

WORKING TOGETHER

in Adult Support and Protection

VIEWS AND TOOLS

of People who Access Support



A participatory research project
developed by Altrum and
the University of Stirling.
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A summary of key recommendations across the process:

Key points:

- 1 Listen to what the person wants to say about their lives, their values and abilities and how they want to use services to live their lives.

- 2 Ask what the person thinks is wrong and can be changed.

- 3 Be ready to share the agenda and give the person choices about how things are done.

- 4 Offer an advocate who can build a relationship with them that will see them through the changes and challenges they may face.

- 5 Find ways to make meetings relaxed with breaks and alternative ways of presenting information if wanted.

- 6 Let the person know the bigger picture and what to expect next. Explain why the process is the way it is, for example, why information might need to be shared or withheld.

- 7 Remember that information and trust go hand in hand, one can help build up the other.

EXECUTIVE SUMMARY

How does anybody describe the difference between simply being heard and really being listened to? Listening is an art. When someone has been harmed, understanding the person's situation can be like fitting puzzle pieces together. It means listening for how the pieces fit together. In this report people who access support talk about how they would like to be included in fitting the puzzle pieces together so that at the end of the day it holds together for them. In this report we share the recommendations those who access services have given about how to do this every step of the Adult Support and Protection Journey.

People who access services have worked on this research project at every stage from inception to production of materials. They come from a range of organisations that belong to the Altrum consortium of support providers and have been supported in this project by Altrum practitioners, most notably the Thistle Foundation which hosted the project and researchers from the University of Stirling. Altrum aims to foster creativity, community and citizenship for all.

In the report we refer to people who access services as this description was chosen by those in the team who have this experience and because it focuses attention on service access.

To convey what is at the heart of this research it's important to communicate the excitement in the room as participants put themselves into the work, said more, dared more because the forum theatre activities gave them a more level playing field to convey their thoughts and feelings. It's important to communicate the sensitivity participants showed to respect each others' different support needs. It's important to communicate a sense of participants' both thoughtful and imaginative approaches to problem solving.

Above all it's important to convey participants' desire to contribute to something tangible that would make things better for others and the very real sense they conveyed that they accomplished this. The videos we provide go some way towards capturing the excitement, sensitivity and thoughtful problem solving and can be accessed here: www.thistle.org.uk/riskresearch/project/adultprotectionresources.

Background

There is little evidence about the views of people with disabilities on risk and protection. Because of this we set about finding out what, in the opinion of people who access services, makes for good working practice in Scotland in light of the Adult Support and Protection (Scotland) Act 2007 and the policies on risk and safeguarding that stem from it.

We began early on to consult with key implementers of adult protection policy. Some of the key issues social workers grapple with are thresholds of risk and thresholds of capacity, and balancing protection decisions with human rights considerations. Multi agency practice was also a concern. We learned that there is limited guidance on follow through after the case conference stage. We learned evaluation projects have had difficulty obtaining the views of people who access services and that there are uneven levels of involvement in case conferences and on local authority committees. Trainers we surveyed indicated a strong preference for visual and interactive learning materials to address these issues. For this reason we have developed a range of visual tools and videos available at www.thistle.org.uk/riskresearch/project/adultprotectionresources.

Methodology

Our methodology used Forum Theatre (Boal 2000) in a process that incorporated story-telling, drama and discussion to collect the views of people who access services. The people who participated had a range of support arrangements from minimal to extensive. The participants came from Altrum organisations and all had experience of person centred support. They stressed the importance of the many ways support relationships can help a person make good decisions and have a good quality of life.

KEY MESSAGE
Participants valued honesty about options, costs, capacity assessment, and other procedures, with clear explanations.

We have sounded out

42

people about:

- How they would like decisions about risk to be made;
- What should be considered in balancing issues of protection and restriction;
- How the person who is being assessed as potentially at risk can be encouraged to give their views.

The views of those accessing support services.

“Just listen” “Really listen” were phrases that were repeated over and over again by participants, no matter what stage of the process was under consideration. When faced with the need for work with social work because of harm, people would like to introduce themselves (their goals, values, strengths) not be introduced by their file.

Participants recommended taking time to hear about the person's previous experience of working with social workers to prevent misunderstandings. Participants valued honesty about options, costs, capacity assessment, and other procedures, with clear explanations. They wanted this approach to be part of the relationship they had with any of the practitioners taking part in the investigation. They also highlighted the importance of flexibility about how case conference and risk planning is carried out. They suggested that visual tools can make the most of a person's communication strengths and can let everyone in the room be human.

These techniques could potentially transform a person's inclusion in formal Adult Support and Protection proceedings. Participants expressed the strong view that a successful process needs to incorporate supportive relationships – not one-off advocacy but sustainable support.

The very process of Adult Support and Protection intervention may affect the person's sense of self. Their self confidence and sense of entitlement to rights and choice may be dented by the harm they've experienced. Risk assessment forms, capacity assessment, and case conference reports may act to further damage a person's sense of self. Attention needs to be paid to helping a person regain a stronger sense of self.

Although we did not ask people to share their personal stories directly, informally many participants let us know that in the past they had struggled with some difficult and damaging situations sometimes for several years and did not know who they could turn to. These stories underscore for us the importance of the work that is going into developing quality Adult Support and Protection practice. We hope this report can contribute to this work.



INTRODUCTION

Taking risks is part of a full life. But being put at risk is something that nobody should face alone.

Because of this we set about finding out what, in the opinion of people who access services, makes for good working practice in Scotland in light of the introduction of new legislation on risk and safeguarding, namely the Adult Support and Protection (Scotland) Act 2007 (The ASPSA). We have sounded out 42 people between the ages of 18-65 who have a wide variety of experiences and skills on their thoughts about Adult Support and Protection policy and practice. In particular we sought to gain their views about how social workers in Adult Support and Protection teams and those who work with them in multi-agency approaches should:

- make decisions about risk;
- attempt to balance issues of protection and restriction;
- obtain the views of the person who is being assessed as potentially at risk.

The research participants were all people who access the services of Altrum organisations. Altrum is a federation of support providers, fostering creativity, community and citizenship for all. All Altrum members need support and offer support to people so that they can

lead their own lives, particularly people who require assistance with decision making.

Structure of the report

We begin with the background to our research and explain how this has shaped the way we have gone about doing it. We describe some of the important lessons about forum theatre and other creative methods that we have learned from our project. We then present the points that people who access services would like all partners in the multi agency team to keep in mind while working with a person who may be at risk of harm.

We have structured these around the progressive steps that are taken across the process from first contact with a person (*Getting in Touch*), through deciding if the situation requires an investigation and case conference (*Deciding how Serious*), preparing for the case conference (*Preparing to Meet*), holding the case conference (*Getting Round the Table*), putting into action the plans and decisions made at the case conference (*Putting the Plan in Action*), reviewing the plan (*Reviewing the Plan*), and eventual transition back to more standard

service provision that no longer requires Adult Support and Protection supervision (*Getting on with Life*). Together they form a journey. The person at risk of harm, professionals who join the journey to support them, and the person's wider support network of family, friends and carers are on different paths, each with different concerns and tasks that weave together through the process.

At each stage of the journey there are considerations that have to do with the detail of building relationships, sometimes known as micro skills. There are considerations about how the service as a system works and can best work for and with the person. These can be thought of as system management or macro skills. We see both sets of skills working together as being crucial to support a person's development of resilience enabling them to recover from harm. In each section of the report we look at:

- **Building Relationships**
- **Building Bridges to Services**
- **Working Towards Resilience**

with key points for social workers and the person at risk.



PARTICIPATION

The project is underpinned by a participatory approach (*Chappell, 2000*).

STRENGTHS

And has drawn on the respective strengths of the different partners.

SKILLS

We sought to develop the skills of people who access services so that their views can be made more widely available.

KEY MESSAGE

Trainers indicated a strong preference for visual learning materials such as videos and interactive activities.

Research I'd like to be part of:



Figure 1
Phrases people
contributed in response
to 'The research team
I want to be part of'.

Background

Recent case study research into Adult Support and Protection highlights the complexity of decision-making in situations involving multiple professionals and potentially 'at risk' individuals, where people's understandings and tolerance of risk, rights, needs and priorities may not coincide' (*Hogg et al., 2009; Mackay, 2011*). Such research needs to be complemented with robust evidence about the views of people who use services. Professional practice is influenced by multiple theoretical perspectives on risk (*Daniel and Bowes, 2011*). However, very little research specifically explores the perspectives of people felt to be 'at risk' and/or to require protection in order to inform professional practice (*Mitchell and Glendinning, 2007; Wishart, 2003*).

The research team consisted of people who access services from Altrum organisations, some of whom have been working with the support of Altrum to develop advocacy and group facilitation skills for some time. Other people who accessed Altrum services were new to this kind of work.

Our approach has many features of co-production. At the heart of the concept of co-production are the values of sharing power and sharing knowledge to produce more relevant and effective services than conventional processes allow (*Hanlon et al, 2010*). An important motivation for many who took part in the research, as the responses in figure 1 illustrate, has been to help provide opportunities for dialogue between the developers of Adult Support and Protection policy and those who may require its services.

To ensure that the guidance we developed would speak to practitioners' concerns, we surveyed lead trainers around Scotland. They identified issues to do with making decisions about thresholds of risk and thresholds of capacity, and balancing these decisions with human rights considerations and multi agency practice. Trainers indicated a strong preference for visual learning materials such as videos and interactive activities. They also reported that there is limited guidance on follow through steps of an investigation after the case conference stage.

We learned that evaluation projects have had difficulty in obtaining views of service users, that there are uneven levels of involvement in case conferences and on local authority committees and concern about individual service user's ability to represent the diversity of needs of adults who may be at risk. Our research involved people who receive support from services, but many practitioners have stressed that adults with minimal or informal means of support who cope for the most part on their own in the community are often most at risk and may be most ambivalent about seeking support. Often there are complex issues about the person's right to choices around sexuality, alcohol and drug use which have to be balanced against threat of exploitation. There is a need for further research on the needs of this group of people.

Many practitioners have stressed that adults with minimal or informal means of support who cope for the most part on their own in the community are often most at risk and may be most ambivalent about seeking support.

Methodology

Because we knew we would be engaging with people with a wide range of perspectives, support needs and strengths, we developed a range of approaches that we could tailor to specific groups as we gained familiarity with their particular strengths and needs. These approaches were centred on forum theatre techniques but also included participatory appraisal techniques and visual methodologies.

We chose a forum theatre facilitator whose approach enabled the research team to develop a scenario to explore protection issues in such a way that they could take a role in acting them out.

This had many benefits. It enabled research team members who were accessing support to take a much fuller role in research facilitation and meant that as a team we examined the issues in depth in order to portray them. An overview of the sequence of Sessions is provided in figure 2.

We piloted a four session process and found that we had to think carefully about balancing providing enough information about the policy so that people understood the topic with keeping the emphasis on their views and interests. As a result of the pilot we developed further our use of forum theatre scenes as we found this method of conveying information the most engaging and accessible. We also developed activities that would enable participants to join in the scenes.

We delivered our sessions with four more groups across the central belt of Scotland. In this report we refer to each group according to the time of year in which sessions were held with them: January, February, May and June. We identified key points that people made about the support and protection process as a whole, about each stage of the process, and about tensions, issues and remaining questions. All participants were invited to a final event where they were able to view the findings, comment upon them and join in one final drama activity.



Figure 2
Sequence of Sessions

Session 1	Getting to know each other and exploring what we know about risk and social workers.	Session 2	Exploring what people, their support and social workers need in order to talk about risk together.
Session 3	Exploring what the journey through Adult Support and Protection investigations looks like.	Session 4	Looking at what we've said, thought and felt and deciding on what to say to those with responsibility for decisions about risk.

Ethics

An important dimension of this process was developing ethical research practice within our research team and in our work with participants. All members expressed a keen interest in contributing to research that would help prevent others experiencing harm but did not want to undertake research that would cause people unnecessary distress.

It was, therefore, agreed that there was a need to develop methodology that did not ask people to recount their own experiences of harm. Rather, we developed a methodology that could support the expression of views about risk and about the most appropriate professional

response to risks of harm without delving into details of participants' lives that could be potentially traumatising. In recruiting participants we were careful to inform potential participants of the nature of the research and give them time and support to carefully consider whether they wanted to take part. Throughout the sessions we were careful to monitor and discuss with participants any support needs that arose.

