

**Perceptual Aspect of Risk: The Concept and Management- A  
Qualitative Study of a Non-Governmental Healthcare Organization**

البعد الإدراكي للمخاطر: المفهوم و الإدارة

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**Abstract**

This research reports on the way that employees perceive risk in a non-governmental healthcare organisation (NGO), that provides long-term healthcare and support services for people with mental, intellectual and physical disabilities. Thirty-four respondents from all levels within an NGO participated in in-depth semi-structured interviews to explore their own understanding of the meaning of the concept of risk; types and sources of risk in their work; and initiatives for controlling and dealing with such types and sources. Additional information was obtained from documentation and personal observation. The analysis identified an interrelated link between perception and risk. Accordingly, the study found that risk is culturally-constructed, individualistic and subjective. The culture of fear-from-risk and perceiving risk as something purely negative was dominant among the participants. Due to the central role of people in managing risk, the risk management process should consider all perspectives. This requires a participatory system of managing risk, improving the awareness of people about risk and modifying the culture of risk among them. Training has a significant role in achieving these fundamentals.

**Key Words:** Risk perception; Risk concept, types and sources; Uncertainty; healthcare and disability services NGOs; Cultural aspect of risk.

## ملخص

هدف هذا البحث إلى دراسة أثر الإدراك على إدارة المخاطر في القطاع الصحي من خلال دراسة إحدى المنظمات غير الربحية (NGOs) التي تقدم خدمات صحية ورعاية طويلة الأمد للأشخاص ذوي الإعاقات النفسية والعقلية والحركية. شمل هذا البحث الوصفي استطلاع آراء ٣٤ موظفاً في هذه المنظمة من كافة المستويات الإدارية والمهنية: الإدارة العليا والإدارة الدنيا والعاملين الفنيين. أشارت نتائج الدراسة إلى أن المخاطر بالدرجة الأولى أمر يتعلق بالإدراك البشري. حيث يتم تعريف المخاطر وحتى طرق إدارتها من خلال الخبرة الشخصية والعملية للفرد. ونظراً لهذه الخاصية، فإن اعتبار كل الآراء ووجهات نظر العاملين في عملية إدارة المخاطر أمر ضروري. من أجل إدارة مخاطر أكثر فاعلية في القطاع الصحي يجب إشراك كل العاملين في المنظمة في تعريف المخاطر وطرق إدارتها والتحكم بها. كذلك أشارت النتائج إلى أن معظم ردود المشاركين كانت تميل إلى اعتبار المخاطر أمراً سلبياً يجب تجنبه دون النظر إلى الفرص التي تحويها عملية أخذ المخاطرة.

**الكلمات الدالة:** إدراك المخاطر، مفهوم المخاطر وأنواعها ومصادرها، عدم التأكدية، منظمات الرعاية الصحية ورعاية المعاقين غير الربحية، البعد الثقافي والإدراكي للمخاطر.

## 1. Introduction

Although risk is a common feature of any human action or behaviour as there is no single outcome that is absolutely assured, risk is perceived and defined in different ways by different people as they view risk from different angles. For some people it means something negative, and for others it is viewed as something positive (Frame, 2003). One of the main dialectical issues in risk is whether or not the risk can be divided into two types: perceived and actual. Some risk researchers, such as Watson (1981), state that risk can be classified into perceived and actual, thus subjective and objective. They claim that the actual risk is the real one, and perceived risk is something that relates to the feeling of lay people or the public, therefore, it cannot be considered a realistic risk. At the same time, others argue that there is no distinction between perceived and actual risk, and risk management depends mainly on perceptions when it comes to making decisions (Ansell and Wharton, 1992). Researchers, such as Botterill and Mazur (2004) and Sharder-Frechette (1990), go further and argue that there is only one type of risk: this is perceived risk. They criticize any classification of risk, as risk can not be anything except perceived. Sharder-Frechette (1990, p. 5) states that “if there were

hazards that were not perceived, then we would not know them". Botterill and Mazur (2004, p.2) add that "understand and cope with the dangers and uncertainties of life, there is no such thing as *real risk* or *objective risk*". From their viewpoint if risk is not perceived then it will not be known. They view risk as "the outcome of uncertainty" (Mun, 2004, p. 13), and thus a product of perception (Adams, 2004).

