

## A risk and resilience model to support the assessment of safeguarding and welfare concerns involving children

### Introduction

This risk and resilience assessment model has been endorsed by the Luton Safeguarding Children Board to assist front line staff in their assessment of situations where there are concerns about a child's safety and welfare. It aims to assist professional decision making, not to replace professional judgement.

The model supports a systematic approach to analysis and decision-making within child protection which is based on research. (See reference list at Appendix 3)

It aims to promote consistency among child protection workers and front line agency staff across the authority by providing a framework to ensure structured **consideration** of assessment criteria relating to risk and resilience. Please note, across the Luton Safeguarding Children Board partnership, there are a range of tools used by professionals to support the early identification of vulnerable families including the Vulnerability Factor Identification tool (VFI) and the Graded care Profile (GCP). Each of these tools, including the risk and resilience model can be used together or individually to identify and support vulnerable children.

### The Vulnerability Factor Identification Tool (VFI)

This tool is primarily used by health care staff (health visitors and school nurses) to identify at an early stage, vulnerable children who can then be given additional care via the Universal Care Plus or Universal Care Partnership Plus programmes.

### The Graded Care Profile (GCP)

This tool can be used by all practitioners to support the early identification of neglect. It is a practice tool which gives an objective measure of the quality of care in terms of a parent/carer's commitment. The quality of care, both negative and positive, is measured across 4 different domains of a child or young person needs - Physical, Safety, Love & Esteem. The GCP has been developed to quantify care neglect by objectively displaying both the strengths and weaknesses in different grades (1 to 5), to inform judgements by professionals and parents/carers working together about the intervention required and to measure progress.

Risk and resilience assessment is the *process* used to determine the **level** and **likelihood** of harm and the **seriousness and potential impact** of the harm or danger given the current information, family characteristics and functioning.

The process then supports the management of risk and considers which interventions are needed to mitigate the threat to the child and increase their resilience and protective factors. "Risk management cannot eradicate risk; it can only try to reduce the probability of harm."<sup>1</sup>

The risk and resilience assessment *process* can be used at the point of the first contact with the child and family or at any subsequent point in the life of the case when child welfare is of concern, including when a decision is to be made about reducing the level of intervention e.g. ending a child protection plan, or returning a child to live with their family. A repeated assessment process can provide an audit trail which can demonstrate the changes that have occurred to the level of risk and resilience, and the impact of any

intervention.

The model has been developed as a tool for social workers but can be used by any professional working with children and young people, to assist them in understanding the needs of the child and family, and determining the right course of action, including whether to make a referral to children's social care.

**NB** This tool is intended to support consistent professional decision making based on evidence. If at any time practitioners have information that leads them to believe that a child is at immediate risk of significant harm, they should take action according to child protection procedures.

## **Underpinning principles**

- Promoting partnership working
- Involving children young people and their families
- Transparency of process
- Recognise positives and build on strengths
- A continuing process, not a single event
- Grounded in evidence based knowledge

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<sup>1</sup> The Munro Review of Child Protection Part One – A Systems Review Professor Eileen Munro

## Guidance for Completion

The following risk and resilience assessment tool has been developed to support the model in practice.

The tool can be completed individually, in discussion with supervisors and other professionals, or by a team of professionals from any discipline. It can be used in Strategy discussions, Team around the Child or Child in Need meetings or as part of any formal assessment, including Initial and Core Assessments. It can be used directly in discussion with children and families, and will help involve them in the analysis.

The tool helps to inform the assessment process and support good analysis by providing a structured approach to obtaining the necessary information and considering relevant factors. It supports professional judgement, requires reflective discussion and should not be seen as a mechanistic process.

The tool is in three stages:

1. Identification of the risk of significant harm
2. Evaluation of the relative strengths of the child's levels of vulnerability and resilience, and of adversity and protective factors in the environment.
3. Analysis and managing the risk

The use of the resilience / vulnerability matrix at stage 2 provides a visual baseline analysis. Repeated use over time can be used to help assess progress.

Any 'ticks' put into the framework should be clearly evidenced in case notes in the child's file.

You should use a separate form for each individual child in the family.