Accessibility Strategy

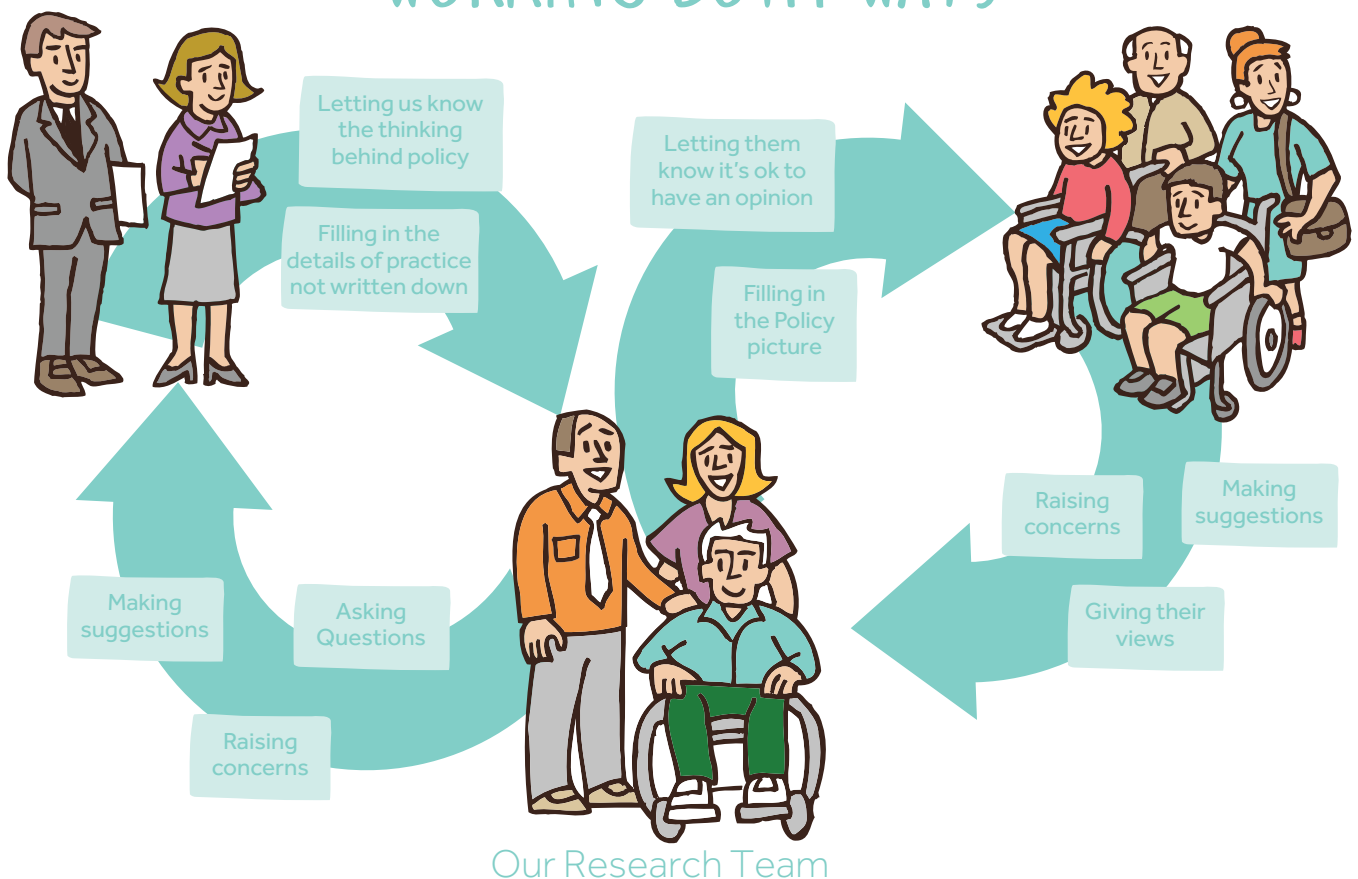
In recruiting participants we made the invitation available as an easy read document and video. We visited organisation venues and meetings to talk directly to potential participants about the

project. We developed a social media presence and worked with social media coordinators of partner organisations. Our newsletters were also developed in easy read format and we worked to distribute these in our partner organisations. We found that many participants became involved because they knew and trusted people connected to the research, however, people also came to the project because they saw the video or read our newsletter.

Policy Makers
and Providers

WORKING BOTH WAYS

People we've
Consulted



Forum Theatre

In developing the scene we had to take many things into consideration. We needed to portray:

- a scenario that helped those watching explore risk around relationships – as it is this issue that poses some of the greatest dilemmas facing all those involved in Adult Support and Protection.
- an engaging character that people could empathise with.
- a scene that gave people scope to talk about how they would change it, in order to get them actively thinking about the situation.
- professional practice that was realistic and that didn't portray a problem to which the solution is already known (i.e. overtly bad practice).
- a scene that would inform, but not overload those watching – that both enabled and encouraged discussion.

We wanted to provide visible and tangible ways for people to engage that could be adapted for people with a range of sensory impairments and enable people to respond. We chose a format that was not tightly scripted but based on an outline of the broad themes and events in the scene.

Cast

James: Service User

Samantha: James' Sister

Peter: Support Worker

Pat Green: Social Worker

Kate: James' friend

The Scenario

James is supported by his sister, Samantha, and by support worker, Peter. Following a referral from his sister, Pat Green arranges to meet with James.

The meeting is held to discuss with him the concerns that have arisen due to his increased involvement with a woman, Kate, who recently moved in near to him.

With her, it is alleged, he is drinking at levels considered to be dangerous because of his health condition and associated medication needs. There are also indications that Kate may be accessing his bank account and draining it of funds. James, however, is reluctant to have interference in this relationship and does not want it investigated. He reluctantly agrees to a case conference.

At the close of the scenes, the facilitator asked each of us who were in the scene how we felt it went. Staying in character each of us expressed why we thought there was a problem from our perspective. We stayed in role and as social worker, support worker and James we visited small groups to ask their advice about how we could do a better job of having a meeting. Given this advice, the scene was replayed with each character taking on board the advice they had been given. Often in these scenes each person was able to articulate more about how they saw the situation and what their concerns were.

From this familiarisation with the characters and the issues embodied in the relationships portrayed we used a number of smaller scenes, drama activities and improvisation techniques to look at the further steps of the process. We introduced participants to guidance on the principles of Adult Support and Protection (Scottish Government, 2007) and asked their views on what those principles should look like in action, specifically, what it looks and feels like to be listened to and included in decisions.

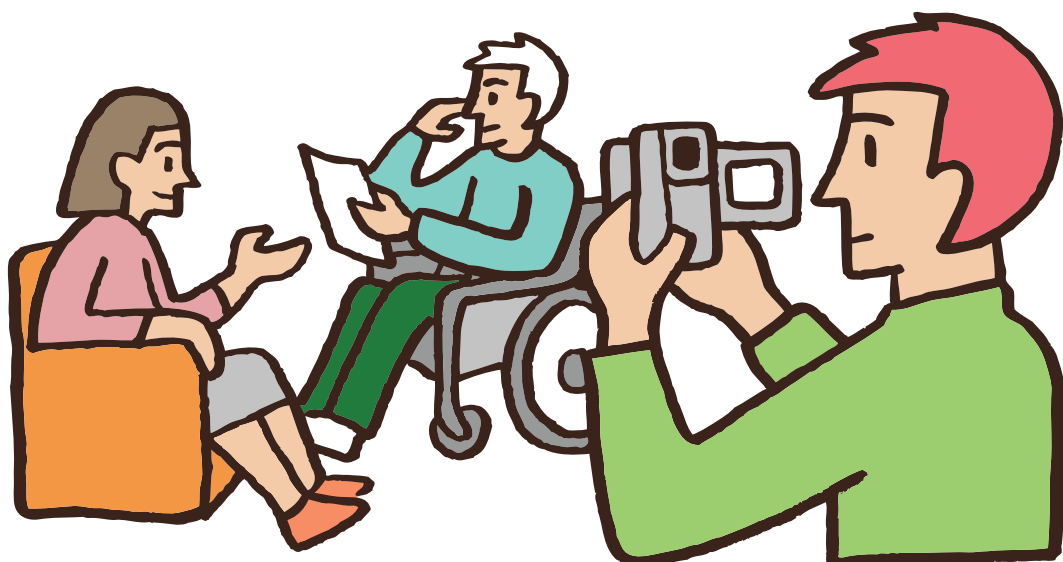
Such embodied methods enabled us to access embodied knowledge, and enabled it to be translated into articulated knowledge. The drama activities literally enabled us to make common sense of how principles could be put into action.

Each group was filmed, using hand held cameras and stationary cameras.

Research team members kept individual field diaries to reflect on the process or debriefed verbally with other research team members who took notes. These analytic notes resourced later analysis across groups. In addition the research fellow supporting the team transcribed posters developed as part of the session activities and transcribed selected segments of proceedings.

These were coordinated within an NVivo platform. The group also made use of Vimeo, an on-line platform for sharing and commenting upon videos in a password protected space, to give research team members further opportunity to reflect on session activity. The points presented as key at each stage are direct quotes from participants or paraphrases of similar points made in different groups. In a few instances we also include insights from the research team's further reflection on concerns raised by participants.

Many of the points that participants make are similar to those recommended in other guidance sources (Scottish Government, 2007b, Hogg and May, 2011). The important contribution of participants' views is not only that these things should happen, but is in providing a perspective on how they should happen and how barriers to them can be better understood and worked through.



ALL ALONG THE JOURNEY

Key points:

- 1 Listen to what the person wants to say about their lives, their values and abilities and how they want to use services to live their lives.

- 2 Ask what the person thinks is wrong and can be changed.

- 3 Be ready to share the agenda and give the person choices about how things are done.

- 4 Offer an advocate who can build a relationship with them that will see them through the changes and challenges they may face.

- 5 Find ways to make meetings relaxed with breaks and alternative ways of presenting information if wanted.

- 6 Let the person know the bigger picture and what to expect next. Explain why the process is the way it is, for example, why information might need to be shared or withheld.

- 7 Remember that information and trust go hand in hand, one can help build up the other.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

KEY MESSAGE

An important component of making sure the right kind of listening is in place is working with independent advocacy services.

Building Relationships

How does anybody describe nuances of listening? How is it possible to describe in detail the way you would like to be listened to?

What more is it fair to expect people to say, than, that they want to be listened to, just listened to, really listened to? “Just listen” “Really listen” were phrases that were repeated over and over again in the research sessions no matter what stage of the process or problem was under consideration.

The Adult Support and Protection (Scotland) Act (2007a) states that any action taken should be of benefit to the adult and be the least restrictive. The Code of Practice for the Act (Scottish Government 2007b) states moreover that those undertaking support and protection work should have regard for:

- the wishes of the adult,
- the views of others important to the adult,
- the importance of the adult participating as fully as possible,
- that the adult is not treated less favourably than any other adult in a comparable situation,
- the adult’s abilities, background and characteristics.

Listening is at the heart of all of these principles. It can be thought of as a thread that runs through them. We noticed that the principles are mutually reinforcing. Efforts made to put one principle into action lay the groundwork for other principles to be put into effect. Another way to say this is that the listening done to put one principle into practice can help a professional do a better job of listening and understanding what needs to be done to put other principles into practice. Conversely when some principles are not adhered to this has a knock on effect on how well others can be addressed. Failing to hear what is important to a person concerning one principle will limit the resources professionals can draw on to understand what else the person has to say.

An important component of making sure the right kind of listening is in place is working with independent advocacy services. All groups suggested “offer them an advocate” as an important way to improve the situation, and many participants offered to play the role of advocate as we re-worked scenes to see what things going better would look like.

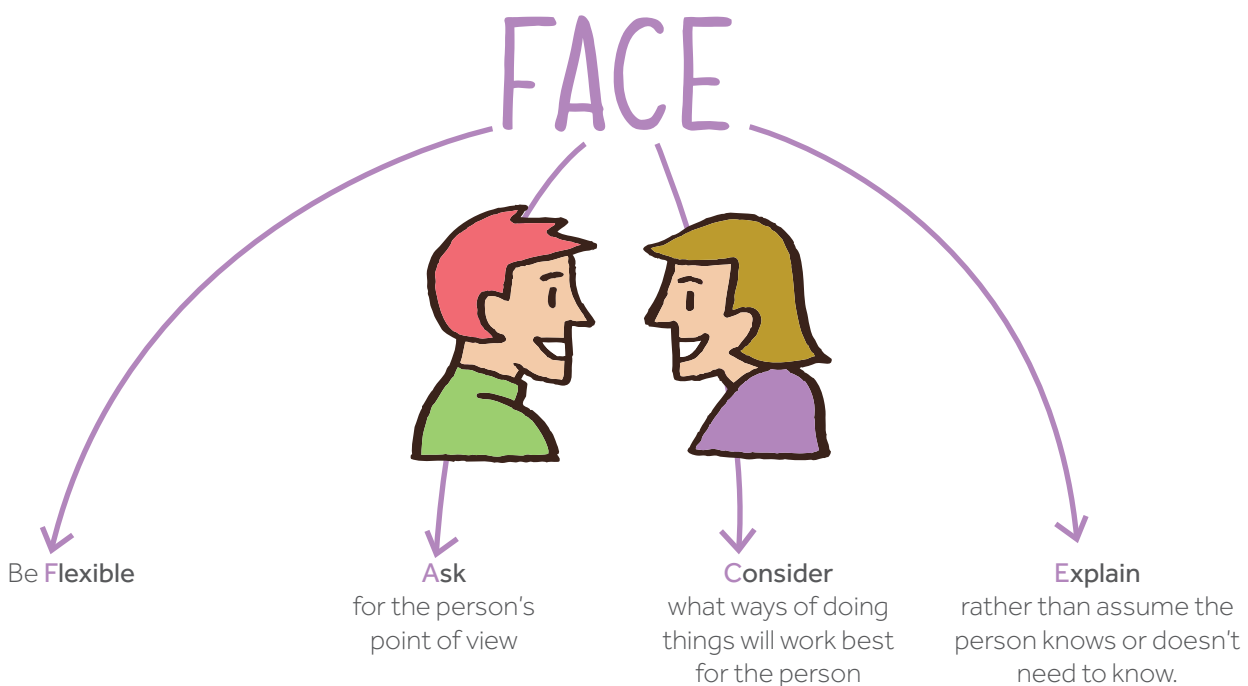
A term closely associated with listening is that of trust. Trust is an important thread throughout the process. Often a person is called upon to unlearn the trust they had placed in some people, whilst at the same time being asked to put trust in people they have had little contact with previously, for example, a social worker. Participants and members of the research team identified barriers that can discourage trust in the process:

- time (two hours in a year to review their case with a social worker may have been the norm of previous interaction)
- not knowing how to trust
- fear of feelings and power issues
- assumptions that service users already know or don't need to know.
- user of services not knowing what to expect.