Despite these differences in perspectives, the risk concept is extensively used to describe the probability of undesired outcomes, and consequently, terms like risk, danger and peril may be used synonymously and interchangeably (Fox, 1999; Waring and Glendon, 1998). Therefore, risk management is generally concerned with circumstances in which no gain is probable. Most researchers agree that risk consists of two main elements: the uncertainty and the negative impact (e.g., Banks, 2002; Kliem and Ludin, 1997; Nakayachi, 1998; Culp, 2001). Vaughan (1997) highlights the link between risk and uncertainty and claim that if the likelihood of undesired outcome occurrence is zero or 100 percent, this means that there is no probability or uncertainty, thus no risk. Therefore, "if [we] know for certain that a loss will occur", as Vaughan (1997, p.8) declares, then "there is no risk". The second element of risk is unfavourable effects and adverse deviations from an expected outcome, whether deviations cause harm or reduce benefits. For risk to exist, one of the potential consequences should be unfavourable (Ansell and Wharton, 1992). The difficulty of the risk identification is that it is not easy to determine the probability of negative results occurring and in specifying what is meant by negative impact of risk or consequences from risk (Klinke and Renn, 2002). Every person has his/her standard and definition of bad outcomes, and his/her estimation and assessment of consequences and uncertainties and probabilities (Adams, 1995; Rejda, 2005).

The uncertainty element of risk prompts many researchers to correlate risk with perception, as well as, to differentiate between risk and other unpleasant events such as hazards and injuries. They view risk management, among other things, a matter of perception (Ansell and Wharton, 1992), thus risk management is mainly concerned with

managing and minimising uncertainty (Banks, 2002). The role of perception, then, increases as probabilities, in many instances, are based on personal beliefs. According to Adams (1995, p. 30) “risk is defined...as the product of the probability and utility of some future event. The future is uncertain and inescapably subjective”. Therefore, managing risk through identifying and assessing it and then finding suitable strategies to control undesired outcomes depends mainly on the perception of a person (Barton *et al.*, 2002).

## **2. Risk Perception and Risk Management**

As discussed above, perception plays a major role in explaining the way that people behave and act, and is an essential part of human awareness and behaviour. It is a part of individuals’ cognition of objects and how they deal with them (Bordeux *et al.*, 1999). However, perception has a more active role in some fields, such as the risk management field, where uncertainty is the main issue. For this reason, it is not surprising that, the effectiveness of the risk management process, as Ansell and Wharton (1992) observe, depends mainly on the perception of individuals. The main components of perception include feelings, values, attitudes, experiences, knowledge, context, sensations and images of people (Charns and Schaefer, 1983; Wilding, 1982; Bannister and Bawcutt., 1981). The individuality of feelings, attitudes and images (Samson and Daft, 2005) makes risk an individualistic issue. Thus, recognising how people perceive risk is essential in identifying risk (Sekuler & Blake, 2002).

### **2.1 Cultural aspects of risk management**

The interrelationship between perception and culture (Weiten, 2004) highlights the role of culture in risk management. Pidgeon *et al.* (1992), for example, note that “risk perception involves people’s beliefs, attitudes, judgements and feelings, as well as the wider social or cultural values and dispositions that people adopt, towards hazards and their benefits. (p. 89). Adams (1995), Douglas and Wildavsky (1983), and Thompson (1980) emphasise the connection between risk and culture and agree that risk is *culturally constructed*. Fox (1999) goes even further by

stating that the main difference between risk and other unfavourable events lies in the cultural dimension of risk.

## **2.2 Participatory Risk Management**

The role of culture and perception in managing risk also highlight that risk is an individualistic issue. Individuals are key elements in risk management, thus, it is necessary in organisations to involve all employees in the risk management process. In this regard, Helliard *et al.* (2001) note that

Any risk management system will have input from, or be implemented by, individuals and therefore the attitudes of these individuals to risk may have an important bearing on the successful implementation of the system. It is individuals within organisations who take risks and an inquiry into the attitudes of these individuals to the risks that they face and the decisions that they make may help companies to manage risk. (p. 7)

Therefore, the risk management system should be a participatory one that involves all levels of employees. Managing risk, as seen by Adams (1995) and Vaughan and Vaughan (1999), is a knowledge-based process; so, lack of participation of any party or group in the risk management process in the organisation could lead to an incomprehensive risk management. Participatory management has significant benefits in exchange of information (Samson and Daft, 2005), but it is especially important in risk management due to the important role of the individual perception.

This paper will report on the way employees in a non-governmental healthcare organisation perceive risk and its types and sources, as well as their viewpoints regarding initiatives for managing and dealing with risk.

## **3. Research Methodology**

Exploring how people perceive risk and finding out types and sources of risk and initiatives for managing risk from their perspective, requires interpreting individuals' perceptions, experiences and feelings.

A qualitative research approach is the optimal method for this type of study as it facilitates studying and exploring the phenomenon in detail (Ritchie, 2003) and to answer *how* and *why*<sup>(1)</sup> questions (Denzin and Lincoln, 1998), as well as it allows using of multiple research methods, and necessitates interaction with participants and observing the work context. In line with qualitative approaches, in-depth semi-structured interviews, observational techniques and document search are used for data collection in this study. Many researchers (i.e., Yates, 2004; Goodwin and Horowitz, 2002; Patton, 1990) consider these methods key data collection techniques in qualitative research (in addition to the focus group technique).

