Perspective Changes and Risk Management

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The Army's Risk Management Process is based on widely accepted principles of risk identification, evaluation, and control.[1] The impact risks have on the business we conduct has the potential of manifesting itself in the most severe forms. While other organizations mainly use this process to gauge and evaluate the financial impact of their business decisions, the Army uses the process to help measure the loss in ability to perform its core capabilities by identifying the probability and severity of adverse consequences. Although the tool is explained in Army Techniques Publication (ATP) 5-19, *Risk Management*, the doctrinal explanation does not adequately emphasize that the personal perspectives individuals have towards risk identification are just as vital as executing the process correctly.

This is not a summary explanation of risk management (RM), an article on how to use RM, or an article to emphasize the importance of RM. Its value is proven and its acceptance a validation of its effectiveness. RM facilitates safety in the Army; however, the term "safety" is not clearly defined. "Safety" is a generic term in our organizational culture that implies a nebulous state where individuals are behaving in an acceptable way where the end state is an environment where no one is hurt and property undamaged. Following this logic, RM is the process in which our training or operations will be void of personal injury or property damage. This is incorrect.

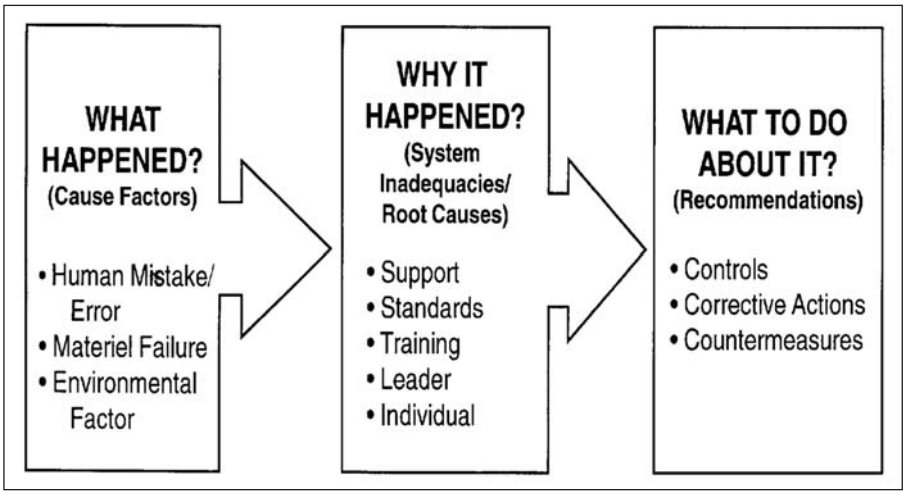
To accept this truth as an organization, the Army must first evaluate its perspective on the link between RM and the implementation of safety regulations. The purpose of this article is to raise the enterprise-level awareness of three fundamental practices that enhance the positive effects of properly executed RM at any level in the Army.

1. Stop saying the following phrase: "*Safety saves lives!*" "Safety" doesn't save lives, YOU do! The implementation of procedures and regulations to follow Army standards significantly reduces the probability of a severe accident occurring. "Safety" used in this context is nebulous and its message is the opposite of clear and concise communication. Stating "safety saves lives" is akin to stating "Infantry saves lives!" or "Human Resources saves lives!" This catch phrase implies the key to abating severe personal injury or property damage is not a methodical and disciplined approach to mitigate loss. In practicum, the safety field is more than one set of regulations applied to a wide spectrum of support and operations within the Army's mission. These requirements are incorporated into the design of equipment, doctrinal concepts, technical bulletins, technical manuals, and Soldier/employee training. Variances in these specified standards or expectations need to be cyclically and continuously sought. In one other word: proactivity.

2. Let's agree on the definition of "proactive." Merriam-Webster defines proactive as "controlling a situation by making things happen or by preparing for possible future problems."[2] This is in contrast to reactive, which is defined as the doing "in response to a problem or situation" or "reacting to problems when they occur instead doing something to prevent them."[3] In context to RM and the Army Safety Program, proactive is the search for deviations to specified and expected outcomes. Reactive is everything that is done after a deviation (the consequences of which are manifested as personal injury or property damage and their follow-on affects). When deviations occur, the root cause must be identified and resolved in order to not incur the same loss. *Why* a deviation happens is vital in reducing the *what*.

3. Emphasize the *WHY* over the *WHAT*. Available Army accident information is organized into different categories that range in classification and impact to readiness. Every command has a slightly different focus on what it tracks, but it is mainly the same technique. The loss that is experienced is given a definition and grouped together with other losses of the same type; the focus is in trying to make sense of

Figure 1 — "3W" Approach to Information Collection, Analysis, and Recommendations



DA Pam 385-40, *Army Accident Investigations and Reporting*

what is happening in order to identity one or more negative trends so actions can be taken to mitigate them. This is not an analysis of what is happening; it is organizing information into manageable segments. Analysis is defined as "a careful study of something to learn about its parts, what they do, and how they are related to each other."[4] Organizing is to arrange things so that they can be found or referenced quickly or to put things into a particular arrangement or order.[5] Identify the *WHY* of accident trends comes from identifying the root causes and not simply tracking *WHAT* accidents are happening. You cannot improve the *WHAT* without knowing *WHY* it exists. DA Pamphlet 385-40, *Army Accident Investigations and Reporting*, provides the "3W" approach to information collection, analysis, and recommendations (see Figure 1).[6]

The *WHY* has five focus areas: **Support** (shortcomings in type, capability, amount or condition of equipment/supplies/services/facilities), **Standards/Procedures** (not clear/not practical), **Training** (insufficient in content/amount), **Leader** (not ready, willing, or able to enforce the standard), and **Individual** (mistake due to own personal factors).[7] Accident information cannot be properly analyzed without identifying the relationships of occurrences to these five factors. A connection must be established between the accident (the *WHAT*) and its root causes (the *WHY*) because you cannot keep it from happening again if you do not know how the series of events that led to it are related.