Identifying what developed trust proved more difficult. We found that some words or images carried a great deal of meaning. In terms of building relationships across the process the word 'face' summed up many important points. Building a relationship means coming face to face with each other. It means considering what face you present to the person at risk, and what you read in their face. A person's face is one of the most unique things about them. The degree to which we read faces is an important part of how we listen to them. Sometimes people who struggle to read words are very adept at reading faces, more so than they are given credit for. Through an Adult Support and Protection journey the person at risk may be trying to save face, or put on a brave face.

They may be struggling to find the resources to face things that are frightening and upsetting. An important part of healing is growing new skin over a wound, in other words, a new face. As one of the research team members reflected, it may mean "re-inventing the face you present to the world". All of these things can be summed up as 'consider what's being faced'.

The word face can also be an acronym for several key points:



Building Bridges to Services

The architecture of service systems can often seem too complex to navigate when viewed from below (Smith 2010). It is therefore important to explain how systems work. Work needs to be done to help people understand how services are provided and about how decisions about services are made. As some social workers we spoke with commented, services like health and the police are better understood than social care and social work.

Choices at all stages of communication need to be developed, choices to do with how information is gathered, and how problem solving and planning for a better future is carried out. However, choices need to be meaningful and proportionate. It's important to keep in mind that a balance is needed between giving choices and keeping focussed on a clear route through the process.

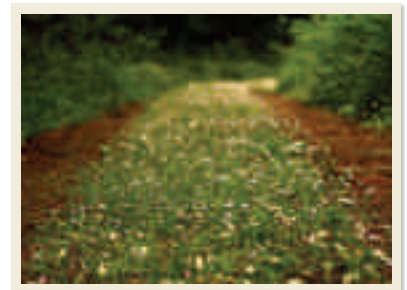
One of the important insights was an awareness of the extent to which words and forms are the tools professionals use. Helping the person at risk understand what these tools are and what they enable professionals to do can increase the person's confidence in the process and help them take a greater part within it, leaving them in a stronger position to manage their lives after.

Good practice guidance often speaks about getting alongside a person, but the reverse can also be helpful, that is, letting the person get alongside the practitioner. To be able to look

at the tools, that is, the forms, as they are worked through with them can let the person know where they stand and address fears or a sense of uncertainty that is difficult to articulate.

The request is frequently made that information be put in plain language without jargon and we identified two key terms that are central, but which need to be clarified or translated for many people - these are 'capacity' and 'resilience'. Understanding the terms and what they mean to professionals can increase a person's continued ability to manage services and build relationships with service providers. For this to happen these terms need to be broken down into more familiar concepts, filled out with examples and counter examples and made understandable in terms that mean something to the person at risk. Discussing these words should be a process where everyone can learn from each other. For instance, we explored the term resilience by inviting people to pick photographs from a wide selection that said something about what that term meant to them. One participant described how a photo of a cactus squeezing through a small space in a fence to grow depicted for him how he felt when he dealt with the death of a close relative. The cactus symbolised for him getting beyond a point which at the time seemed a barrier. Another person chose a photo of flowers as a way to begin to talk about how spending time in a garden helps them recover after a bad day. This is an example of using creative methods.

The scope for creative ways of working is at our fingertips, and yet, to date they seem under utilised. Given that this disadvantages many people it is an area of work that should be a high priority.



Photos chosen to suggest 'resilience' by Dermot O'Leary.



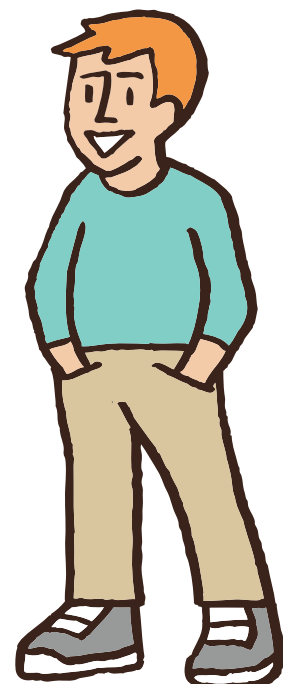
FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

The key message that members of the research team who access services wanted to communicate to others who access or should have access to services is this: 'ask ask ask'. Don't be afraid to ask questions; 'don't be afraid to ask for an advocate'. It's important to keep track of the answers given to questions. If a person can keep track of the process in their own terms, they are in a better position to see if it's working – and to ask for things to change if they're not.

Another way of asking is to seek out other people's views. A person could consider, if this was happening to a friend, 'what advice would I give them?' Peers can play an important role in problem solving. This certainly was demonstrated time and time again in the research sessions. This way of supporting each other was something participants wanted to be able to do on a more regular basis.

One research team member summed up another important message:

You may feel like a victim, but you are a citizen with rights and abilities that mean you can get to a better place. It's important to hang on to this.



Family and Carers Role Across the Process

The focus of the research was to gain views on how social work and allied professionals should implement Adult Support and Protection policy. However in discussing this with people who access services, it became clear that they also felt there was a very important role for paid carers, family and their informal circle of support. For this reason we include here some of their advice for paid and unpaid carers and family. The resource pack also includes a leaflet of these points for family and carers.

The people in a person's regular circle of contact, that is, their friends, family and support staff who regularly work with them, play a very important role in supporting a person through an Adult Support and Protection process. Where a person has communication or learning difficulties people in this circle may have important understanding about how information and processes can be made more accessible. What information they share with other professionals needs to be respectfully negotiated with the person at risk. This needs to be done with the goal in mind of the person at risk becoming more able to communicate directly.

Participants suggested that they would turn to support people already known as their first source of information about what support Adult Support and Protection could offer and would look to them to help them approach Adult Support and Protection services. From our consultation with social workers in many local authorities we are aware that the majority of referrals to Adult Support and Protection services come from the police or other services, not from people themselves. This may suggest that more needs to be done to help people access the service. The role of those who support people is vital.

An excerpt from a discussion about trust from the January Group illustrates this:

K: Sorry, I wouldnae trust another person I didnae ken. It's like you got to really know them before you trust them.

C: I would trust my sister.

K: If you're thrown into a crisis situation. You don't always get a chance to get to know anyone before there's meetings and such like.

S: True

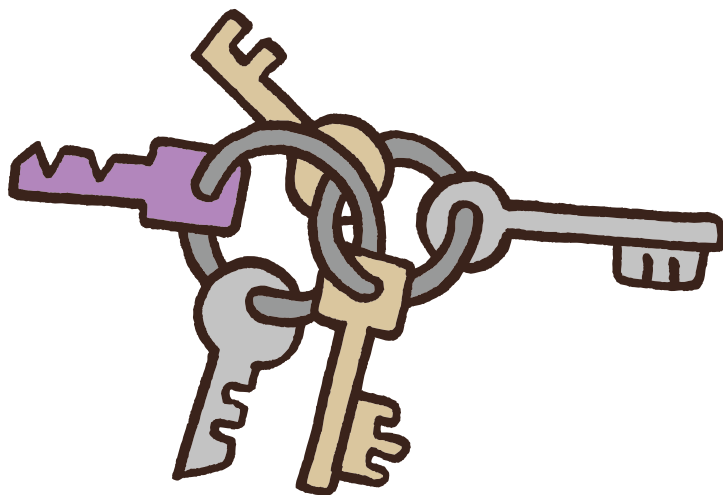
K: I would trust my family before I would trust the social worker.

Participants suggested that the approach to social work may need to be gradual and those who support the person may need to word the suggestion with sensitivity.

One participant in the pilot sessions gave examples about how this could be done in a supportive way:

L: Before the social worker got involved try saying, "I would like to bring a social worker in, how do you feel about me doing that?" and if he agrees, then phone.

However, from the outset it is important that people in a person's circle of support be able to think about their role. Participants felt it was important that a support person be able to distinguish between what the person at risk wanted and what they might want for them. Where there is too sharp a divide between the two, difficulties can arise. Support people need to be honest with themselves about any differences and seek outside help in the form of an independent advocate or encourage the person themselves to do so, wherever this may be helpful.



Many of the suggestions for how support can help a person through an Adult Support and Protection process were made with paid staff in mind, as the context for the sessions was within service provision organisations. However several of the points are worth anyone in a supportive role considering. Each person's needs will mean support through the Adult Support and Protection process will need to be talked through carefully with them.

Below are some of the possible forms of support that were identified:

- Supporting the person to understand the process.
- Investigating resources and explaining them to the person.
- Helping the person to organise their thoughts about the situation.
- Helping the person to identify other allies.
- Being part of identifying the person's gifts and strengths that aid resilience.

- Helping the person to prepare for the meeting by:
 - Talking over hopes and fears.
 - Helping the person prepare questions.
 - Clarifying any issues about the process.
- Supporting the person to review the plan following meetings.
- Supporting the person to look at what is working well and not so well about the practicalities of putting the plan into action.
- Helping them talk through losses that may have occurred through the process and ways to recover from these.
- Giving them opportunity to take more responsibility and exercise more freedom if during the process that has been curtailed.

Working towards Resilience

Much of the work on resilience focuses on children and more work needs to be done to articulate what resilience means for different adults facing different challenges and recovering from different past forms of harm.

Generally the literature is in agreement that resilience relies on the foundation of a sense of security in relationships, self esteem and self-efficacy (Windle, 2011).

We came up with key factors that contribute to a person developing or rediscovering these:

- Knowing how to lessen fears and increase strengths.
- Ability to reinvent one's self.
- Being connected to the wider world and the bigger picture.
- Being able to see others' points of view and work with them.
- Being able to contribute or give back to others using one's strengths and experiences.

Although many participants were at first unfamiliar with the term resilience, when we opened it up for discussions many rich images of what it could mean emerged:

An important image that members of the research team felt encapsulated this is that of keys. The keys that open the door to relationships a person can trust, in turn open the door to services – these together open the door to resilience.

The meanings of resilience:



Figure 3
The Meanings of Resilience.

GETTING IN TOUCH

Key points:

- 1 Let them be the one to contact social work, or at least let them know that this is what is happening.

- 2 Take into account the person's own risk assessment and life planning.

- 3 Take time to hear about their past experience of working with social workers and other services.

- 4 Explain if information needs to be discussed without them or withheld, as may be the case in a police investigation.

- 5 Ask their view of who should be involved and where meetings should happen.

- 6 Include in any forms or reports a place where the person's suggestions and views can be included and provide a copy for them.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

Beginnings are important. In many situations social workers will feel an urgency to establish quickly how serious the risks of harm are and all the factors contributing to this.

It's important to remember that taking time now may save time later and yield better results for all involved.

Developing a picture of this involves a person opening up often very private parts of their lives. Central to the key points participants made about the first stage of getting in touch was to caution against going too fast or concentrating too quickly on the problems instead of the person. It is at this phase that developing relationships is most important as they are the foundation for further work. As several participants across sessions commented, it's important not to “throw them in at the deep end”. It's important to remember that taking time now may save time later and yield better results for all involved. Taking time to hear who they are as a person, what their goals, interests and values are is important to the problem solving work that may need to be done with them.

Although care plans may already contain this information, it's important to be open to hearing from the person, in their own words, what at this point in time is important to their identity. Part of this may be taking on board concerns or reservations they may have about working with social workers or other professionals. Hearing about any concerns or questions they have based on past experience early on can avoid problems later. It indicates a willingness to be honest and self critical – characteristics participants particularly value in a social worker.

One of the activities all groups developed were pictures of the social worker they would like to work with and the social worker they would not like to work with. A summary of these descriptions is depicted in Figure 4 on the next page.

