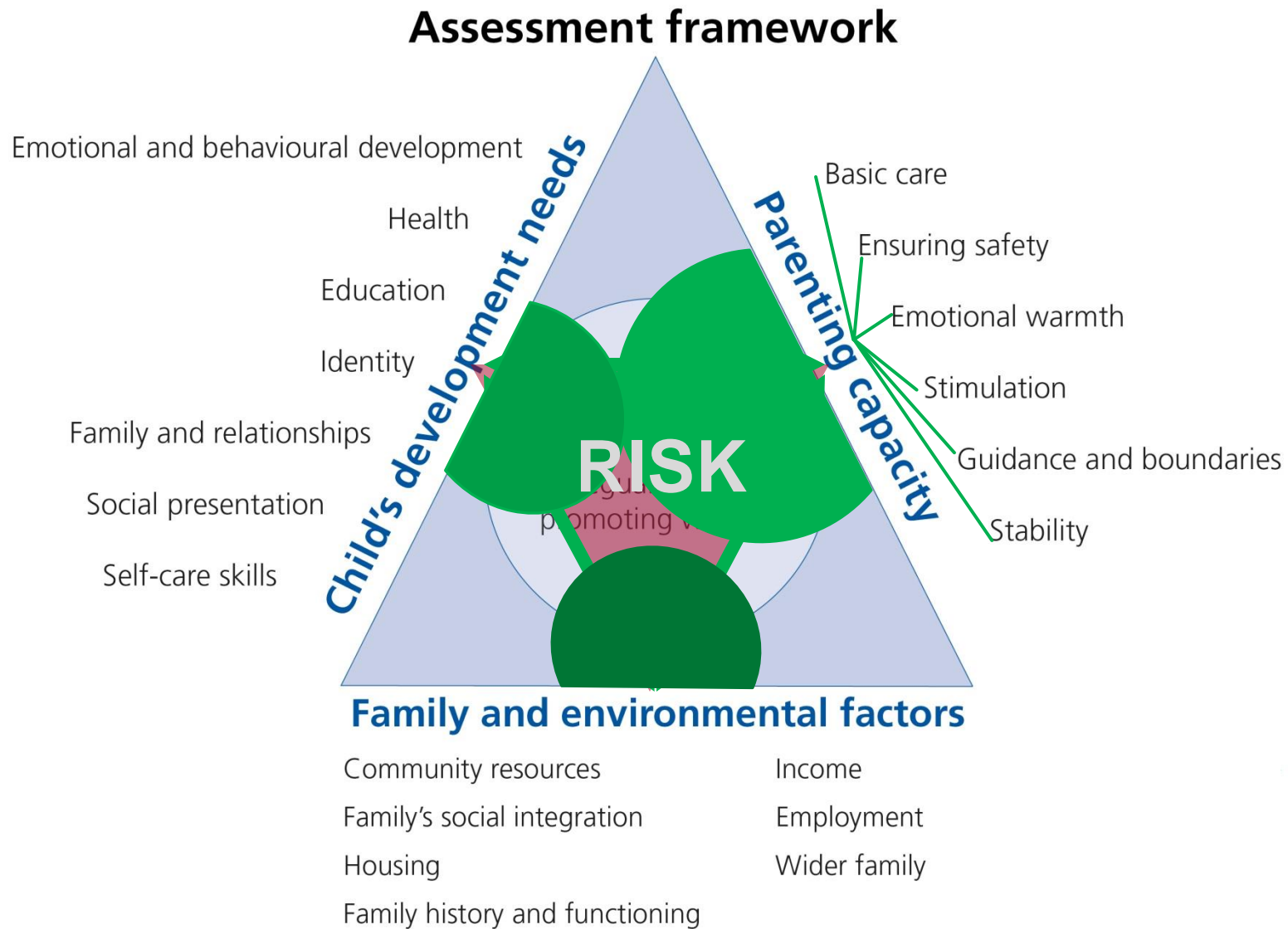- Is this a match?? Whose decision is this?

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Drawing risk from need- what does the child need:

Specific risks

Assessment framework

Emotional and behavioural de[velopment]

Family and rel[ationships]

Social pre[sentation]

Self-c[are skills]

Child's development needs

Regular MISPER

Child
RISK
Safeguarding and promoting welfare

Parenting capacity

Parental substance misuse

Domestic abuse

Family and environmental factors

Gangs

Family history and functioning

Strengths in place ?

