My Safety and Risks
Introduction

Keeping ourselves and others safe and learning to manage our own risks is an important part of having responsibility for, and control over, our own lives. In general, and especially in secure hospitals, risks are to be reduced and avoided. But people need to take risks to grow, develop and change, and in everyday life, taking risks is a necessary part of being human. So, there are two uses of the word risk – it is both something that is necessary and also something to avoid. In a recovery-oriented service, there is a clear separation of these two meanings:

**Harmful risk** relates to behaviours that are illegal or not socially acceptable, for example, anti-social, violent and criminal behaviour, personal irresponsibility, self-harming patterns of behaviour and relapse of mental illness. Harmful risk is to be avoided, and our treatment in hospital focuses on reducing harmful risk. Avoidance of harmful risk can also be part of our recovery goals, although this is avoidance of risk for a reason, such as: “My voluntary work means such a lot to me that I want to avoid threatening it through becoming hostile when I am unwell”.

**Positive risk-taking** relates to behaviours that involve us taking on challenges that lead to our personal growth and development. This includes developing new interests, trying something we’re not sure we can achieve, deciding to act differently in a relationship, and taking on new roles. There is nearly always a benefit from this – even if it all goes wrong, we grow stronger through trying and failing. Positive risk-taking – risk for a reason – will be needed to meet many of our recovery goals.
What’s it all about?

In this Pathway Resource Book, we’d like to develop a shared understanding of your safety and risks to yourself and others. We’d like to help you find out how your mental health, relationships and lifestyle relate to your safety and risks. We also want to find out how you’ll keep yourself and others safe once you leave hospital.

How to use this Pathway Resource Book

You may find it useful to answer all the questions in this Book, or it may be that you just want to answer some of them. Whichever way you choose to use them, we hope that you’ll be able to use the questions that are important to you as the basis for a discussion with your clinical team.

This Pathway Resource Book – My Safety and Risks will help you and your clinical team gather all the information needed to help answer the questions relating to your safety and risks in My Outcomes, Plans and Progress.
Where am I now?

We will now begin to look at what is meant by your safety and risk and how we can tell what these are. We will look at the difference between harmful risk and how this is very different from positive risk-taking, which can help us in our recovery from the difficulties we have with our mental health and other problems we face in life. We will think about why it is important that you know what your risks are and how you can measure them and keep track of them during your time in hospital. Some of these things will be uncomfortable for us to think about and discuss with others, and it is important to be able to trust the people we do this with. We thought about who this might be in Pathway Resource Book Two – Me and My Recovery.

What do I understand by ‘risk’ and ‘safety’?
What is the difference between harmful risk and positive risk-taking?
What harmful risks have I taken that have brought me into hospital?
How have my mental health, my lifestyle and my relationships affected my risk taking?
How do my disability or communication needs affect my risk taking?
What harmful risk behaviours do I still have?
What do others think are my harmful risks?
How can we tell what my risks are?
What is a risk assessment?
What is my current risk assessment?
Now we know what your current risks are and how safe you are for yourself and other people, we will begin to think about how you want these to change. We will think about what your risks need to be like before you can move to somewhere that is less secure and eventually move out of hospital altogether. Being able to manage your risks and keep yourself and others safe are some of the most important influences on how long we will be in hospital and what level of security we will live with while we are here.

How does my risk-taking need to change before I can move on?
What are my goals for my safety and risk to others for the next few weeks, for the next few months and for the next few years?
How do I get there?

We now have a good idea of what changes to your safety and risks you need to make for you to be able to move on through the secure care system and eventually leave hospital altogether. We will now look at the steps you can take to reduce your risks and make yourself and those around you safer. This will involve changing your behaviour and this may not be easy. It may involve taking medication, having different sorts of therapy, becoming involved in new activities, learning new skills and learning to live with yourself and others in ways that may be new to you.

Most of your goals for reducing your risks and how to achieve them will be identified in your Care Plans and will be discussed at your ward rounds and six-monthly CPA meetings. For many of these changes you will need the help and support of other people and we think about these relationships in Pathway Resource Book Three – My Relationships. You will also need to think about and have a plan for how you can maintain these changes once you leave hospital.

What can I do that will help me change my risk-taking behaviour?

What changes can I make to my mental health, my lifestyle and my relationships that will help reduce my risks?

What help do I need with my disability or communication needs to help reduce my risks?
How can I tell how I’m doing?

As you take important steps to improve your safety and reduce your risks, it’s good to be able to monitor your progress and see how you’re doing. This helps you and other people know what else you might need to be doing before you can move on. Eventually, it will be by seeing what progress you have made and being able to demonstrate this progress to others that will mean you can move to less secure care and out of hospital altogether.

What are the things I’m doing to improve my risk assessment?
How is my risk assessment changing?
How do others, including my Multi-disciplinary Team and the MoJ, think I’m doing?
Who else can help me monitor my safety and risks to others?