The social worker I would want to meet:



The social worker I would NOT want to meet:

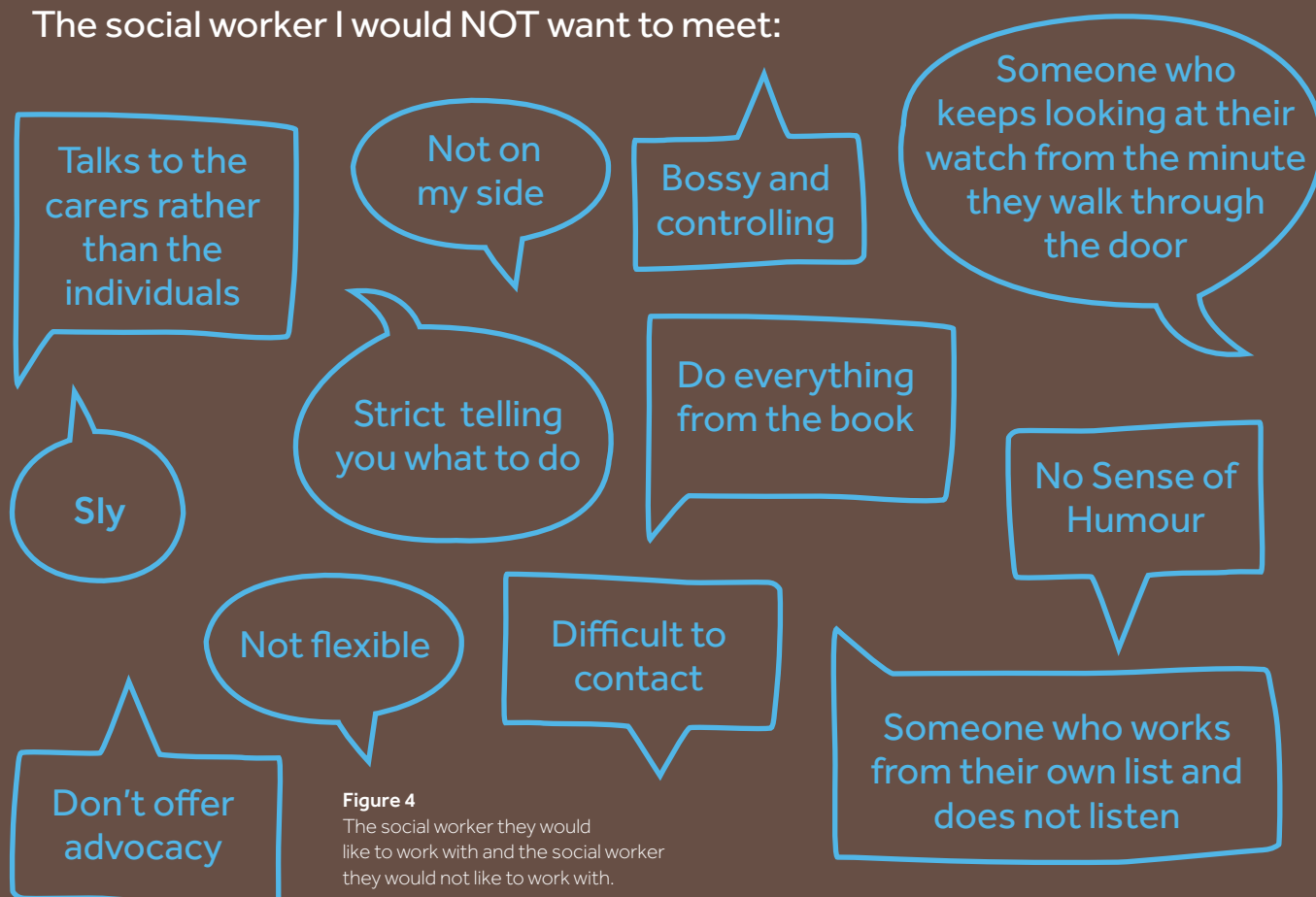


Figure 4
The social worker they would like to work with and the social worker they would not like to work with.

Building Bridges to Services

In an initial visit it is important to establish the information upon which further action will be based. Every practitioner will be working with their particular local authority’s guidance and assessment process, including the time frame within which tasks are expected to be completed. Having looked at a sample of the Adult Support and Protection risk assessment forms from across Scotland (e.g. Scottish Government Joint Improvement Team, 2007) the research group felt that there was room for improvements. Participants found the forms intimidating, in that they experienced them as positioning the person at risk of harm as an ‘object’. There are few spaces that directly ask for their view on risks, their strengths or their wishes for how they might be helped. These sections tend to be embedded far within the forms rather than highlighted at the beginning.

Whilst a skilled practitioner may be able to work with forms in such a way as to redirect attention away from the intimidating features, with simple rewording, some visuals and the addition of space at the beginning for the person to put a face of their choosing on the form, risk assessment forms could be an aide to best practice rather than an impediment. Whilst not every person involved in Adult Support and Protection processes may want to see the assessment reports, many will because they play such a central part of the ongoing intervention and will remain on their records.

Another phrase that participants used to describe what they wanted from a social worker was: “put yourself in their shoes”. If this assessment was about you, particularly if events sudden or prolonged had given quite a knock to your sense of self: how would you want it to look?

How would you want sections worded? What would you want it to ask? What priorities would you like to be indicated in the way it was laid out and worded? Support and life planning forms are worded in the first person as this conveys a sense of empowerment and serves as a constant, subtle but powerful reminder of who is most centrally important in the planning. These same reasons are as pertinent if not more so to risk planning, and for these reasons, rewording the forms so that they are ‘reporting with’ rather than ‘reporting about’ should be considered.


We provide an example of a report cover that could facilitate this approach in Appendice 3 as illustrated below in figure 5.

Figure 5
Example of a person centred risk assessment report cover.

WORKING TOGETHER
TO OVERCOME HARM

My Goals

Things that help me have a sense of purpose and remind me of how I want my life to be.



My Concerns

Things I want help with.

My Team

Things that are helpful for the people working with me to do.

People helping me

Name	Their Role helping me	Contact Details

Questions I have

Answers we've found

PS in the plan	How they've worked

What I've learned and where I've got to working together

What others have learned working with me

What I want people to remember about the work we've done

How I want to be remembered

This is not to say that making records and taking notes are not important. As one participant in The January group observed, “there needs to be a record both can refer back to, but the record shouldn't become more important or treated with more respect than the person”. In the sessions we asked participants

to develop a snapshot scene which depicted their experience of not being heard. Working in groups, participants took up different roles that depicted a moment of “not being heard” in a variety of settings. In the January group all three groups, developed independently of each other, chose to represent someone in the scene taking notes.

A person with a disability being **prevented** from working in his garden:

Support worker is pulling person away from what he wants to do.

Neighbours are busy drinking and taking no notice.



Observer is taking notes across from him.

A person with a disability being **ignored** at a doctor's appointment:

Someone else is coming in.



Person is being ignored and is trying to get the Doctor's attention.

Support person is answering questions and Doctor is taking notes.

The note-taker sat or stood opposite the person they were listening to with the notes between them and the person. Groups were then given the opportunity to change three specific things in their scene for the better so that the scene moved towards being one in which a person was heard.

When groups changed their scenes to be better, the place of notes changed. The note taker moved to stand beside the person and take notes from their perspective. In another scene the person stopped looking at their notes and looked at the person speaking.

A person with a disability being **encouraged** to work in his garden:

Support worker is supporting him to do what he wants.

Neighbours are joining in and helping out.



Observer shares her note taking with him.

A person with a disability being **heard** at a doctor's appointment

There is no pressure from the next person wanting to be seen.

Notes have been put aside.



Doctor is reaching out to person and is turned towards them instead of support person.

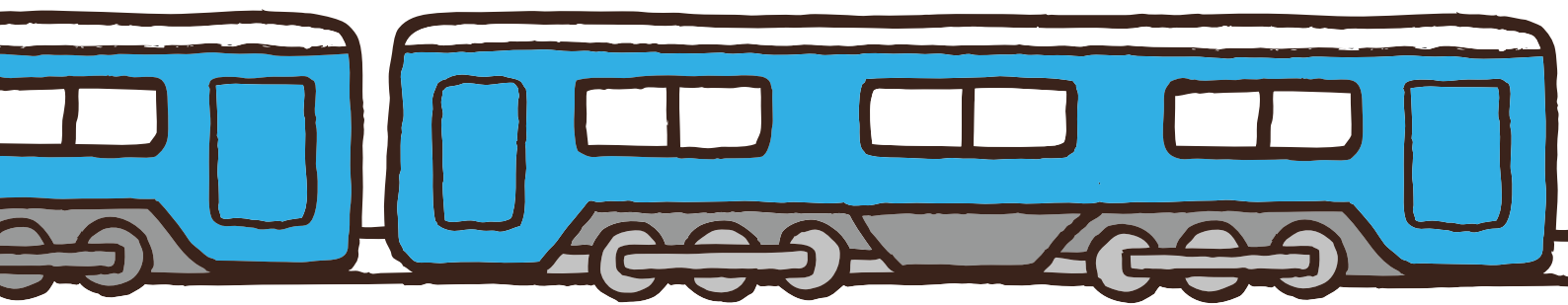
**FOR PEOPLE WHO MAY BE AT RISK
TO CONSIDER**

The stage of first getting in touch with Adult Support and Protection professionals may be a very distressing time. Thoughts about the harm or problem may not be clear, let alone the bigger picture of how services may be able to help. It is important to take a deep breath, take stock, and think about the bigger picture. It's important for the person to ask themselves a few questions:

- What do I want to get across, not just about the problem but about who I am and who I want to be?
- What do I need to know or understand better about services in order to work well with what can be provided to help me in this situation?

KEY MESSAGE

It is important not to be too defensive. If you insist that nothing is wrong, people may doubt that you know what's going on.



Building a relationship takes two people. Participants were very aware of this in the sessions. As much as someone wants to help, they may be waiting to take their cue from the person at risk. If a person has concerns or fears about working with service professionals they should let them know. It is also helpful if they can take time to think where misgivings come from, perhaps from their own experience or from the media. It's good for the person to be clear about any misgivings, so that those working with the person can be sensitive to them from the start. This gives both the person and the social worker a fair chance of working well together. As one participant in the May Group remarked:

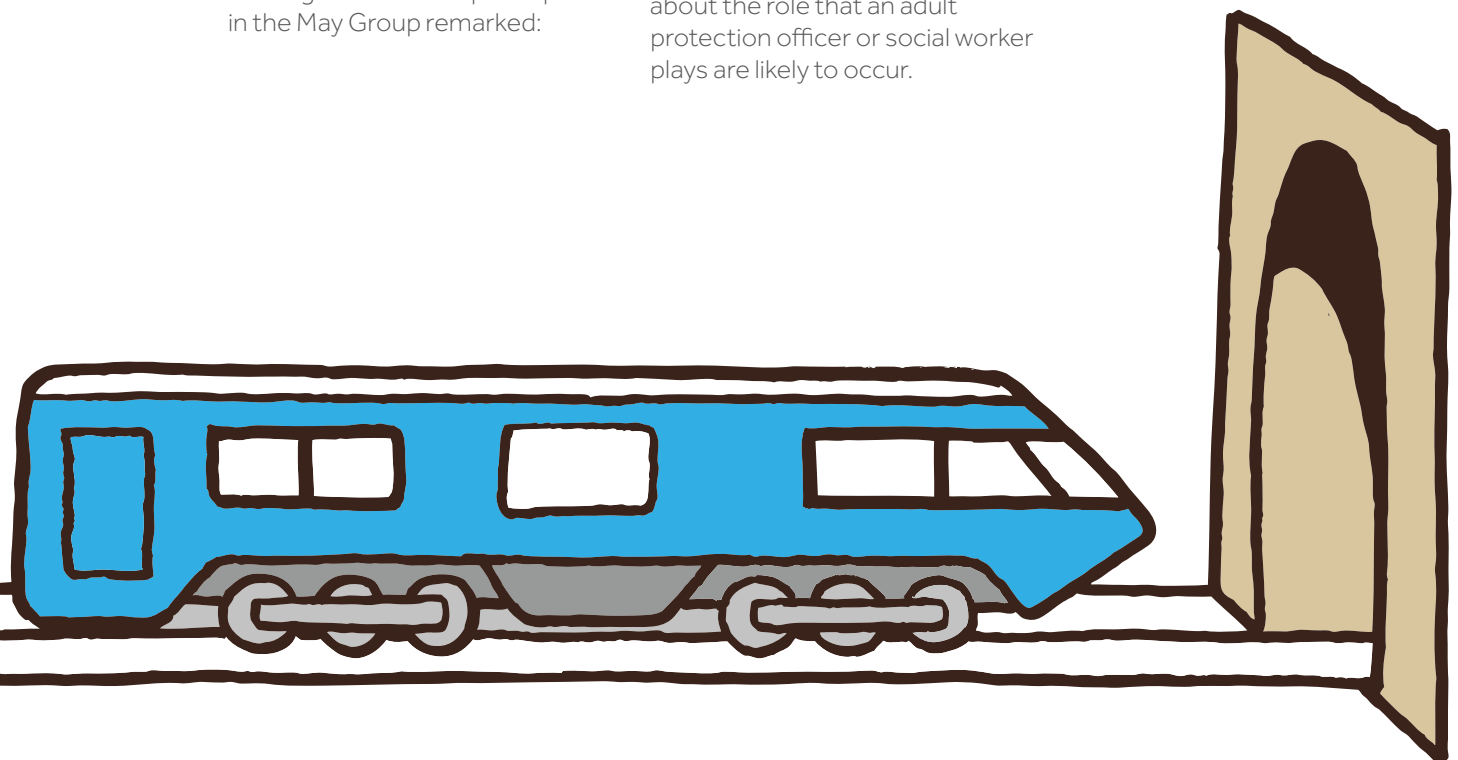
“It's important not to be too defensive. If you insist that nothing is wrong, people may doubt that you know what's going on. You have to be prepared to admit where you might need help.”