Principles :

- Risk and need are two sides of the same coin
- Risk and the right to take risk are normal part of life and can be positive
- Assessing and managing risk are part of the same system
- Risk has to be understood broadly in relation to all aspects of children's well-being
- Risk includes looking at current risks and the long term impact of those risks
- Risk involves looking at the consequences of failing to meet needs and the impact on the child.
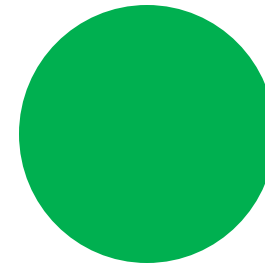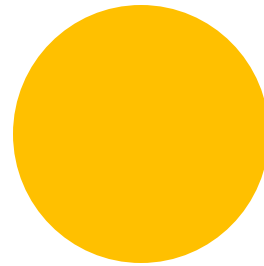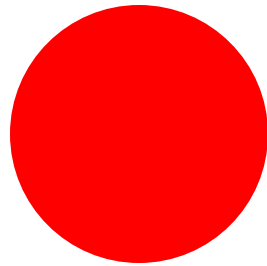
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Risk and being reasonable :

- all reasonable steps have been taken;

- reliable assessment methods have been used;

- information has been collected and thoroughly evaluated;

- decisions are recorded, communicated and followed through;

- policies and procedures have been followed;

- managers adopt an investigative approach and are proactive
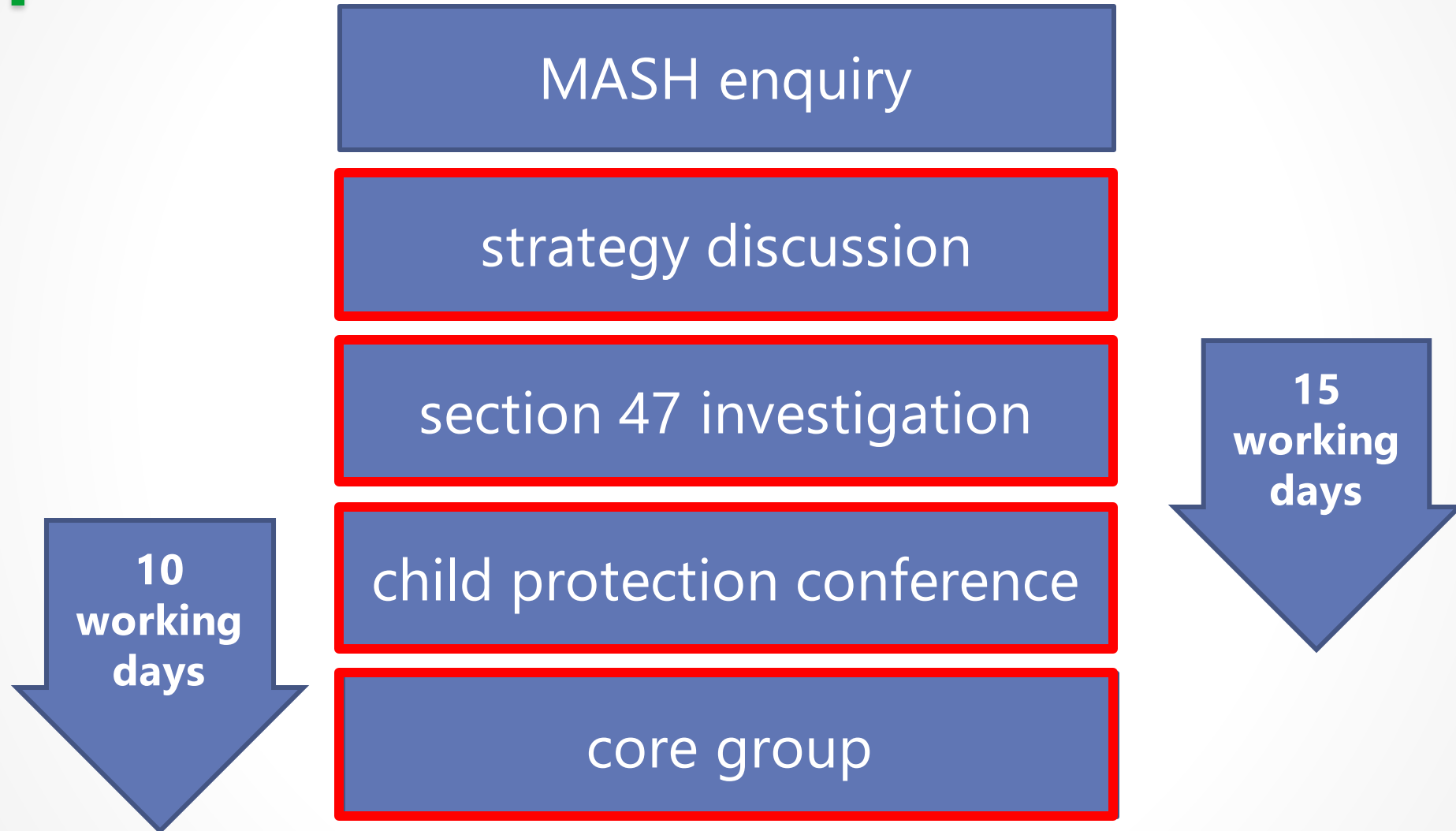
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the **process**