In sections 4 and 5, which relate to the parental role, the focus should be on the primary care-giver.

The use of this model and tool should not require extra work, but should help to structure and add value to what practitioners already do.

In working with any child, you should be mindful of specific needs arising from race, language, culture, disability or sexual orientation. If you identify additional vulnerability factors arising as a result of difference e.g. harassment or prejudice, either within the family or their environment you should record these as additional factors in Section 2 Question 8 and Section 4 Question 15.

## Risk and Resilience Assessment Tool

Child's name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Home address: \_\_\_\_\_

Parent/Primary caregiver: \_\_\_\_\_ Parent/ Secondary caregiver: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Person completing this tool: \_\_\_\_\_ Designation: \_\_\_\_\_ Agency: \_\_\_\_\_

People contributing (List below) \_\_\_\_\_ Date of completion: \_\_\_\_\_

**What are the circumstances leading to the use of this tool? (Brief summary)**

### Section 1

**Is the child/young person at risk of significant harm?**

Significance of harm		Yes ✓	No ✓	Don't know ✓	NA
1	Does the suspected harm meet the definition of abuse in the child protection procedures (physical, emotional, sexual, neglect)? Please state which: -				
<b>If no, move on to Section 2</b>					
2	Has the child/young person been injured or physically harmed?				
3	Is the pattern of harm escalating?				
4	Is the pattern of harm continual?				
5	Has the parent or caregiver made a threat to cause serious harm to the child?				
6	If sexual abuse is alleged, does the perpetrator continue to have access to the child/young person?				

	<b>Significance of harm</b>	<b>Yes</b> ✓	<b>No</b> ✓	<b>Don't know</b> ✓	<b>NA</b>
7	Is there a previous history of maltreating or neglecting a child?				
8	Are the injuries/incidents a one off event/cumulative/episodic? – If yes, state which:				
9	Did the injuries/incidents result from spontaneous actions, neglect or intent? If yes, state which:				
10	Is the parents' explanation inconsistent with the injuries/incidents?				
11	Are the injuries/incidents likely to recur?				

**Additional notes:**

**Impact on the child:**

Question	Response
What is the severity and duration of the harm?	
When and how is the child at risk?	
What does the child mean to the family? What role does the child play e.g. scapegoat, protector?	
What are the effects on the child's current development?	
What may be the long-term effects?	
What is the child's reaction to and perception of the harm?	
What are the child's needs, wishes and feelings regarding intervention and likely outcomes?	

**Is the harm significant?**

**Is immediate action required? If yes, state what action, by whom:**

**Section 2 - What are the factors relating to the child/young person that increase his/her vulnerability?**

	<b>Vulnerability</b>	<b>Yes ✓</b>	<b>No ✓</b>	<b>Don't know ✓</b>
1	Is the child under 12 months? (Young children are more vulnerable. Any physical harm to a child under 12 months must be considered serious)			
2	Is the child under aged between 12 months and 5 years? (they are unable to protect themselves)			
3	Does the child have a disability, significant or chronic illness? (Children with disabilities, chronic illness or behaviour problems are more vulnerable to abuse or neglect) Specify:			
4	Does the child/young person present as fearful of the parent or other household member? (A fearful, withdrawn or distressed child may indicate that the family environment is characterised by “low warmth/high criticism” and they are less likely to be protected by their parent.			
5	Is the child/young person engaging in self harm, substance misuse, and dangerous sexual or other risk taking behaviour? (This maybe an indicator of past or current abuse or harm)			
6	Does the child have asylum seeking status? (They are vulnerable as a result of their life experiences, and absence of support networks)			
7	Does family or child identify areas of vulnerability that are not included in the list above? If so please list: -			
8	Do the professionals who know the child or family identify areas of vulnerability that are not included in the list above? If so please list:			

**Additional notes:**

When completed, plot your responses on the Risk/Resilience matrix – by marking the number of ‘Yes’ responses on the **lower** section of the vertical axis.