Many participants expressed uncertainty about what social work services are and what they do and how they work with other services that they depend upon. A phrase that resonated with many was “it's a black box”. The social worker who responds to a concern raised about harm may not work in the same office as social workers who assess care packages. Without a clear picture of what services are, confusion about the role that an adult protection officer or social worker plays are likely to occur.

Getting some basic questions answered at the start can help the person not only build a relationship with the individual professional but with the network of services that they are likely to have continued dealings with.

Working towards Resilience

Participants stressed that at the beginning it's important to help a person see there is light at the end of the tunnel. Going through the tunnel itself may be scary and difficult, and a person will want to know how they are going to be helped to get through before they will want to commit to stepping into the tunnel.



DECIDING HOW SERIOUS

Key points:

- 1 Always consider that a person's privacy is important to them.

- 2 Take into consideration what supports the person to do their best and give them a choice in how assessments are carried out. Give those who are important to them, including support worker, family, friends and carers a chance to solve issues, and offer support for them to do this.

- 3 Give them the chance to collect information with you, or take a walk through their day to gather information together.

- 4 If a person's capacity needs to be assessed let them know this, and explain why.



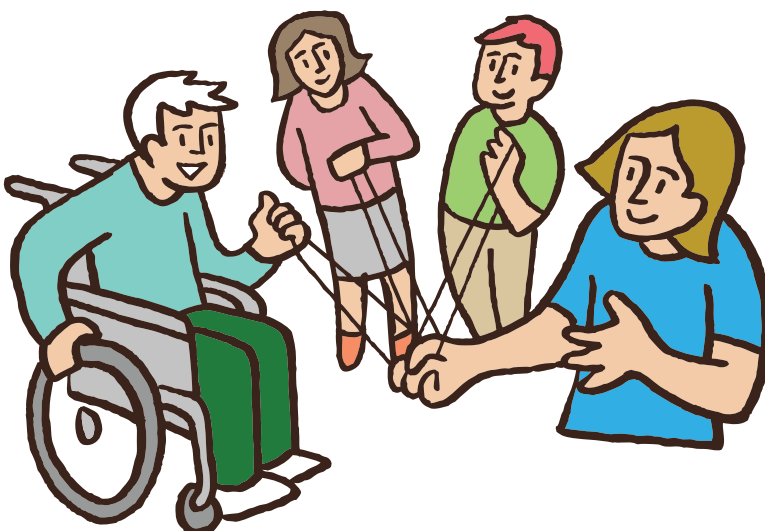
FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

Participants at this stage had many concerns about how a social worker would go about finding out about them and their situation. Many participants did not want people meeting or discussing them without their knowledge.

They were also concerned that files may have incorrect or out of date information in them. Some participants had past experience of this happening. For this reason they felt it was important that the person be involved in any information gathering. They felt that further information about their context could be provided by other people but that they were the best one to ask about who to consult and how to do this. An activity using string to trace where the lines of communication might go in an investigation illustrated participants' strong preference for lines of communication to always come back to them.

At this stage, the social worker will be assessing if the Adult Support and Protection process needs to be taken further. Part of this is assessing whether the person is finding it hard to keep themselves safe. The strong message that came from research participants is that it is best to decide this together. Participants should know what is being assessed and have choices in how this is done. The supports they normally have around them should be available and taken into account during any assessment. This includes the option to have a trusted person present. The importance of the role of a trusted person was illustrated in the scene feedback work that the May Group did. In the scene the social worker asks James, the person at risk, to assess if his drinking is harming his health.



Participants felt that at this point James' support person can help remind him of his own story and encourage him to think back and compare a wider set of experiences than a social worker who is just meeting him would be able to. Support people can help the person remain mindful of the wider context and can help them convey their awareness of that context to the person doing the assessment.

Sometimes there will need to be an assessment of the person's capacity to make certain decisions. Again, participants stressed the importance of good communication to an assessment like this. A participant in the June group with some communication support needs made it quite clear that if her capacity was being assessed: "I'd want someone I trust with me". Another participant reflected:

A lot of capacity is in understanding what's going on and where you are relative to everyone in the picture.

Support people who know the person well can promote that understanding, helping the person to make informed decisions of their own. In relation to assessments of capacity, May Group participants stated that:

- The person needs to know if their decision making is being evaluated.
- They should have some say in how capacity is evaluated.
- There should be choices for how capacity is assessed and the person should be told what those options are and why one is chosen.
- There should be an option to return and reassess capacity at a later stage, and there should be a clear plan for this.

It was not very clear to participants, how an assessment of whether or not to proceed with the Adult Support and Protection process differed from an assessment of capacity. These are different things in a legal sense, but participants thought they might feel very similar. Both might feel like the passing of judgement on a person's skills, strengths and ability to cope, by professionals external to that person's trusted circle of support.

Therefore, participants' advice about assessments was often underpinned by concerns about unfair processes and being 'found wanting' by Adult Support and Protection professionals. They also raised the concern that decisions about being 'at risk' and/or about capacity are not doorways that admit traffic in both directions. Their worry is that they are points of no return. Here again people's discomfort about entrenched power imbalances within service provision are apparent. Also apparent is the potential for processes intended to support and protect to further damage a person's self-esteem and emotional well-being. This in turn could damage the person's longer-term ability to cope.

All this shows that professionals investigating concerns may have to work quite hard to demonstrate that they are trustworthy and on a person's side.

They should try to complement a person's existing supports and abilities, rather than to challenge them. They should be honest about the limits of their power, and the power that the person has to say what help they need. An independent advocate can help with this as well.



FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

Participants' strategies for identifying and assessing risk are not that different from the points that social workers we spoke with also highlighted. Key was finding out about context.

Relationships were seen as a key part of that context. In the scenario we presented, participants thought it was very important to find out about the person who may be causing harm. Talking to that person directly was seen as very important as the quotes from participants in figure 6 illustrate.

Service provision was another important part of the context. Participants in the January group, for instance, suggested that the social worker shouldn't rely on reports of service provision, such as health services, but should "just go to the doctors with him".

Often participants were very vocal about identifying risks that they would not tolerate. When this was explored further it became apparent that this came out of the experience of living near to people taking high risks such as alcohol and drug use.

Living near people taking high risks was felt to be a risk in itself. Participants expressed the view that they could not always take control over the context in which they lived, often being housed in areas of disadvantage. This raised for them very real issues of drawing boundaries and there being limits to what they felt they should tolerate.



Figure 6
Quotes from
Participant

When asked should a person with a disability have less right to drink or use drugs than others in the community, many gave the view that they should not be treated less favourably. However, particularly in the May Group, participants expressed the view that a person's benefits should not support alcohol or drug use and that someone should 'take his money off him'. Others took a more tolerant view:

Don't judge unless you've got the problem yourself. Unless you've got the problem you don't understand.

Participants did not have any silver bullets. If a person had been informed of the dangers of what they were doing, was able to take that information in, and was making an informed choice, then their decision had to be respected. As one participant put it, "you can't help someone who doesn't want to help themselves". However participants were aware that social workers and others who provide services have a duty of care, and acknowledged that in situations like this it would be very difficult to know what to do.

Whilst participants were critical of others who they felt were taking unacceptable risks, it was much more difficult to talk through what they would do if they were taking unacceptable risks. This underscores just how difficult it is to imagine one's self into this position.

There is a piece of advice that does come out of this dilemma. It may be useful for a person to re-focus the risk assessment outside themselves. It might help if the person at risk considered the question: 'if someone else was taking these risks, what would my advice to them be?'

The advice participants offered from different perspectives attests to the different insights that can be gained. When asked to take the perspective of James and consider how he might respond to his sister one participant in the May group gave this advice:

"She's taking away your independence – don't let that happen. Don't forget you're a person. What you should say is: I know I'm drinking, but I need to work that out for myself."

In relation to demands Kate may be making, the same person offered this advice:

"Stand your ground, say: Look Kate I don't want to go for a drink, It's getting too much."

Many people may be afraid that freedom will be taken away. However, support can also lead to changes for the better. Having the help of the Adult Support and Protection team can be an opportunity to develop better risk management skills. Another way to think of this is for a person to consider:

"What about your situation may help a social worker understand you better?"

"Are there pieces to the puzzle that you hold? How can you share them with those who are trying to help you?"

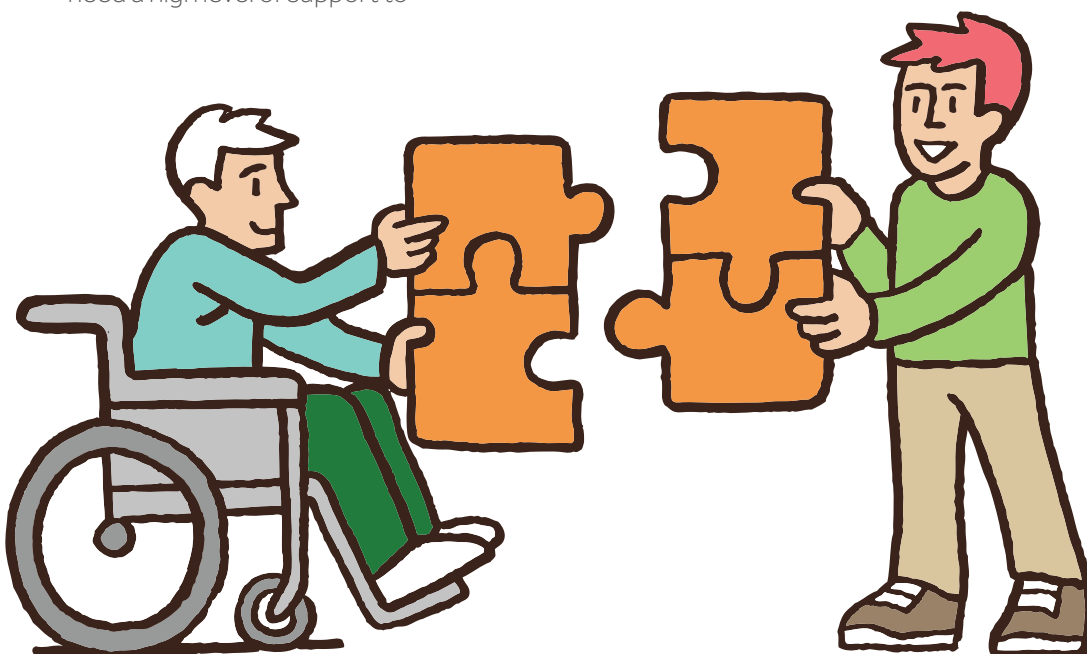
There may be more pieces to the puzzle than the social worker can see. The metaphor of puzzle pieces is one social workers have also often used in conversations with us.

Further insight into participants' views on the role a person's own ability should play in deciding how an investigation is handled was gained from an activity where participants took up different positions in the room depending on their level of agreement or disagreement with a set of statements. The statements asked participants if they thought the social worker should do the problem solving, if the social worker should help the person and their support team develop their problem solving or whether it is the person's own problem solving that should be at the heart of the process. Most participants were ambivalent about the social worker solving the problem. One person commented, "Solutions are not enough, a person needs help taking steps towards them." The January group indicated more approval for the person's own problem solving being at the heart of the process, whilst the February group indicated they did not feel that the person's problem solving should be at the heart of the process, rather their wishes should be, even if they need a high level of support to

do problem solving. The February group indicated much more support for the team approach. In part this difference in responses is reflective of the differences in support needs and support provision that different participants came to the project with. This demonstrates that people who use services may hold any of a range of perspectives and that assumptions should not be made about their views.

Working towards Resilience

A person understanding for themselves the nature of the risk they face is important for how they will be able to manage risk in the future. Although the person may be at risk, there may be many things about the risky situation or relationships that the person values. Support to articulate both what is harmful and what is valued can help a person retain a sense of value and develop different ways to seek out what they value. This has important implications for their sense of self and sense of trust within relationships.



PREPARING TO MEET

Key points:

- 1 Meetings should include time to relax and time to focus on positives.
- 2 Choices in what communication, problem solving and planning works best for the person need to be explored early.
- 3 Care of the person's privacy should be taken and the plan for doing this explained.
- 4 The person should be offered an advocate to work with them early on, and that offer should be repeated as it may take time to realise what's going on.
- 5 The person should be involved in setting the agenda. This means:
 - A They should have support to make sure their goals are understood.
 - B The social worker's goals may need to be explained, particularly concepts like capacity or resilience.
 - C Common goals should be identified, as should ways of working out any differences there may be.
 - D The person should have a say in deciding who comes to the meeting.
- 6 The person should have a say in as many aspects of the meeting as possible from location through to details such as who provides the biscuits.
- 7 Options that are going to be discussed at the meeting should be on paper and what scope the person has to choose from those options made clear beforehand. Person centred planning and other visual methods can help with this.
- 8 Remember: choice and preparation go hand in hand.
- 9 Remember: some people need time to think, go away and come back to a problem. They should have the opportunity to engage gradually and not be rushed by pre-set deadlines for meetings.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

Practitioners working within Adult Support and Protection stressed that working to prepare for a case conference is an important part of the process. The decision to hold a case conference in itself indicates that serious or quite major decisions may have to be made at the meeting.