Personal interviews technique was the main data collection approach in this study. Semi-structured interviews were used to collect data. Four advantages are associated with this approach (Lewis, 2003; Robson, 2002; Gubrium and Holstein, 2002; Briggs, 2002; Legard *et al.*, 2003): firstly, in-depth semi-structured interviews enable the researcher to focus on the main subject of the study, while at the same time interviewees can talk unreservedly with the opportunity of probing by the interviewer. Secondly, these interviews permit the researcher/the interviewer to respond effectively and immediately to the participants' responses. This is because the researcher needed, in many instances, to shift from one topic to another depending on the previous response of the participant. Also, by using this type of interview, the researcher may probe any idea or answer, and interrupt the participants for any details or explanation (Ackroyd and Hughes, 1981). Finally, through the semi structured in-depth interviews, the interviewee can propose some ideas, and will be

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(1) Yin (2003) and Babbie (2001) classified case studies into three types according to the purpose of the research: descriptive, exploratory and explanatory. Yin (2003) claims that when the research aims to answer 'what' question then the research is exploratory, whereas, 'how' and 'why' questions are related to explanatory case studies. Descriptive case studies are usually used to describe the situation or the case as it is (Babbie, 2001). This research used a case study method to explore what the term risk means to the participants, how the participants perceive risk and why. Therefore, this research is exploratory, as well as, explanatory.

able to clarify any point in the interview (Robson, 2002). All interviews in this research were tape-recorded <sup>(2)</sup>.

Along with the multiple methods technique, qualitative research usually is an effective approach when using other empirical approaches, such as case study (Denzin and Lincoln, 2000). Both qualitative research and case study strategies lead to strengthen data collection through achieving an in-depth study and detailed research. This study uses a single case study approach <sup>(3)</sup>, as for an in-depth researches using an intensive study of a small sample (i.e., single case study) is more effective than a less intensive study of a large sample (i.e., multiple case studies) (Emory, 1985).

### ***3.1 Selection of Subject: Sample selection, structure and size***

The site of this research is an NGO that provides healthcare and support to clients with mental (psychiatric), intellectual and physical disabilities, in New Zealand<sup>(4)</sup>. All staff in the organisation under study were the target participants in this study. However, practically it was

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- (2) Tape-recording interviews allow the researcher to focus on interacting with the participant rather than writing the responses. Also, it helps in observing the body language of interviewees and paying more attention to the interviewee rather than to note the main points. In addition, by tape-recording the interview no words are missed, as the whole dialogue is recorded (Johnson, 2002). Other benefits include the convenience of returning to the interview text in future to clarify any matters.
  - (3) The main aim of the research is to conduct an in-depth study of how employees perceive risk. This is not a comparative study where two or more case studies may be appropriate but an in-depth phenomenological study. People are unique in their feelings, values, attitudes, experiences, knowledge, context, sensations and images (Charns & Schaefer, 1983; Wilding, 1982; Bannister & Bawcutt, 1981). These main components of people's perceptions are dynamic and distinctive, and are influenced by many variables; one of them is the context of the site. So, while using more than one case study requires the researcher to consider the differences and variables in different case studies' contexts and environments, using a single case study attains equivalent conditions for the research participants.
  - (4) Rehabilitation and long-term mental, intellectual and physical disability services make up a major sector of the healthcare system. Organisations that supply these types of services are, in general, classified into three main types in terms of providers. They involve the public sector, the private sector and the non-government organisation (NGO) sector. The first type includes public hospitals and health centres; the second involves private hospitals, homes and clinics; the third, and the biggest in providing this type of service, consists of organisations that are non-governmental but mainly funded through the public purse.

difficult to interview all employees, and it was not expected that it would be possible to get approval from all to participate in the research. Therefore, the target number of participants was 30-40. This number was based on the size of the selected organization, as well as the nature and types of its business. In total, the number of participants was 34 out of a total of 200 employees. The way in which the participants at governance and managerial level were recruited was according to their positions, whereas other participants were selected on a *snowball*<sup>(5)</sup> basis. The participants were contacted through one of the following three ways: personally, by the internal mail of the organisation under study or by telephone. As a result, there were four participants from governance, 13 from managerial level and 17 from the staff level. All the participants were asked to give 1-2 hours of their time for participating in the interview. Each participant was provided with the Information Sheet regarding the research process and aims, and then was asked to sign the Consent Form before the interviews began. Participants were informed that the interviews would be taped, and that they would receive a transcript from their interviews for review and possible changes.

