

Sharing Risk in Casework

Caseworkers are required to regularly make important decisions about the life of a child or young person (child) and their family. This can cause stress and anxiety, but also feelings of hope for change. Sharing risk does not mean avoiding making important decisions.

Although sitting with risk can feel like a big responsibility, the good news is that caseworkers don't have to have to carry it alone. Sharing risk reflects a commitment to making the best decision for the child and involving other people in that process.

Caseworkers should reflect on their own perspectives and share risk in decision making with managers, colleagues and Department of Communities and Justice (DCJ) Permanency Coordinators (PC). Caseworkers should always work alongside children, families, kin and carers, partnering with them to share worries, find solutions and make decisions.

Sitting with Risk and Responsibility

Anxiety is a natural part of our work. It helps us know why we are worried about a child, and act. But if anxiety is not managed, we can become risk averse, avoidant, reactive or not collaborate well. Caseworkers who feel like they have sole responsibility for decisions may worry they will make the wrong decision which could lead to a child being hurt, lonely or disconnected. They may also worry that they will be blamed if there are negative outcomes from decisions they have made.

When caseworkers feel that they bear all the responsibility for decisions it can lead to:

- not seeing the individual child, only the statistic
- focusing only on complying with procedures rather than responding to the child's needs
- constantly checking work
- projecting or blaming other people or agencies
- reframing and minimising the true nature of concern
- clinging to the familiar, even when it isn't working
- being risk adverse and not giving families a chance to live safely together
- not feeling safe or willing to consider different paths or perspectives
- relying on instincts alone rather than balancing judgement with evidence

Shared Decision Making

Some important decisions that you may be involved in making include:

- When it is safe to stop working with a family and the child protection worries and concerns have been sufficiently addressed.
- Whether enough progress has been made towards the case plan and it is safe for the child to be restored to their parents.
- Whether a child's long-term wellbeing needs are being met with their current carers, or they need to live with someone else.
- How best to support a child in OOHC if they have left their placement and chosen to live with their parents, with friends or in an unsafe environment.
- How a child will spend time with their family (family time).

Important decisions about a child should be made in partnership with other people involved in the child's life, especially their family network and carers. When risk is shared and understood from multiple perspectives, it leads to better decision making for children.

Consider involving the following people in decision making:

- the child
- parents, family or kin and cultural community
- carers
- other professionals working with the child and their family, for example psychologists, counsellors or other support services
- colleagues within your organisation, including management
- colleagues in DCJ including caseworkers, managers and Permanency Coordinators
- cultural consultants and cultural services.

Involving others in decision-making helps prevent individual bias from clouding judgement. For example, you may strongly disagree with a parent's practices such as diet, hygiene, play and bedtime. Your values may result in a fixed view that they are not good parents, rather than looking at the underlying child protection concerns. Alternatively, you may normalise parenting practices that put a child at risk. Discussing your worries with others draws on a wider range of expertise and allows your casework to be critiqued.

How do we Share Risk in Practice?

- Talk to children and young people to involve them in all decision-making processes.
- Have clear and honest discussions with the parents or carer about your concerns and what they need to do to change. Support them to make changes.
- Do not make decisions in isolation or rely simply on tools and processes. Take action, be courageous and get support from your supervisor and peers.
- Seek support when you are worried or feel you do not have the knowledge. Don't be embarrassed to ask for help.
- Be open to different views and perspectives and accept feedback.
- Work with others to see how your biases might be affecting your decisions and actions.
- Share experiences and knowledge with team members in a non-judgmental and respectful way.
- Involve interagency partners, including DCJ – we all have a role in keeping children safe.

Opportunities to Share Decision Making and Risk

- case plan reviews
- Group supervision
- Family Group Conferencing (FGC).
- consultations (cultural) and consultation with your Permanency Coordinator
- meetings with your manager and colleagues.

Family Group Conferencing (FGC)

Family Group Conferencing (FGC) provides a structured way of working with families. With the help of an independent FGC facilitator, families can discuss the worries they have and make a plan about how they can help keep the child safe.

Aboriginal Family-led Decision Making

When working with Aboriginal families, discuss with them how casework will include Aboriginal family-led decision-making processes. These processes empower Aboriginal families to develop their own plans that address child protection concerns.

For further information see the working with Aboriginal children and families section on our website and the [Aboriginal Case Management Policy](#).

Individual Supervision

Through formal individual supervision, caseworkers can discuss, reflect, explore and challenge practice their own practice, thinking and decision making. This is a way to talk through challenges, bias, judgements and feelings whilst working with children. By being reflective, caseworkers can reduce bias, which leads to better outcome for a child and their family.

Group Supervision

Group supervision provides caseworkers with an opportunity to share their concerns about a child with colleagues. It allows them to seek group consultation, consider different perspectives and draw on the expertise of others. Using group supervision when making important decisions helps share the risk.

Group supervision usually occurs with casework staff of the same organisation. However, you can consider inviting external agencies to your group supervision session to discuss your shared concerns about a child and their family.

DCJ use the [Minnesota model](#) of group supervision to help with decision-making. Your organisation might too. When there are concerns about a family you are working with or disagreement about the best decision for a child, caseworkers might be invited to be part of a group supervision with DCJ or may request a group supervision with DCJ (arranged through the Permanency Coordinator).

Please see: [Relationship-Based Practice](#) and [Reflective Practice](#) for further information.