Figure 7
Our Record of Work poster

Preparation for these decisions is important and it is important that any preferences for working together that the person has indicated in earlier meetings begin to be put into practice in how the case conference is planned for. Many participants expressed a concern that they do not always see promises followed through to the level they were led to expect. The person may be watching carefully to see if the social worker will follow through on any commitments made about how they will work with them including in basic things such as showing up on time or bringing resources such as visuals or easy read materials that will help them understand the process.

Participants felt there were important details when planning that it is important to get right. There can be little things about planning that make it more person centred. For example, the February group suggested that planning for meetings should include decisions such as who should bring the biscuits.

This is not as trivial as it may sound; it does several things. It's a way the person can introduce something positive about who they are before getting to more difficult subjects. It makes the meeting more friendly, means the meeting starts with a tangible contribution from them, and sets the stage for other ways they can have a say within the meeting.

Building Bridges to Services

A great deal of focus is put on breaking things down into simple and plain language in order to make each step accessible. But in order for a person to make sense of these individual bits of information they also need ways to see the big picture so they can understand the context and position themselves. We developed a poster that helped participants view the process as a whole and track important turning points within it (figure 7).

Having a visual record with a pathway can help people remember where they have been, locate where they are now and have a sense of where they are going and what they can expect. Such a tool gives the social worker and person at risk a record of planning together.

Such a visual record can help track the relationship that develops between the social worker and the person. Visual ways of planning can also help the person plan how they will use services to safeguard themselves. Visual ways of working proved very helpful in the sessions and participants referred to the visual methods they used in their life planning. As a result the research team thought about what features from their own life plans could be included in a risk management tool, as illustrated in figure 8.

In preparing for the case conference with the person the surround of this tool can be developed, starting with the person's goals, values and dreams on the right hand end of the poster and then moving back to work through the left hand column of boxes which

are for considering the problem solving approach they bring to the table, including important times they've solved problems, what they know about problem solving, what they are good at, who and what helps them with problem solving, the things they want to learn to do better and what things make problem solving difficult that should be kept to a minimum or avoided all together. We have also developed a video clip which demonstrates how this tool could be used which can be accessed at www.thistle.org.uk/riskresearchproject/adultprotectionresources.

All the reasons that make visual methods an important inclusive tool to develop support plans when a person is in a fairly settled place, make them all the more important to use when a person is feeling fragile and may want to withdraw to cope. For people at risk who have very limited or no access to written words, recording things visually can make a key difference to how much they can participate in their risk plan. However, it was members of the research team with high levels of literacy who were the strongest advocates for a visual way of working.

They stated that:

“Working in this way shows your journey. It helps you focus on specific stages. They can see it and you can point to it, instead of just trying to figure out what you're talking about. You can see where you're going and it gives everyone something more to remember than just listening. If they can see the map they're on the journey with you. Images describing the process mean more than an hour's worth of words.”

On a day when we brought all participants together there were many positive comments about the visual tools. One participant observed “social workers should use big paper and colourful pens more.”

For a person who has had limited experience of choice, role playing or talking through the story of how a choice plays out may also be helpful. Many participants found role play more helpful than describing a situation because it brings into concrete shared experience what otherwise remains imagined in each individual's thinking. Although role play may seem intimidating it can clear up misunderstandings that otherwise can plague a process without ever becoming apparent.

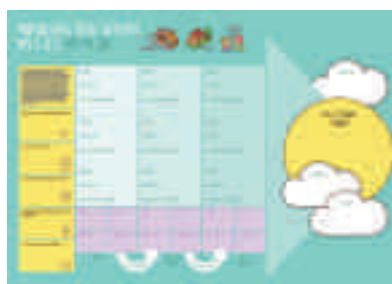


Figure 8
Risk Planning Tool poster.

Working in this way shows your journey. It helps you focus on specific stages. They can see it and you can point to it, instead of just trying to figure out what you're talking about.



FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

Participants demonstrated considerable ability to solve problems and a real willingness to work together and hear each other's suggestions. In many ways the most important work of the process is set in motion at this stage.

Participants felt it was important that a person believe in themselves. They related that it can be easy to be intimidated and settle for choices that might not really suit them out of a desire to be seen as cooperative or competent. They expressed that it is important that a person be given enough time and the kind of support they need to work through choices and do the creative problem solving on their own behalf at this point. The point was made that the only person who is going to know how much time they need is the person themselves and that they need to speak up for themselves.

As one team member put his concern, it was his hope that a person engage in the process “as a citizen wronged not a victim harmed”.

Many in the research group have developed skills to be an advocate and citizen and they would hope anyone at risk could enter the process with a basic awareness of rights and how to act on them. Different participants were at different places in terms of what they knew of their own citizenship rights. Much more work needs to be done to help people develop belief in their rights and awareness of how to go about acting as a citizen. Advocates can help with this. If an advocate is offered, it is important that the person feels they are comfortable with them. As one participant put it, if they can work well with their advocate: “everything else is a piece of cake”.

Working towards Resilience

Thinking of the tunnel metaphor, team members reflected that the more open choices a person is given the more windows open in the tunnel, the more hospitable place it becomes. The tunnel does need to lead to the light a person wants to have in their life, but the less it feels and looks like a tunnel the easier the journey. In practical terms participants felt this meant planning that started with open options rather than fixed choices.

GETTING AROUND THE TABLE

Key points:

- 1 Information discussed at the meeting shouldn't be a surprise to the person. They should have this in an accessible format with time to consider it beforehand.

- 2 It is important that the meeting is relaxed with opportunities and resources to make this possible.

- 3 The pace and style of the meeting should be flexible with breaks if needed. A person may not want to ask for a break as they may be afraid to indicate they can't cope.

- 4 Consider holding the meeting where it's easiest for the person to work through what's happening. For some it may be better to have the case conference go to them, or be placed within their normal use of services, such as at a medical centre.

- 5 Visual tools, such as maps, can bring discussions to life and keep a focus on the person's values, goals and abilities and can be incorporated into planning that takes place in the meeting.

- 6 Creative methods such as use of photos or objects or taking another person's point of view can help people talk about what really matters and deepen understanding. These methods can allow everyone around the table to access a wider range of means of expression.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

KEY MESSAGE

Eye contact and body language should be consistent across informal and formal settings to signal that the social worker is the same trustworthy person across settings.

Building Relationships

Trust built in the more informal setting of preparation can be lost if the tone of later meetings reverts to a more formal footing. There can be many small but significant ways that a person can quickly come to feel shut out and disempowered in a meeting.

In giving advice on what made the social worker seem more approachable many participants' comments focussed on eye contact and body language. If these are consistent across informal and formal settings it can do much to signal to the person that the social worker is the same trustworthy person across settings.

A person not feeling they can speak up was a particular issue that we asked participants to work through using an improvisation exercise in which volunteers took on different roles. In the scene we developed together the social worker directs his questions to other practitioners, turning slightly away from the person at risk. When the person at risk queries this, the social worker turns back, speaks to her in a quiet, reassuring tone of voice, and then turns back to the professionals and resumes talking to them using terms like capacity in a more formal tone.

When the scene is replayed the participant playing the doctor cuts the social worker off when he does this, turns so he faces the person at risk and asks her directly how she feels about the topic the social worker has been trying to address. Another participant outside the scene points out:

“They're being a bit patronising with the type of discussion leading from the social worker. I think they could ask the person to outline how they felt based on what's been raised at previous meetings and let them introduce the problem instead of talking around him.”

This participant is then invited to take the role of social worker. When he does this he chooses to sit alongside the person at risk so that his notes are visible to both of them. He directs the first question to the person:

“Can you tell us how you feel and how you’ve thought over the last two weeks about your health and how things are going?”

However the person is still reluctant to speak up. At this point it is suggested maybe being put in a position to answer questions in front of everyone is intimidating. In discussion we decided it would be better if preparation for the meeting could involve helping the person come up with questions they would like to ask in the meeting so that with support they could take on this role that directs the flow of the conversation within the meeting.

The tone of voice, the way people are positioned around the table and how they use their bodies to include or exclude people in the conversation were all shown to be important parts of embodied good practice.

Looking at these details helps flesh out what can be meant by the more general direction to uphold the principle of participation.

However, taking such steps as these to help the person feel central to the meeting can go against the grain of embedded habits of deferring to the powerful in the room.

At the end of another improvisation activity where participants played the roles of professionals around the case conference table with the May Group the research team member who played James observed:

“When people did the role play I was the lesser partner. They were speaking to Gavin, the drama worker. I got the feeling that they didn’t think I was mobile enough to do what they wanted. I’m not happy that those who are supported are talking like that, they defer to powerful people. It’s about mindset.”

Building Bridges to Services

No matter how well prepared, meetings can be a stressful experience. As case conferences are chaired by an independent social work manager, it may mean the person has to meet another professional that they will not have had contact with before. There are many ways support can make the meeting a better experience. Arrangements should be made to help them get to the meeting and come away from it easily and to help them become familiar with the facilities at the meeting place.

Having a pre-arranged signal worked out so that a person can discretely but effectively signal if they need to take a break is one important support strategy. If this has been arranged in advance and worked into the structure of the meeting, this can increase their sense of confidence and control in the meeting which will benefit the proceedings.

A pre-arranged strategy for processing issues following the meeting can also be helpful.

In the research sessions we used different ways to give people time and space to take on information at their own pace and contribute to discussions about risk in ways that suited them best. This meant working across visual, enacted, and discussion based activities, and alternating between working in pairs, working in small groups and working as a whole group. Some of these strategies could be adopted within case conferences, particularly when there are several people around the table and the dynamics amongst them require management to give the person at risk a chance to have a say. For example, we have developed videos available at www.thistle.org.uk/riskresearchproject/adultprotectionresources, which show how the visual tool of a risk map can set the tone for the meeting by establishing the person’s values, their experience of problem solving and their goals for the meeting. The tool can also work to structure the different areas of risk that need to be addressed and the steps that need to be taken in each area.



FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

What makes a person comfortable can be different from person to person, for example, whether or how to use humour or how much personal space to allow. It's best to always ask each person.

It is helpful if the person at risk can consider details like these and let people know what makes them most comfortable in a meeting. It is also important to speak up and ask for change within the meeting if the arrangements made are not working. It is okay to ask for a break as this may help the meeting go forward to a better conclusion once it starts again.

Working towards Resilience

Feedback at the end of a meeting can help with developing resilience. Feedback can aim to

help a person regain or develop the ability to relate to the wider world. Feedback can acknowledge that meetings can be tough for all, including professionals. Feedback about stamina, ability to hear others, and ability to express one's self as part of the meeting process are all helpful. As one research team member put it: "Feedback keeps you going".

If the person has been able to use the tools and feel they own the plan it can mean the difference between feeling like a passenger on the train through the tunnel and feeling like they are in the driver's seat.



PUTTING THE PLAN INTO ACTION

Key points:

- 1 Where possible the person should take the lead in making changes.

- 2 The social worker should stay in touch and make sure the person knows what to expect.

- 3 The right information is important now too. Being kept in the loop and knowing privacy is protected still matter.

- 4 The social worker should keep an open flexible approach to understanding the person's ability. The person's ability to cope and manage risk may improve and there should be an opportunity for this to be assessed and changes to the plan made as a result.

- 5 The person should have a way to record and share the progress they see happening as a result of decisions or plans, and a way to raise concerns if there are problems.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

There is a lot of emphasis in training and public awareness materials on identifying risk and much less on the next steps of helping a person following immediate protective action. However, follow through is important if a person is not to end up facing risks again and again.

We looked at different points where the person could get shut out of decision making or have difficulty getting the plan to work for them. One of the key things that may need to be recovered is trust with family members. If a person has been taken advantage of, they may feel to blame for their lack of ability to safeguard their own interest. Family members, as well, may have their confidence in the person's ability to cope knocked. There are difficult issues about trust to raise and nuanced work to be done to rebuild trust. The January Group examined this in detail. As participants examined the risk the neighbour posed, questions about family relationships also came up.

They considered whether there could be harmful aspects of the relationship between James and his sister that also needed to be considered. Participants discussed just how difficult it can be to talk to a social worker about harm within close relationships.

KEY MESSAGE

Trust with family members may need to be recovered. If a person has been taken advantage of, they may feel to blame for their lack of ability to safeguard their own interest.

RESEARCHER:

“But maybe one of the hard things is, how can the person at the centre convey to a social worker if they **don't** trust the sister, if they don't trust their family?

How does the social worker go about finding that out?”

PARTICIPANT:

“You'd be surprised, If there is a breakdown in trust, you'd be surprised how very difficult it is even to convey - if the sister has lost faith or trust in you - you'd be surprised how very difficult it is to convey the fact that you **are** making an effort.

And to win back the trust is **very** difficult. It can be a shut door situation.”

Here the participant conveys how very much he believes he is the junior partner at the table. When he talks about trust he is referring to whether the social worker will trust his version of the situation or his sister's. Participants often used vocabulary which indicated that if subject to Adult Support and Protection proceedings, they would very much feel their ability to cope, to decide, or to understand what was going on was being judged and that it was quite likely that they could be blamed or seen to fail and be punished accordingly. In role play and discussion they referred to “being investigated” as if they were a suspect, and of “being put on the register”, which may be a reference to knowledge of the child protection register. If people come to the process with these kinds of fears deeply embedded it will affect how they interact with service providers. Practitioners need to take the time to explore any such misconceptions or anxieties.