Three Lists of questions/guidelines for the interviews were developed based on the job description and posts of each group of participants (See Box 1). The first set of questions was designed for top management and Board of Trustees members. The second set was designed for the managers and other staff in middle management. The third set was designed for the home coordinators and support workers. However, some questions were common to all types of participants. The key topic was the meaning of the term risk as understood by participants. During exploration of this concept, the interviewees were asked to support their perspectives by giving examples about their understanding of risk. This also involved identifying main types and sources of risk

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(5) Snowball sampling is "a technique for finding research subjects. One subject gives the researcher the name of another subject, who in turn provides the name of a third, and so on. [This enables the researcher] to take advantage of the social networks of identified respondents to provide a researcher with an ever-expanding set of potential contacts" (Atkinson, R. & Flint, J., 2001, pp. 1).



from their point of view. The second topic was related to initiatives and strategies of controlling and dealing with risk. The third topic was related to how employees are prepared by the organisation to deal with risk in their jobs. This enquiry was approached differently when the interviewee was not in a managerial position. In this case the interviewees were asked to talk about how they are prepared to deal with risk. This enquiry included investigating main initiatives, training and programmes which are carried out for the staff in the organisation to increase employees' awareness and effectiveness in dealing with and controlling risk. In addition, the participants were invited to present their viewpoint regarding the existing initiatives and strategies, including training programmes. Before starting field research, three pilot interviews were carried out. The pilot interviews resulted in examining and evaluating the initial lists of questions, gave a practical training exercise of the researcher and an opportunity to assess the interaction of participants with the proposed questions. Yin (2003) notes that pilot study is a vital process before approaching the field or starting data collection.

### **3.2 Data Analysis**

The data analysis process in this study is based on the phenomenological approach <sup>(6)</sup>, in which themes that arose from analysing the data collected from the interviews were identified. Along with that, in the data analysis process, Patton (1990) outlines two strategies with which the researcher can begin: case analysis and cross-case analysis. For this study, both strategies were significant in analysing in-depth interviews, but case analysis came first, in which the responses of each set of participants were analysed. Then, the second part of analysis was carried out by using the cross case analysis approach where

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(6) The phenomenological strategy is an appropriate analytical approach for this research rather than other analytical strategies as it allows seeking and finding out the basic details about the phenomenon. Another advantage of using a phenomenological approach in analysing the collected data in this research involved enabling the researcher to use inductive reasoning process where the data are used to generate the research themes and ideas (Thorne, 2000).

the responses of all three levels of participants were compared, analysed and discussed to find out similarities and differences in viewpoints<sup>(7)</sup>.

### **3.3 Validity, Reliability and triangulation**

Triangulation refers, usually, to the use of multiple methods or sources (Balnaves and Caputi, 2001). However, many researchers expand this concept to include other aspects. Denzin as early as 1978 (cited in Hakim, 2000) and recently Yin (2003), mention that triangulation involves four types: Triangulation of data; of researcher; of theory; and of research methodology. Two types of triangulation were used in this study: data triangulation and methodological triangulation. These types of triangulation were carried out through using multiple methods and sources of collecting data; recruiting different types and levels of participants in which all functions and services were covered; and distributing a transcript of the interview to each participant for reviewing and alteration to eliminate any error or mistake, if any, during the transcribing process, to make doubly sure that the participants' responses were exactly what they intended to say and to review the answers in absence of any potential bias from the researcher.

## **4. FINDINGS AND DISCUSSION**

### **4.1 Risk Concept, Types and Sources**

The participants raised many issues regarding the concept of risk, its elements and features, and its types and sources. Through examining and comparing these perspectives, there were commonalities and many differences between the groups. In many instances, the similarities in perspectives among the participants turned out to be differences when the participants described in detail their viewpoints, but these differences

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(7) Patton defines the case analysis strategy as starting with analysing each participant's (or group) answers as a separate case study. Whereas, "beginning with cross-case analysis means grouping together answers from different people to common questions or analysing different perspectives on central issue" (Patton, 1990, p. 376). The decision of starting with case or cross-case analysis is based on the main focus of the research; whether or not the primary focus is on the participants' variations or on the event in inquiry (Patton, 1990).

never became contradictory points. As a result, the participants mentioned more than 35 different types and sources of risk, and described a number of definitions of risk. The dominant theme was the unfavourable outcome and the negative impact of risk.

The differences between the participants were more remarkable between groups than between the participants within these groups. These differences between groups, in most instances, referred to two main dimensions: the first one is vertical and related directly to professional position of each group and the second dimension is horizontal and related mainly to the particular type of functions of the participants (Samson and Daft, 2005). The second dimension referred to the type of the disability that clients have; whether the disability is mental, intellectual or physical.