Why are these three points vital to gaining the proper perspective that will allow an organization to effectively implement RM? Because the truths they represent are universal and can be applied to any operation or specialty, and the process is not exclusive to the safety realm. Place in a different context: If your organization begins to experience pay problems and your human resources personnel kept offering solutions to the *WHAT* without a methodical analysis of the *WHY*, how effective would their solutions be?

Having a clear understanding of regulations and how they can be proactively applied to the Army's mission and operations (regardless of specialty) through cyclical and continuous efforts reduces the probability and severity of a deviation from an expected outcome. Being clear on why deviations happen is more important than what happened in order to prevent continuous occurrences. Most importantly, personal decision making, informed by proper training and education, is the first and most effective risk mitigation measure.

Notes

[1] ATP 5-19, *Risk Management* (Washington, D.C.: Headquarters, Department of the Army, 2014)

[2] Merriam-Webster.com, accessed 5 July 2014, www.merriam-webster.com/dictionary.

[3] Ibid.

[4] Ibid.

[5] Ibid.

[6] DA PAM 385-40, *Army Accident Investigations and Reporting* (Washington, D.C.: Department of the Army, 2009).

[7] Ibid.

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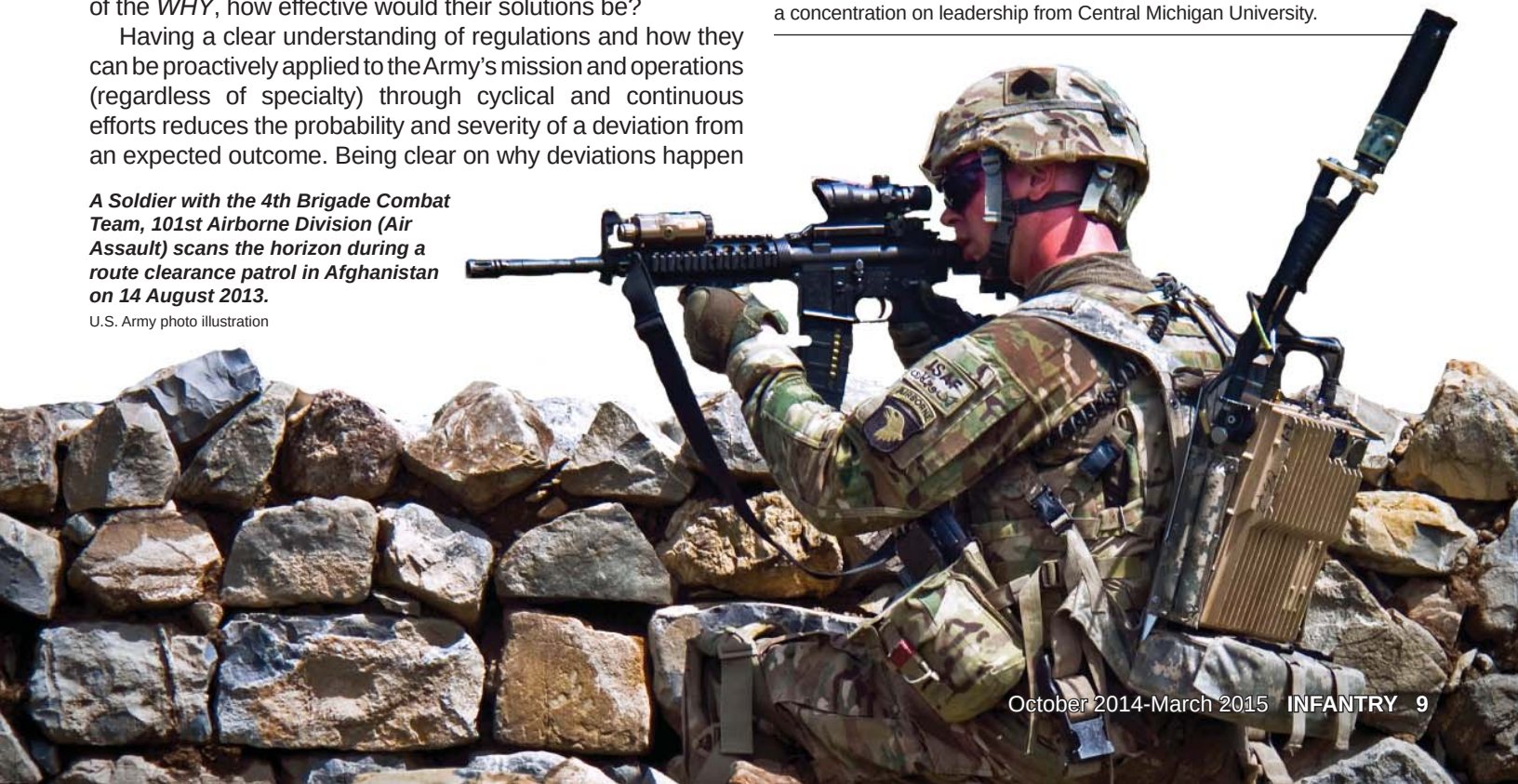

A Soldier with the 4th Brigade Combat Team, 101st Airborne Division (Air Assault) scans the horizon during a route clearance patrol in Afghanistan on 14 August 2013.

U.S. Army photo illustration