Building Bridges to Services

At this point the attention shifts from building the bridge to maintaining the bridge and assessing the accessibility of the bridge. It is important the person be given support and opportunity to reflect on how well the plan fits and how it can be modified to work best for him or her. At this stage the person's own bridge building is important to support.



FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

The 'doing' stage is the important bit. Seeing action being taken shows what was meant when such steps were described in words. This may be a point where the person may want to renegotiate the plan.

The diary tool can help at this point as the person can point back to concerns or decisions expressed earlier and relate them to the steps being taken. At this stage the person may also be asked to give feedback on how the case conference went. It is important that a person have time and space to consider the feedback they would like to give at a point when they are best able to do so. This feedback can help make the review conference a better experience and the recovery process more fulfilling.

Working towards Resilience

Reassessing risk at this stage and acknowledging increased ability to manage risk, where relevant, can play an important part in helping a person regain a sense of self. Team members talked about the importance of the person being able to tell their own story. It takes time for this story to emerge and for their voice to develop.

If the risk assessment is written from an outsider's point of view, it is all the more important that the person at risk be given time

to tell the story of their recovery in their own way. Research team members who have recovered from harm commented that at first all people who intervene for you may see is the problem.

“You have to be patient and know if they stick around as things get better they will begin to see you – the person you want to be.”

The message the research team wanted to convey to the person at risk was to be patient, it may take time for people working with you to get to know you. The message for those working with the person is twofold. Firstly, start looking for the person and how they want to reinvent themselves early on – picking up on this can be very encouraging. Secondly stick around to see this through, or if that's not possible make sure this thread is picked up by others that get involved. Continuity is important.

REVIEWING THE PLAN

Key points:

- 1 How the person wants to be involved in the meeting, setting the agenda, who's there, how big a role they take, should all be reviewed with the person. Things may have changed, and this is a good opportunity to show that.
- 2 Closing of a 'case' needs to be a mutual decision with expectations clear.
- 3 Everyone should get a chance to say what they've learned or how they've grown, not just the person who was at risk.
- 4 Any decisions made need to be in plain language and contact information for a person may need to be updated.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

At this stage there is an opportunity for a person to share with someone how they feel they are growing. This can help them consolidate that sense of growth. Team members reflected this can have an important impact on how fears of slipping back are coped with.

Part of growing is an increased ability to admit when things go wrong and the ability to use that to develop further learning. Within the process there is an important opportunity for professionals to model this, by being open about the critical reflection they will be doing working on the case. Some may be afraid that this lets the professional mask slip, but it also has the potential to help forge better, healthier relations and teamwork with the person at risk. Participants in the June Group tried this out in an improvisation activity with the social worker saying to James she was sorry about how some aspects of the inquiry were first handled.

The participant who played the social worker later related that it was a very powerful experience for her:

“The social worker apologised today. It was hard to do, but . . . thinking about how it felt for me when social work didn't listen and did things behind my back, helped me to decide to play it that way. I didn't want James to feel bullied. I think people were shocked – they've probably never heard a social worker apologise. The person playing the support manager apologised after. I was happy that someone followed my lead and actually admitted they did something wrong.”

Making a space for everyone to have a chance to say what they do well and what they could do better should be part of the review process and can help a person have a more positive well rounded view of services and of themselves.

Building Bridges to Services

The review meeting may be a final meeting in the process or a further step in an on-going process. It is important that the person have a good sense of where the review meeting lies in the process as a whole. Although there is limited guidance on the review process set out in national guidance (Scottish Government 2007b) local authority partnerships are developing different tools for doing this. The process of reflection and further planning based on that reflection is important. We incorporated into the visual tool a feature that helps map this reflective process with the person at risk. This feature of the map is highlighted in figure 9 below:

Sometimes improved relationships and better access to forms of communication that work for a person can dramatically increase their ability to be understood, and thus how well they communicate capacity. At this stage it was felt to be very important to look for improvements in how the person could manage their own lives.

The May group had many questions they felt it would be important for the multi agency team to work through with a person at this stage of the process, particularly if the situation had involved coming to terms with difficult relations with family members or others that they had long term relationships with. Their questions were:

- Has the investigation thrown up barriers between the person and those who are important to him or her?

- Can support be put in place to stay on any new path that has been developed?
- Does the person's plan need to change based on what they have learned about people and how they respond?
- Should there be new options?
- Being honest about difficulties – is there increased understanding of how to do this? What do they know now about doing this that could help them in the future?

This group and the January group highlighted that the role of an advocate could be extremely important at this point, if relations with family or other support are difficult or have been disrupted through the process.

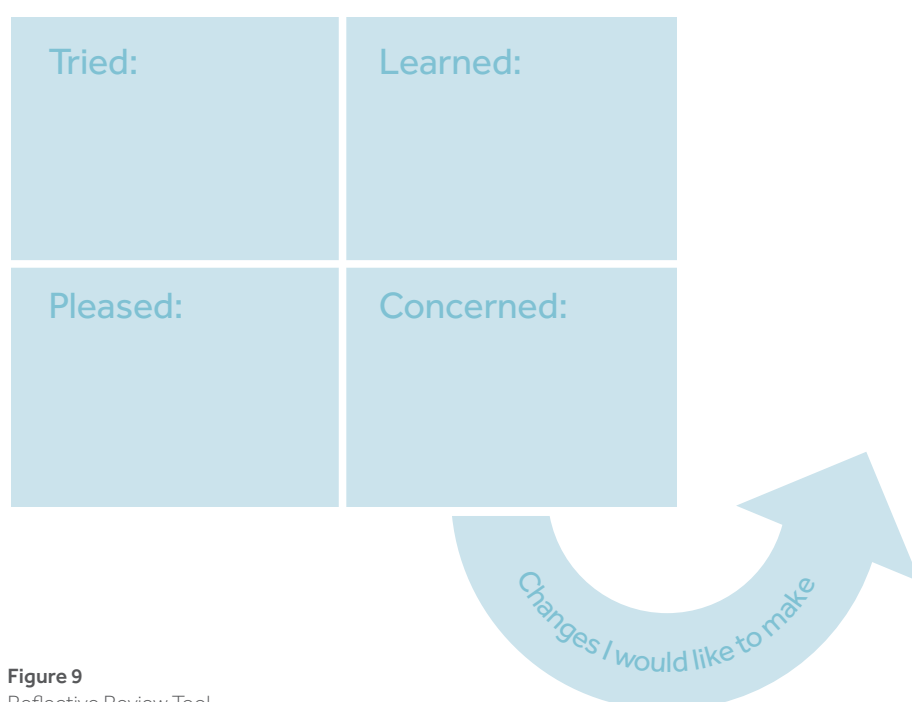


Figure 9
Reflective Review Tool.



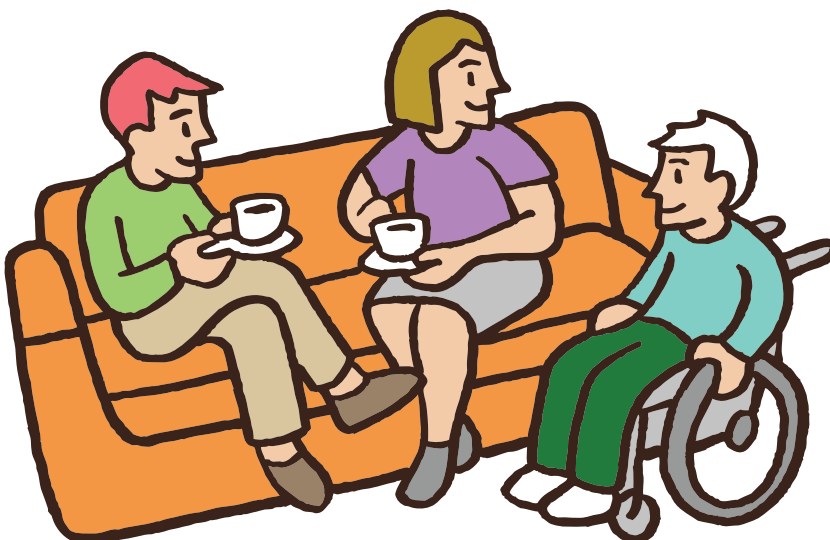
FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

The review conference is an opportunity to take an increased role in the meeting.

Although it is easy to see how citizenship development applies to the first stages of the process, when a person should know they have a right to seek help if they are being harmed, citizenship is also important to consider here. As the Changing Lives User and Carer Forum (2008) points out, it is important for people to have experiences working within groups making decisions together in order for some of the most crucial aspects of citizenship to have meaning.

Working towards Resilience

This is an opportunity to reinforce work done earlier. Celebrating improvements in a person's ability to cope and their ability to communicate their decisions, goals, and plans is important. Discovering these improvements may require gently taking steps back to let the person take steps forward.



The person may want to consider the following questions:

What will help me get the most out of this meeting?

What lessons have I learned from the previous meeting that can help me play more of a part in this meeting?

Can the meeting be an opportunity to try new ways of problem solving or communicating?

If so, how do I and my team best prepare to do this?

GETTING ON WITH LIFE

Key points:

- 1 Living with constraints and loss needs support. Grieving loss takes time, time to realise what is being grieved and what is needed to work through it. Resources should be developed and offered to do this.
- 2 Help should be offered to build connections, take opportunities, and have things to look forward to.
- 3 The person may want to share what they've learned through the process with others facing a similar one. Opportunities to do this should be developed.
- 4 The person should know they can get back in touch if concerns come up.
- 5 If a person has an advocate through the process, ways to continue their support should be considered.
- 6 The person should have a way to give feedback that won't jeopardise relationships or resources.



FOR SOCIAL WORKERS AND MULTI AGENCY COLLEAGUES TO CONSIDER

Building Relationships

Many participants, when describing the social worker they would not like to work with, recounted experiences of a case closing that had not gone well for them.

Our wishes for James' Future:

A chance to evaluate how well social work has done.

A certificate of achievement "you've come this far"

Digital TV

Driving lessons and a ford focus

Recording session with Kate at Abbey Studios in London.

Optimism

Recognition you've done well

Warmth

There had either been confusion about the social worker no longer working with them, or an abrupt notice of this with no chance for the person to have input: "I just never saw them again." As the person may be facing losses of different kinds at this point, it is important that the social worker's reduced involvement or closure of involvement be carefully worked through. An important part of this is acknowledging that through the investigating, planning and implementing work that has been done a relationship has been developed. The visual resources we suggest can help a social worker review that work and the relationship that has been developed through each stage. Talking about what has been valued and learned through this relationship and what has been achieved can make it easier to move on.

Valuing the person in their own right and articulating what the social worker has learned or gained from the experience of working with them can be helpful at this point.

Participants considered what might help a person as a case closes and came up with wishes they had for James whose journey the sessions followed. The wish activity gave participants an opportunity to express what they valued and hoped for James, as well as to enjoy a moment of humour or in some cases show respect. It was a powerful activity that social workers could adapt to fit within their working practice. Figure 10 gives a flavour of many of the wishes for James in the closing of his case.

Figure 10 Wishes for James



Figure 11
Where from Here Suggestions

Closing the case may also involve assessing the losses that have occurred. Articulating these clearly can also help a person accept them. The person may be in the difficult situation of losing relationships with people they have known through a significant part of their life. Some losses may be temporary, some may be permanent. Some losses may be able to be ameliorated by new relationships. Clarity about the likelihood of each possibility is important. Whilst the social worker cannot magically produce new possibilities to take the place of what has been lost, overtly acknowledging the loss is in itself valuable, and can be part of a process of putting boundaries around the loss and viewing it from other perspectives. Our findings about loss in Adult Support and Protection proceedings are in agreement with recent research by Mackay et al (2011). We include at the close of the report suggested resources that may help a person deal with the losses that changes to become safe from harm have involved.

Building Bridges to Services

At this stage it is important to review with a person what they have learned about how services work and how this can help them in the future. This discussion

needs to include checking out how they can remember what they've learned in a meaningful accessible form. It is important to be honest with a person at this point that the record of the Adult Support and Protection intervention is kept on file. Participants had a very strong sense that things are kept on file about them and fear that they could be misinterpreted or misused. As the case closes a person may want to have some input about what is in that file. In the videos that we have developed the social worker and person harmed discuss this.

Returning to the importance of face, at this point it may be important to give the person at risk a chance to put a face on the case file, or to have some say in deciding what is seen first should someone in the future look at the file. We asked people how they saw themselves taking forward their engagement with Adult Support and Protection. Their ideas for how they could have a voice may chime with a person who has been through the process. Some of these choices are depicted in figure 11.

1

- Tell parents (wish they had been here so I could show them)
- Show dvd to those that matter
- Remember the things I helped write down

2

- Take part in workshop
- Visit social workers
- Connect better to people who are consulted
- Represent people with disabilities like People First
- Go to see MSP's
- Approach TV/media get more people involved, we can be successful

3

- Involve us in making policies and procedures
- Don't make decision without getting to know us
- Tell people don't hide behind closed doors
- For people to realise we're not just a number



FOR PEOPLE WHO MAY BE AT RISK TO CONSIDER

In the beginning stages of the process we have suggested using a diary map to record the person's feelings, concerns, the responses that have been made to these, and the decisions made together with the social worker and their wider support team. At this point it may be helpful for the person to look over this.