Regarding the first dimension, describing sources of risk or their negative outcomes relied mainly on the location of each group in the organisational hierarchy, and thus their responsibilities and duties; what Samson and Daft (2005) called vertical differences. In this research, the scope of responsibilities and the job description of the participants played a major role in their perception regarding sources of risk and their consequences. For the participants from governance, as their responsibility covers the entire organisation, they viewed and explained types and sources of risk with connection to their impact on the organisation as a whole, its objectives and operations. Samson and Daft (2005) reported similar findings. Even for some sources of risk, such as clients hurting themselves, these participants viewed this source through its impact on the organisation's reputation rather than through its impact on clients.

For the participants from managerial levels the situation was mixed. The location of these participants in the organisational hierarchy between top management and staff in the houses<sup>(8)</sup> led them to be more familiar with top management in some instances, and to be closer to the staff level

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(8) Three types of community-based houses/services in the organisation under study are available for serving clients according to type of disability: houses for the clients with mental disability; houses for the clients with intellectual disability; and those houses for the clients with physical disability.

in some others. However, echoing the same Samson and Daft (2005) findings, the managers saw it as their responsibility for carrying out the organisation's policies and procedures and their responsibility for managing other staff in viewing and explaining most types and sources of risk. In addition, as the managers are parts of the management team, they were in harmony with the participants from governance in perceiving some types of risk as major risks that affect the organisation and its business as a whole, such as the risk of a bad reputation, legal risks and financial risks. For the participants from the staff level, their perspectives were related mainly to their responsibilities to take care of the clients and provide needed services and support. These participants, in general, relied on their daily connection, observation and interaction with the clients to explain forms and sources of risk both to and from the clients. Therefore, they were more precise in describing risk from clients or risk to clients than other issues. Indeed, these participants did not show concerns regarding the impact of different sources of risk on the organisation or its entire system and business, such as the organisation's reputation or financial status.

Regarding the other dimension about differences between the participants' groups, horizontal differences, Samson and Daft (2005) describe differences within the management team (whether at the top, departmental heads or other managerial levels) in terms of the functional task of each party. Their research findings provide an explanation regarding the differences that were found in this research between the participants from the staff level. However, for governance and top management as they are, theoretically, responsible for all departments and functions, there are no differences in their vertical and horizontal responsibilities toward the entire organisation. This could explain some situations where participants from governance and managerial levels were closer in perceiving some sources of risk. For the participants from managerial level, their responsibilities for particular functions, such as financial activities or human resources management, or for a particular type of clients/houses, such as mental houses, clarifies why for some

managers some types and sources of risk were more significant than others. For example, one of the managers declared that

*You know I don't know the clinical side of this organisation. I know my little area... My perspective may not take into account the Finance Department...*

Through this dimension, many intersections between participants from managerial and staff levels were noted. Those managers who were responsible for particular houses and those staff who worked in these houses held, in many instances, the same perspective regarding some types and sources of risk. For example, one of the participants from managerial levels mentioned that

*Because of the field that we work in within mental health and intellectual disability there is a risk there of clients perhaps injuring staff*

This matched with what a participant from the staff level, who worked with clients with mental/intellectual disabilities, said

*For staff it may be if a client becomes mentally unwell and paranoid perhaps and lashes out at you physically...*

In general, these differences and diversity in perspectives between the participants regarding risk and its types and sources confirmed the fundamental feature of risk, which is perception. Researchers, such as Dickson *et al.* (2004); Helliard *et al.* (2001); Adams (2004); Aries (2004); Sjoborg (2000); Funch (1995); Shrader-Frechette (1990); and Williams *et al.* (2003), and even those who claim that risk could be objective or subjective, such as Watson (1981), acknowledge the role of perception in risk, whether this perception is due to personal experience and attitude, professional position, academic background, context or all these variables together. Another factor that affected the participants' perception regarding the degree of risk was degree of uncertainty. Some sources of risk were viewed riskier than others because they involved a high degree of unpredictability; an example of this the risk from the clients with mental and intellectual disabilities toward staff. Vaughan and Vaughan (1999, pp. 4, 5) highlight this issue and state that "it is

intuitively obvious that there are some situations in which the risk is greater than in other situations. It would seem that the most commonly accepted meaning of degree of risk is related to the likelihood of occurrence".