**Section 3 - What are the factors relating to the child/young person that increase his/her resilience?**

	<b>Resilience</b>	<b>Yes ✓</b>	<b>No ✓</b>	<b>Don't know ✓</b>
<b>1</b>	Does the child/young person have a strong attachment to a main caregiver?			
<b>2</b>	Does the child/young person have good self esteem?			
<b>3</b>	Is the child/young person sociable?			
<b>4</b>	Does the child/young person have friends?			
<b>5</b>	Has the child/young person experienced positive parenting?			
<b>6</b>	Is the child/young person comfortable with their physical appearance?			
<b>7</b>	Does the child/young person have talents and/or interests?			
<b>8</b>	Does the child/young person take part in leisure and/or sport activities?			
<b>9</b>	Does the child/young person have a positive experience of school?			
<b>10</b>	Does family or child/young person identify areas of resilience that are not included in the list above? If so please list:			
<b>11</b>	Do the professionals who know the child or family identify areas of vulnerability that are not included in the list above? If so please list:			

**Additional notes:**

When completed, plot your responses on the Risk/Resilience matrix – by marking the number of ‘Yes’ responses on the **upper** section of vertical axis.

**Section 4 - What are the factors relating to the parent or caregiver, and their environment that increase the risk to the child/young person?**

	<b>Adversity</b>	<b>Yes ✓</b>	<b>No ✓</b>	<b>Don't know ✓</b>
<b>1</b>	Has either parent/care-giver caused significant harm to any child or young person in the past (once a person has harmed a child there is an increase likelihood that this behaviour will re-occur)			
<b>2</b>	Is either parent/ care-giver's explanation of the harm inconsistent or minimised? (Where a parent fails to accept responsibility for their actions, there is a higher likelihood of future significant harm)			
<b>3</b>	Is either parent/ care-giver unwilling to engage meaningfully?			
<b>4</b>	Is either parent/care-giver's behaviour violent or out of control?			
<b>5</b>	Is either parent/care-giver's ability to protect the child impaired due to mental illness, physical or learning disability or domestic abuse?			
<b>6</b>	Is either parent/care-giver experiencing a high level of stress? Stress factors may include poverty, financial issues, health, racial abuse, bereavement or separation.			
<b>7</b>	Does either parent/care-giver have unrealistic expectations of the child, or act in a negative way toward them?			
<b>8</b>	Does either parent/caregiver have a poor caring relationship with the child or young person?			
<b>9</b>	Does either parent/care-giver have a substance misuse problem (Substance misuse may lead to poor supervision, neglect, harmful responses through altered consciousness and a risk of harm form others through inability to protect?)			
<b>10</b>	Does either parent/care-giver refuse access to the child or young person?			
<b>11</b>	Is either parent/caregiver under 21 years			
<b>12</b>	Has either parent/caregiver experienced childhood neglect or abuse (parenting skills are frequently learned or modelled on the experience of being parented, although later positive experiences can counteract early childhood experiences)			
<b>13</b>	Is the physical environment chaotic, hazardous or unsafe?			
<b>14</b>	Is the environment overly sanitised, where child's needs are not recognised?			
<b>15</b>	Does family or child identify areas of adversity that are not included in the list above? If so please list:			
<b>16</b>	Do the professionals who know the child or family identify areas of adversity that are not included in the list above? If so please list:			

**Additional notes:**

When completed, plot your responses on the Risk/Resilience matrix – by marking the number of 'Yes' responses on the **left hand** section of horizontal axis.

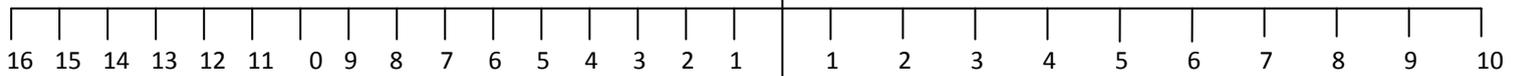
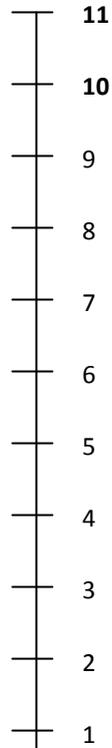


# Resilience/Vulnerability Matrix

Name of child:

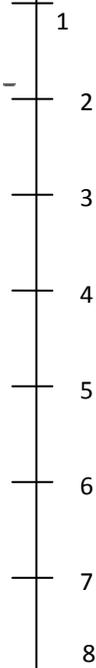
Date of completion:

## RESILIENCE



**ADVERSITY**

**PROTECTIVE ENVIRONMENT**



**VULNERABILITY**

## **Explanation.**

A resilient child living in a protective environment will be represented by a parallelogram located in the top right hand quadrant of the matrix.