The person may also want to think about other ways they would like to remember what they have learned as part of the process and what they have valued about the people they have worked with through this time.

Lack of clarity about roles can contribute to stress. It is important, as a case closes, that the person works with both the social worker responsible for the case and their wider support network to be clear about what roles are ending and what services or roles are being handed over to others.

The person may also have some tasks to face around grieving. There are different phases to grieving which require different kinds of space and support. The person's own awareness of this may need to be supported. Articulating where they are in the process of grieving in itself is an important step in moving through it.

As they move through grief it is good if the person has new opportunities to look forward to and increased opportunity to take responsibility and manage risks for themselves drawing on lessons learned and new strategies.

Working towards Resilience

Having something to give to others can powerfully lift a person's sense of self and relation to others. Feeling that one can make a difference for others that come after can make a difficult process seem more worth it. There was a strong consensus from participants that peer support was very important and that learning from each other's stories was a valuable way of developing their own knowledge about services and thinking through how they want to relate to them. The story the person has to tell about all phases of the process can be very helpful both to practitioners across the multi agency team and to other people who find themselves at risk.

Formats that make stories accessible and awareness of where and how to access these stories are all worthy of resources and statutory commitment. One social worker with lead responsibility for Adult Support and Protection in her local authority summed this up when she observed:

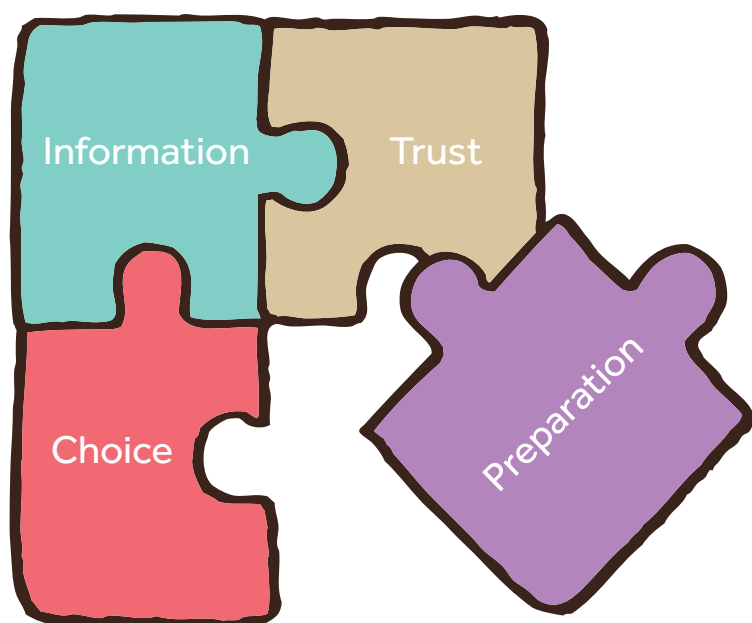
**It's the stories that
stick with you.**

CONCLUSION

There are many pieces to the protection puzzle. In discussing them we find that they interlock in interesting ways. The roles different people play in the process interlock and when they work together support each other. The principles of good working practice interlock, so that, again, done well they support each other. Different communication strategies such as those detailed in this report can also interlock to support the process. In this conclusion we reflect further on the research process and the lessons that flow from the methodology employed.

KEY MESSAGE

It is important to reflect on the process of doing research together, as well as the messages that resulted.



Participants summed up the experience:



Lessons from this way of working

The participants in this research all had experience of person centred support. In working with them we found that they had high expectations of their own involvement and peer problem solving, a good understanding of ways to involve a person in decision making and a strong sense of the importance of support relationships to making good decisions and having a good quality of life. However participants did have different views about social workers, police and health workers.

Some professionals have been very helpful. Sometimes participants have been let down. It is very hard to put into words what makes someone trustworthy, but "we know it when we see it", said a participant in the May Group.

People showed a great deal of ability to solve problems. Several times the difference between silent, passive presence and the ability to communicate this problem solving came out when differing ways of communicating were explored. What is clear

from this is that it is not a matter of finding one way. In the rest of the resource pack we include resources to help practitioners use a range of visual and creative methods for working with people. As one research team commented: "One size does not fit all; we're not just a number."

Many of the participants let us know that they found the process of participating in the research very valuable.

Reflections on Participants' Views:

On a bright rain-washed April morning the research team sat down together to reflect on what we had learned so far. We were half way through delivering sessions and this was our first pause to draw breath and consider what we'd been hearing. To get to the meeting one member had to patiently wait until the third taxi called out was able to accommodate his wheelchair. Another member had to join us between doctor's appointments. Another had made a six hour bus journey with four changes in order to join us and would have the same on their return journey.

But everyone was excited to be on the research journey together. The following points are taken directly from the joint reflecting we did on that day. We have gone back to these points several times since and find that their importance continues to resonate.

When faced with the need for work with social work because of harm, people would like to introduce themselves (their goals, values, strengths) not be introduced by their file. Participants recommended taking time to hear about the person's previous experience of working with social workers to prevent misunderstandings.



Getting to the grips with the research findings.

Participants valued honesty about options, costs, capacity assessment, and other procedures, with clear explanations. They wanted this approach to be part of the relationship they had with any of the practitioners taking part in the investigation. They also highlighted the importance of flexibility about how case conference and risk planning is carried out. They suggested that visual tools can make the most of a person's communication strengths, and can let everyone in the room be human. These techniques could potentially transform a person's inclusion in formal Adult Support and Protection proceedings. Participants expressed the strong view that a successful process needs to incorporate supportive relationships – not one-off advocacy but sustainable support.

Participants wanted it understood that being the subject of such proceedings may affect the person's sense of self. Their self confidence and sense of entitlement to rights and choice may be dented. Risk assessment forms, capacity assessment, and case conference reports may act to further damage a person's sense of self. Attention needs to be paid to the person's own sense of what they can do to recover and gain resilience.

However, if we had to summarise all of the findings in one word, it would be: listen.

Making Co-research a Reality

In the reflective discussions we have held to evaluate our work, participant researchers have stressed that they have learned a great deal more about the breadth of service delivery, the range of people's support needs and abilities, and the wider culture of policy making than they had anticipated. As one of the research team put it, "it's opened my mind". This same sentiment was expressed by another team member:

"It has helped me see the bigger picture and helped me think through how I can manage given changes in that bigger picture."

In concluding this report it is important to reflect on the process of doing research together, as well as the messages that resulted. Two members of the research team have described the process as "an emotional journey – but well worth it."

Co-facilitating the workshops and analysing video footage of the sessions has developed their facilitation skills, ability to analyse group dynamics and strategies for meeting support needs of a diverse gathering of people. They have gained skills and confidence by attending conferences and

opportunities to discuss the research project. This is reflected in the self evaluation and peer evaluation activities.

Skills that involve working in groups are the most complex and have taken more time and reflection to develop. As one team member reflected:

"You go into a meeting thinking your own intentions. Someone says something and it puts a different spin on it. And then you have to look at it. It's more difficult to state your intentions in a way that takes on board what they've said. Maybe it adds or takes away from what you've originally wanted to say ... It's a growing thing and positive. Research has changed my attitude about trying to get my point across."

There is a great deal of learning on the job to this aspect of the project. Another team member's views summarise this aspect of the research journey:

"We hadn't worked with so many different people. Some times it was a shock but we learned how to build relationships. People have so many different needs and ways of communicating with views that are still important."

Our research was enriched by the use of a range of means of expression and engagement.

Around the drama activities we used activities with photographs, diagrams, and art materials to provide people with a range of ways to imagine and respond to our research questions. Differing activities have precipitated a watershed in communication and engagement for different people. Having the flexibility and skill to work across a range of activities has been extremely useful and we would advocate this for practitioners engaging in Adult Support and Protection work as well.

One dynamic within the research process that struck us particularly strongly was our observation on a number of occasions that people came and shared their story with us in informal moments of the workshops, not because we were asking for their story, but because we had shared one and invited them into it. As a research team member reflected:

“I felt that if you did not ask the question directly they would come to you with their own story and be more open with their own experiences.”

This tangential way to approach difficult subjects needs further exploration so that professionals, carers and those at risk can understand the potential value and inherent issues of trust of this approach.

Our further reflection is this: recovery from harm can be a complex interplay of sharing

stories, and through working together can become a shared story in itself. We hope some of the stories shared in this report and the video resources linked to them will “stick” and become part of the maps that social workers and multi-agency partners use to help people at risk of harm find a way to more resilient lives.

Although we did not ask people to share their personal stories directly, informally many participants let us know that in the past they had struggled with some difficult and damaging situations sometimes for several years and did not know who they could turn to. These stories underscore for us the importance of the work that is going into developing good quality Adult Support and Protection practice.



Our research was enriched by the use of a range of means of expression and engagement.



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Appendice 1

Participants Contributions to Poster Activity:
What We Know About Social Work**Social worker I would not like to meet:**

Bossy and controlling.
 Strict = telling you what to do.
 Sly.
 Talks to the carers rather than the individuals.
 Someone who works from their own list, does not listen.
 Someone who keeps looking at their watch from the minute they walk through the door, not flexible.
 Someone who won't work face to face, always sending letters setting dates and time without you.
 That they vary so much.
 Not Knowledgeable, do everything from the book.
 No Sense of Humour.
 Knows the solution before they have met me.
 They've got the power.
 Don't want to go into emotional side.
 Don't offer advocacy.
 Difficult to contact, very distant.
 Writes things I'm not allowed to see.
 Not on my side.
 Take other people's side.
 Doesn't follow through on what they say.
 Always new people.
 Not having a relationship with them, never see them, they don't stay long when they come.

The Social Worker I would like to meet:

One that listens.
 Dedicated.
 Keeps an open mind.
 Considerate.
 Respect me and my views.
 Doesn't suffer from selective deafness.
 Listening to your dreams not ridicule them.
 Treats me as an individual not a case number.
 Caring Keeps you informed.
 Someone who is calm.
 Be aware enough of the various groups.
 Doesn't ask you to take sh*t
 Knows you have rights.
 Interested in you as a person.
 Informed.
 Continuity.
 No cross words.
 Takes time and gives time to communicate.
 Give good advice, help with forms, and reading,
 You can tell them what you do want, and what you don't want.
 Someone who follows through.
 Has a good relationship with your team, but also can keep confidences if there are things you don't want your team to know,

What puzzles me about the social services system:

Can you trust them?
 Attitudes can be unhelpful.
 Meant to be there to help you sort out problems in a good way.
 Care can have lot of elements covered by different people, it's difficult to know who does what and how much each person knows about the rest of the care package.
 The information you give to them should be private, but you don't know who gets to see it.
 You don't know how many people know your business.
 It's hard when one person takes over from another, they should be filled in but notes can't say it all.
 They don't know you as a person.
 You can make a relationship with a person but not a department.
 Two people can see the same person completely different.
 It should be a social net, not just one person.
 Department needs a complete overhaul.
 Their telephone system doesn't work. (I don't like that) they have meetings without the person.
 Transport is really difficult, people make excuses and don't make it accessible.

Appendice 2

Participants' Responses to what Resilience means:

Cheerie.
 Being creative.
 Strength.
 Giving things a go even if it turns out a mess.
 Wildlife.
 Taking an opportunity.
 Choice.
 It's about you getting up and going, though difficult ground no matter how hard, you can find light.
 Green and growing.
 Our resilience is connected to the resilience of others.
 Basics.
 Independent.
 Keeping your independence.
 You can take a hard knock and come back.
 Can blow in the wind.
 Having shade.
 Can be taken for granted.
 Foundations (even though a wee bit battered).
 Having direction.
 Strong person.
 Can cope with things.
 Freedom.
 Making good choices.
 Facing the sun.

Coming out from behind clouds.
 Not giving up the ghost.
 Making stuff.
 Leave past behind.
 Start fresh.
 Going from darkness to light.
 Gaia

Participants' Responses to what Trust means:

Security.
 Help.
 Care.
 Strong link.
 Love.
 Friendship.
 Unbroken bond.
 Life is in the air.
 Tea, milk and sugar, ginger biscuits.
 Trust can be delicate, easily squashed by one action.

Talking and doing things.
 Without a person equipment can't be trusted.
 Trust where you land – is it safe? Will it hold you? Each step is an on-going process.
 Trusted friend enables me to push myself forward when he is not there.
 Trust comes naturally when you are young.
 Guarding.
 Protecting.
 You can be too trusting.
 Open minded.
 Things don't have to be as bad as you might think.
 Enlightenment.
 Sunshine.
 Warmth.
 Sometimes have to put trust in a lot of people you don't know.

Appendice 3

Risk Assessment Form cover
Front outside cover

WORKING TOGETHER
TO OVERCOME HARM

My Goals

Things that help me have a sense of purpose
and remind me of how I want my life to be.



My Concerns

Things I want help with.

My Team

Things that are helpful for the people working
with me to do.

Front inside cover

People helping me		
Name	Their Role helping me	Contact Details

Questions I have	Answers we've found

Back inside cover

PS in the plan	How they've worked

Back outside cover

What I've learned and where I've
got to working together

What others have learned working with me

What I want people to remember about the work
we've done

How I want to be remembered