## **4.2 Risk Management**

### **4.2.1 Responsibility and Accountability**

Regarding the responsibility of managing risk, the participants from governance and managerial levels agreed that all staff in the organisation should be responsible for managing risk. According to a managerial level participant, it is a part of everyone's responsibility and function to minimise risk:

*I think everybody places a part in risk management because it is not a one-person thing. I think in an organization it takes the whole organization to be aware what risks there [are]... I don't think one person alone can manage that.*

Neef (2005) supports this trend and emphasizes the role of all employees in the risk management process, as managing risk depends mainly on every person's knowledge and awareness. Tchankova (2002) adds that as risk covers all features of organizational activities, thus it is a part of any work or duty, then it is everybody's responsibility. However, the participants showed different viewpoints when they distinguished between the common responsibility of risk among all staff, as a component of their duties, and the responsibility for the entire risk management process. According to some participants, the CEO is the main person responsible for this process, whereas other participants from both groups deemed that this responsibility should be carried by the managers as a part of their responsibilities. In this regard, some participants deemed that the responsibility for managing risk depended on the type of risk. Each type of risk is managed by particular persons or level of staff.

In addition, some participants believed that the responsibility of managing risk should start from the staff in the houses, whereas, for other

participants this responsibility of managing risk should start from the board and top management levels. On the other hand, one of the participants from the governance contrasted with the previous two perspectives and deemed that there should be a particular person whose core responsibility is to oversee the risk management process. This position would be unavoidable, especially in the future, as the organisation is subject to continuous growth and expansion.

In terms of the accountability the situation was slightly different. None of the participants from governance and managerial levels believed that the accountability for managing risk is common among all staff. Indeed, the participants identified that accountability was held only whether by the CEO or the CEO and the managers. As an example, one of the managers stated that

*The CEO ultimately is accountable [for managing risk], but each manager manages their own risk and those are identified...Each manager is actually responsible or accountable for their own risks that they manage.*

#### **4.2.2 Initiatives for minimising risk: Specific initiatives for particular types of risk**

For the first set of initiatives and strategies, the participants linked their descriptions of potential sources and types of risk and methods for controlling or eliminating these specific types and sources. In general, most participants from all groups, especially from governance and managerial levels, mentioned some strategies through their describing sources and types of risk. For example, for controlling unexpected expenses, one of the managers who viewed unforeseen circumstances as a main source of this financial risk, this participant deemed that insurance could reduce losses and control extra expenses. This participant proposed: “*we have insurance too so any disasters, whether they are natural disasters or malicious damage anything like that, yeah it probably covers most of it*”. The diversity of these initiatives and strategies was a consequence of the diversity in the participants’ perspectives regarding these types and sources and fitted with the varied

sources and types of risk that were described by the participants (See Box 2). This multiplicity in perspectives regarding measures for managing risk reflected the individualistic aspect of perception in dealing with risk. Ansell and Wharton (1992) highlight this issue when they note that “individuals, organizations and governments make decisions based on perceptions ...” (p. 5). In addition, Adams (1995) highlights the relationship between risk, managing risk and perception and explains this correlation as follows:

Risk is defined...as the product of the probability and utility of some future event. The future is uncertain and inescapably subjective; it does not exist except in the minds of people attempting to anticipate it. Our predictions are formed by projecting past experience into the future. Our behaviour is guided by our anticipations. If we anticipate harm, we take avoiding action. (p. 30)

For many initiatives described by the participants as mechanisms for managing risk, there are researchers who have similar opinions. For example, some participants described respecting employees’ contracts as a mechanism for dealing with staff-related risk and to minimise the potentiality of legal risk. Cheatle (2001) supports this perspective and mentions that the employment contract is the key document that organised the relationship between employers and employees. Meeting conditions of the contract by the employer avoids the organisation any legal liability.

However, two participants from the staff level believed that there is no particular technique for controlling risk. This, as they mentioned, could be determined according to personal experience in dealing with the situation. Williams, *et al.* (2003) support this viewpoint and highlight the role of personal experience in dealing with risk. This supports the findings of this study regarding the idiosyncratic aspect of risk, as experience is an individualistic issue that differs from one person to another.



#### 4.2.3 Initiatives for Minimising Risk: General initiatives and strategies

Regarding the second set of methods for dealing with and controlling risk, the participants described five initiatives and strategies: meetings; committees; incident reports; pre-setting plan and policies for dealing with risk; and training. The participant groups were in agreement regarding these initiatives and their roles and contributions in minimising risk. However, there was no consensus as to which initiatives were better.

**Meetings:** all participants were in harmony that a meeting is an effective approach for managing risk in which information, incidents, and opinions could be discussed and exchanged. Many researchers, such as Smith (2001) and Carrell, *et al.* (2000) emphasise the importance of meetings in solving problems through improving communication and exchanging information and experiences regarding issues such as risk and managing risk. However, the participants from managerial levels were more precise in describing this initiative than the participants from other levels due to their direct responsibility for following-up with their subordinates. Smith (2001) and Bach (2005) point to this issue when they comment that part of the managers' responsibility is to follow-up through regular meetings. Harris (2000) supports this viewpoint and points to the importance of meetings in providing a two-way communication channel between staff and managers especially in reviewing incident reports. Unlike the managers, the governance participants did not focus much on this issue due to governance's main function being drawing policies rather than interfering with daily management functions. This is reflected in the work of Wheelen and Hunger (2004).