A vulnerable child living in an adverse environment will be represented by a parallelogram located in the bottom left hand quadrant of the matrix.

A vulnerable child in a protective environment will be represented by a parallelogram located in the bottom right hand quadrant of the matrix.

A resilient child living in an adverse environment will be represented by a parallelogram located in the top left hand quadrant of the matrix.

Most children will demonstrate aspects of both vulnerability and resilience and live in environments which include both protective and adverse factors, but the shape and location of the parallelogram will show which are the dominant factors for this child.

## **Any additional comments on the completed matrix**

## Section 6 – Analysis

**Managing the risk - what needs to change in order to make the situation safer and healthier for the child?** Your aim, in managing the risk, is to strengthen and build on the resilience and protective factors, and diminish the identified risk factors.

Question	Response
Is the child safe without any intervention?	
What is your understanding of the balance and relative strengths of the risks and protective factors? Are the protective factors outweighed by the risk factors?	
Describe the factor(s) which are the most significant for the child in terms of a) reducing or b) increasing the probability of future harm?	
What is your assessment of the likely impact of the risk(s) on the child’s health, safety and development?(If more than one, address each separately)	
Specify what needs to change in order to make the situation safe for the child, to reduce the risk and adversity faced by the child, and strengthen their resilience and their protective environment?	-
What is the capacity of the family to achieve this change?	
What are the advantages of intervention? How likely is it that intervention will achieve and maintain necessary changes?	

<p>What are the risks (if any) associated with intervention in the short or long term?</p>	
<p>What does the child/young person and family want to happen?</p>	
<p>What would indicate that progress is being made?</p>	

**Is there any other information you need to complete this tool? Please note below:**

**Summary of analysis:**

-

Discuss your analysis with your supervisor.

Date of discussion with supervisor:

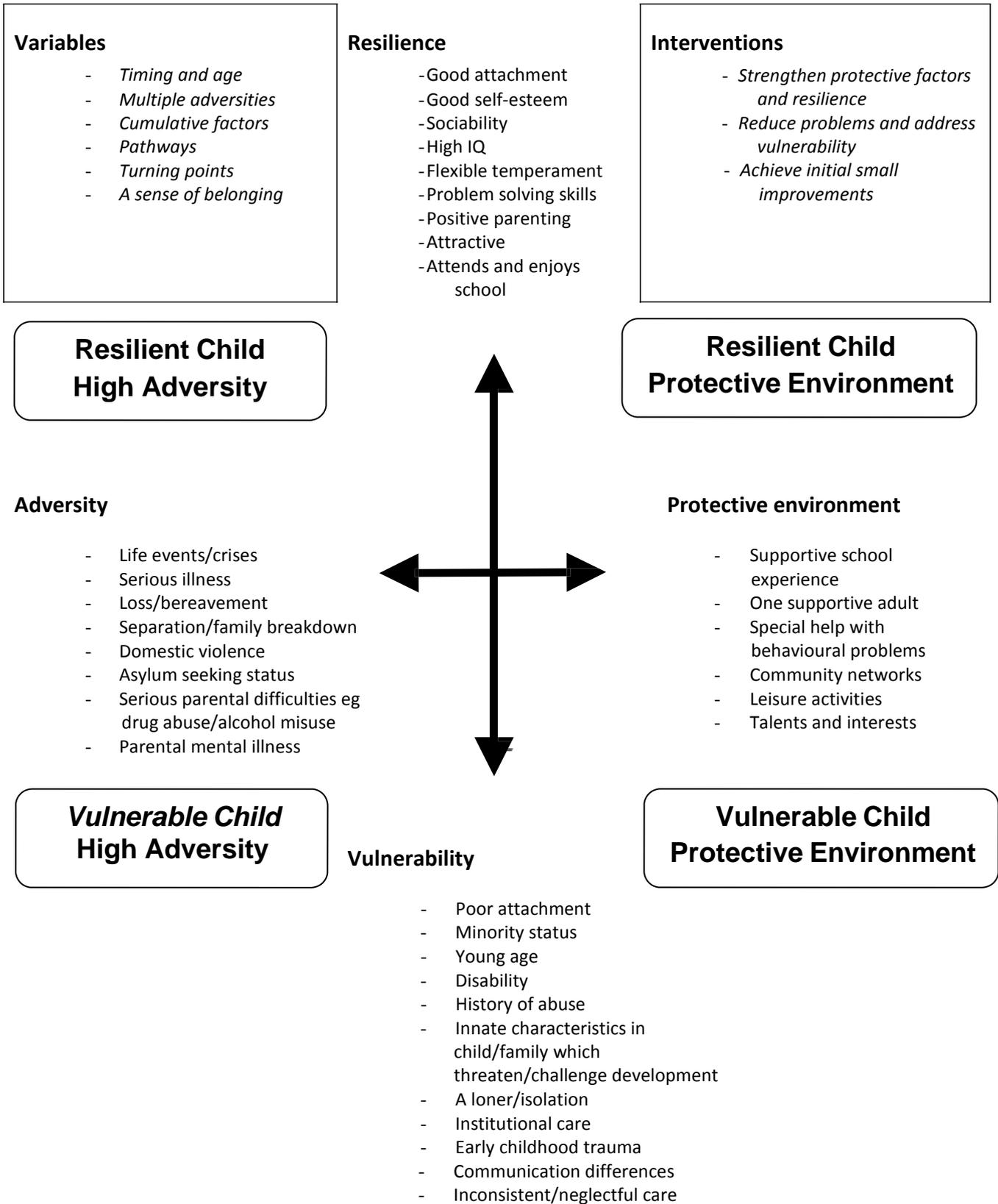
Name of supervisor:

**Links to the planning process**

On completion of this risk assessment model, the information should be used to contribute to the ongoing decision making and planning process, including child protection planning if appropriate. Any plan should include the actions, resources and services required, who will be responsible timescales for action, any contingency arrangements and how the plan will be monitored and reviewed.

# Appendix 1

**Risk and Resilience Model** Daniel B and Wassell S (2002) *Assessing and Promoting Resilience in Vulnerable Children*



## Appendix 2

### Reference List

- Ontario Child Protection Tools Manual  
February 2007 – Ministry of Children and Youth Services
- Dalzell R and Sawyer E (2007) Putting Analysis into Assessment NCB
- Risk Assessment Framework – North East of Scotland Child Protection Committee (2008) based on the work of Jane Aldgate and Wendy Rose 2006
- Jane Aldgate and Wendy Rose (2006) Assessing and Managing Risk in “Getting it Right for Every Child”
- Ed Vicky White and John Harris (2004) Developing Good Practice in Children's Services - Analysing Risk in Child Protection: A Model for Assessment" by Vic Tuck
- Daniel B and Wassell S (2002) Assessing and Promoting Resilience in Vulnerable Children
- Munro E (2002) Effective Child Protection
- Promoting Positive Outcomes for Children in Need: The Assessment of Protective Factors; Robert Gilligan; Chapter 11, Child's World Reader (2001)
- Andrew Turnell and Steve Edwards (1999) Signs of Safety; A Solution and Safety Oriented Approach to Child Protection Casework, W.W. Norton and Company
- Parton, N, Thorpe, D. and Wattam, C. (1997) Child Protection, Risk and the Moral Order, London: Macmillan
- DePanfilis, D., & Wilson, C. (1996). Child protective services: Applying the strengths perspective with maltreating families. *The American Professional Society on the Abuse of Children*, 9(3), 15-20.
- Boushel M (1994) The Child's Protective Environment
- Reder P, Duncan S, Gray M (1993) Beyond Blame: Child Abuse Tragedies Revisited
- Brearley, C.P. (1982) Risk and Social Work, London: Routledge and Kegan Paul

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