MASH enquiry

immediate	24 hours	3 working days for information 5 working days for decision

the **process**

MASH enquiry

strategy discussion

section 47 investigation

child protection conference

core group

10 working days

15 working days

Plans

- Risk management / support plans must be clear
- Regularly reviewed and changes indicated and communicated
- Aligned to a range of other risk assessments and documents such as behaviour support plans
- Aligned to impact risk assessments
- Plans should be dynamic and responsive.

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Records- what should they look like?

- be **specific** – who said what, when
- use **actual words** of children and parents
- add **analysis** – *why* you are worried about what you have seen or heard
- **link** to the threshold tool, chronologies
- set out the **actions** you think are required
- what do we **know?**
- what do we **think?**
- what should we **do?**
- Child's full name and date of birth
- Date and time of the concern
- Signed , dated with date and time of the record, job role of the person creating the record
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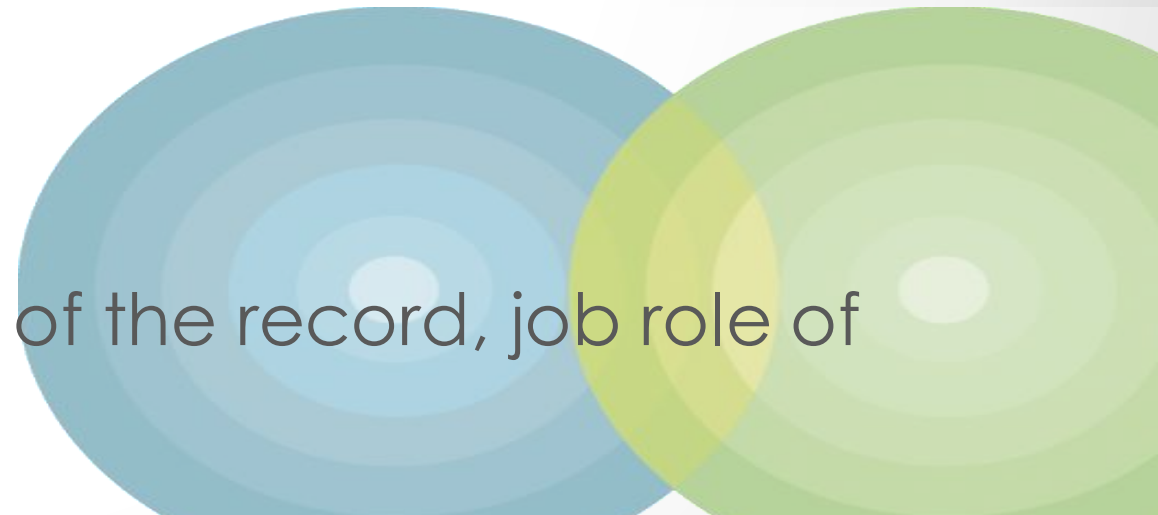
So go away to possibly review risk management and alignment with a range of factors:

Any thoughts , questions .

My thanks Chris