**Incident reports:** incident reports were viewed by all participants as a method to control risk, but the participants from the staff level went further and emphasised this initiative. According to a staff level participant:

*We have an incident reporting system where we have to fill in detail on one of our forms about any incident or perceived risk and so yes that*

*gets discussed by everyone and we get feed back from that from our team leaders.*

Robbins, *et al.* (2006) explain that the staff level participants focused on incident reports as the main mechanism of managing risk because the upward communication from staff to their managers relies, in general, on reports, therefore, reports represented their main communication approach with their managers in reporting risky situations.

**Committees:** this approach for managing risk was frequently mentioned by the participants from governance and managerial levels, who described many committees that were existing in their organisation, such as Infection Prevention Committee and Health and Safety Committee:

*... We have infection prevention and control committees, we have health and safety committees, we have restraint minimize and safe practice... We have ethic committees, we have committees for everything and that is all part of how we manage our risk.*

The findings from Carrell, *et al.* (2000) agree with this finding stressing the significant role of committees in information exchange and understanding and discussing issues.

**Risk management plan, policies and procedures:** Pre-setting plans and policies for dealing with risk were viewed by many participants from all levels as a mechanism for dealing with risk. This involved the Hazard Identification Form, Risk Register Form and Risk Management Worksheet<sup>(9)</sup>. The importance of pre-setting plans and procedures in managing risk was also reported by Conrow (2003) who states that “risk

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(9) Regarding risk assessment in the organisation under study, within the Risk Management Worksheet a particular risk is analysed based on two variables: the consequence of the risk and the likelihood to occur. Each variable was given a numerical value (from 1-5) and then by multiplying these two values the risk was assessed, whether it is extreme, high, moderate or low. Then, the decision to report this risk to the board, managers or staff and the needed course of action would be determined. Those risks which scored 20 or above out of 25 would be reported to the top management.

management should be implemented as a structured process whereby planning occurs and risks are systemically assessed...” (p. 70).

#### 4.2.4 Training for managing risk

The significant role of training in improving employees’ awareness and performance, and thus in minimising risk was mentioned by all participants. The participants reported that training was present in their organisation as a major strategy of the management to control risk, and described diverse types and forms of training. The participants mentioned the following benefits and advantages of training in terms of managing risk: training provided an opportunity for education and the exchange of information; training could minimise the legal liability of the organisation; training improves the awareness of staff and their performance; and training improves practice and performance.

The relationship between training and managing risk is highlighted by many researchers, such as Conrow (2003), Cooper (1995) and Walker (1992), who emphasise the role of training in leading the behaviour and attitude of employees and improving their awareness and performance. This is especially important in the risk management process where perception is a cornerstone. However, despite the presence and advantages of training as a strategy for controlling risk, all participants declared that no training was labelled as risk management training, although any training aims to minimise risk. One of the participants from governance explained that as follows:

*It is what you call it isn’t specifically risk management but the outcome is managing risk both for the clients and the staff. If I said to someone working in a house “you need to come to a risk management course”, they think why, but if I said you need to do a course on managing challenging behaviour, they think yes because I am dealing with all clients with challenging behaviour...It is intended to managing the risk of having a client with a challenging behaviour, but it isn’t specifically called Risk Management.*

## **5. CONCLUSIONS**

In conclusion, the findings of this study highlighted that:

- Risk is subjective and individualistic and people deal with risk according to their perception. If they did not perceive a particular risk, they would not recognise it, and then they would not have awareness to control it. Lack of awareness of surrounding risk is, by itself, a big risk.
- Risk is culturally constructed. The common culture among the participants was risk-fear culture as all of them, except one, viewed risk as something negative that does not involve opportunities. Perceiving risk as something purely negative prompted avoiding risk without considering the opportunities. Perceiving risk in this one-way-direction is a potential risk that leads to lessen benefits to the organisation. This perception of risk could create another source of risk; that is the risk of perception of risk.
- Understanding the context of work and other components of perception are essential to understand how employees perceive risk and their perspectives regarding types and sources of risk, in addition to their viewpoints about methods of controlling risk.
- The risk management process should initially focus on the human element as a cornerstone of an effective minimisation of risk. Training plays a significant role and involves remarkable benefits in improving the awareness, skills and attitude of employees toward risk. However, for an effective training the following issues should be considered: financial support from funders to carry out training; maintaining a system for training needs analysis; training programmes that are tailored to fit with the business nature of each department, level or service; particular training for managing risk that is labelled so as to direct more attention to the particular aim of training; recruiting qualified and well-skilled trainers and a proper training environment; assessing the outcome of training on a regular

basis to identify any gaps or shortcomings in training; and training should be a continuous process that is updated on a regular basis.

Therefore, any effective risk management process should be human-centred rather than system-centred. Attitude, knowledge and context of lay persons, thus their perception and culture, are the cornerstone in any process for identifying and controlling of risk. Training, among other initiatives, is significant and plays a major role in improving the awareness of employees in dealing with and controlling risk. This involves reinforcing people perception and viewpoint toward risk as something that could involve opportunities, not only harm. This is essential to minimise the risk from improper and exaggeration perception of risk. In addition, particular training programmes for managing risk, particular training tailored for specific types and sources of risk, specific training for specific groups/houses, all are essential for successful consequences of training.

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**BOX 1: Semi-Structured Interview Guidelines**

**Semi-Structured Interview Guidelines (Governance and Top Management):**

- What do you understand by the term “risk”? Give me an example of risk in your area?
- What would you say other main risks in the organization?
- How do you manage risk in this organization? What do you do to minimize risk?
- Who is responsible for managing risk in your organization?
- What are mechanisms (programs) in your organization to minimize risk?
- How well are employees prepared to minimize risk?
- Are there any training programs concerning managing risk and improving the health staff awareness and skills in dealing with the risks in their job?
- If there is no existing training concerning managing risk in the organization, what are the other techniques and programs?

**Semi-Structured Interview Guidelines (Managerial Levels)**

- What do you understand by the term “risk”? Give me an example of risk in your area?
- What would you say other main risks in the organization?
- Who is responsible for managing risk in your organization?
- What do you do to minimize risk?
- What are mechanisms (programs) in your organization to minimize risk?
- How well are employees prepared to minimize risk?
- Are there any training programs concerning managing risk and improving the health staff awareness and skills in dealing with the risks in their job?
- If there is no existing training concerning managing risk in the organization, what are the other techniques and programs?

**Semi-Structured Interview Guidelines (Staff Level)**

- What do you understand by the term “risk”? Give me an example of risk in your area?
- What would you say other main risks in the organization?
- How well are you prepared to manage risk effectively?
- Do you report incidents that may lead to risky situations?
- Are there any training programs concerning managing risk, and who do this?
- Have you attended any training for managing risk?
- If there is no existing training concerning managing risk in the organization, what are the other techniques and programs that are used to fill this gap?

**BOX 2: Specific initiatives for Particular types/ sources of risk (from the participants' viewpoint)**

<b>Types/Sources of risk</b>	<b>Initiatives/Strategies</b>
<b>Financial Risks</b>	Maintain good relations with funders to keep contracts
	Having a reserve in the bank
	Through insurance
	Educating staff to Control overspending
	Keep services in high quality
	Good financial management system
	Through expansion
	Effective information and software system
<b>Clinical Risks</b>	
	Controlling risk of wrong medication through workshops to staff
	Through the professional certification and registration
	Recruiting qualified clinicians
	Minimise and control infection's impacts and spread
<b>Legal risks</b>	
	Commitment with conditions of staff's contracts
	Informing staff regarding their rights
	Considering and fulfilling with employment law
	Reviewing the legal position of new clients before moving to the organisation
<b>Risks of Public Perception and Bad Reputation</b>	
	Negotiate with surrounding community
	One spokesperson to media
	Recruiting good staff

<b>Client-Related Risks</b>	
	Providing them well- supported and qualified staff
	Access to professionals (i.e., registered nurses)
	Close monitoring to the clients
	Opening files to each client
	Risk registration
	Educating the clients
	Safety procedures to avoid unexpected behaviour of the client
	Support plan for each client
<b>Staff-Relate Risks</b>	
	Support from the unions
	Effective appraisal system
	Effective recruitment process
	Maintaining a job security environment for staff
	Contingency plan for handling employees' strike and dealing with the unions
	Minimising stress from work
	Providing healthy and safety workplace
	Hazard ID
	Documenting any incident with the clients or other staff
	Relying on personal experience
<b>Management-Related Risks</b>	
	Effective reporting systems
	Proper information and information flow to the Board of Trustees
	Ensure that staff follow policies regarding minimising risk
	Risk management format
	Open door policy

	Emerging Quality Council
	Robust policies and procedures
	Proactive not reactive
	Benchmarking
	External auditing of policies
	Balanced Board of Trustees
	Following policies and standards
<b>Environment-Related Risks</b>	Continuous checking environment's hazards
	Managing external-environment risks
	Safety procedures
	Communicating with community