

# Kirklees Multi-Agency Risk Assessment Conference (MARAC)

## Information Sharing Protocol and Operating Protocol

February 2014



**Kirklees Multi-Agency Risk Assessment Conference is a multi-agency partnership of the following:**

- **Calderdale and Huddersfield NHS Foundation Trust**
- **Connect Housing**
- **Kirklees Metropolitan Council – Anti-Social Behaviour Partnership, Duty and Assessment Service (Children’s Services), Integrated Domestic Abuse Team, Housing Solutions, Pupil Attendance and Support, Safeguarding Adults and Support for Women and Antenatal Service**
- **Lifeline Kirklees**
- **Locala Community Partnership**
- **The Mid Yorkshire Hospitals NHS Trust**
- **On TRAK**
- **Pennine Domestic Violence Group**
- **South West Yorkshire Partnership NHS Foundation Trust**
- **West Yorkshire Police**
- **West Yorkshire Probation**
- **WomenCentre Calderdale and Kirklees**
- **Victim Support**

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# Section One: General Introduction

## 1. Multi-Agency Risk Assessment Conferences (MARAC)

- 1.1. The Multi-Agency Risk Assessment Conference (MARAC) is a regular meeting where local agencies share information about high risk domestic abuse victims and work together to develop a risk focused, co-ordinated safety plan to support the victim and/or their children.
- 1.2. **MARAC does not replace professional responsibility to take action to improve victim safety.** Agencies have a responsibility to take steps to protect victims of domestic abuse and/or their children, and should not wait for the MARAC to take action to prevent further abuse.
- 1.3. The MARAC provides an opportunity to facilitate, monitor and evaluate effective information sharing between agencies to ensure that appropriate actions are being taken to reduce the risk of further violence.
- 1.4. The purpose of a MARAC is to:
  - share information about current risks to victims and work that has been undertaken to increase their safety;
  - develop an action plan to address any unmet risks to the safety of victims and/or their children;
  - share information about perpetrators of domestic abuse;
  - improve support for staff who are involved in high risk cases;
  - reduce repeat victimisation; and
  - improve partnership working by facilitating information sharing and overseeing the joint implementation of risk management plans to reduce risk of harm.
- 1.5. The MARAC is part of a broader commitment to reducing domestic abuse in Kirklees. Our vision is that in Kirklees, no one has to live in fear of domestic abuse.

## 2. Status of this Document

- 2.1. This document contains two interlinked protocols:
  - The Multi- Agency Risk Assessment (MARAC) Information Sharing Protocol, which governs the exchange of information for the purposes of the MARAC; and
  - The Multi- Agency Risk Assessment (MARAC) Operating Protocol, which outlines how the MARAC will enhance existing local arrangements to support high risk victims of domestic abuse.
- 2.2. These Protocols are binding agreements between local agencies. All signatories agree to abide by the terms of each protocol. Any issues with compliance will be resolved by the MARAC Strategy Group through the appropriate provisions within this protocol.
- 2.3. The protocol may be amended with the agreement of the MARAC Strategy Group.
- 2.4. This Protocol is to be formally reviewed in 2017.

### 3. Signatories to this Protocol

- 3.1. The following agency representatives have the authority to speak on behalf of their agency and acknowledge that they have read, understood and agree to the terms of the Multi-Agency Risk Assessment (MARAC) Operating Protocol and Information Sharing Protocol:

Job Title	Agency
Domestic Abuse Specialist Midwife	Calderdale and Huddersfield NHS Foundation Trust
Service Manager for Homeless Families and Domestic Violence Services	Connect Housing
Partnership Manager	Kirklees Metropolitan Council – Anti-Social Behaviour Partnership
Unit Manager	Kirklees Metropolitan Council – Duty and Assessment Service (Children’s Services)
Team Manager	Kirklees Metropolitan Council – Integrated Domestic Abuse Team
Team Manager (Advice and Assessment)	Kirklees Metropolitan Council – Housing Options
Deputy Manager	Kirklees Metropolitan Council – Pupil Attendance and Support
Pathway and Portfolio Manager - Safeguarding	Kirklees Metropolitan Council – Safeguarding Adults
Pathway and Portfolio Manager - Safeguarding	Kirklees Metropolitan Council – Support for Women and Antenatal Service
Service Manager	Lifeline Kirklees
Named Nurse for Safeguarding Children	Locala Community Partnership
Named Midwife for Safeguarding Children and Domestic Abuse Lead	The Mid Yorkshire Hospitals NHS Trust
Service Manager	On TRAK
Director	Pennine Domestic Violence Group
Named Nurse for Safeguarding Children	South West Yorkshire Partnership NHS Foundation Trust
Kirklees Safeguarding Inspector	West Yorkshire Police
Probation Officer	West Yorkshire Probation
Chief Executive	WomenCentre Calderdale and Kirklees
Senior Service Delivery Manager	Victim Support

- 3.2. Agencies that are not signatories to these Protocols may also refer cases to MARAC. In referring a case to MARAC, these agencies agree to abide by the terms of each Protocol.

## 4. Withdrawal

- 4.1. Signatories may choose to withdraw their endorsement of these protocols. An appropriate representative of the agency that wishes to withdraw is to advise the Chair of the MARAC Strategy Group of their intention to withdraw and why this is considered necessary.
- 4.2. The Chair will advise the next meeting of the MARAC Strategy Group of the agency's intention to withdraw from the Protocols. The agency will then be removed from all correspondence regarding the MARAC.
- 4.3. The withdrawing agency will destroy or return all data relating to the MARAC. Withdrawing agencies must continue to comply with the terms of each Protocol in respect of any data that the partner has obtained through being a signatory.

## 5. Complaints and Breaches

### Complaints

- 5.1. Complaints regarding the MARAC process should be referred to the relevant agency's Designated Officer.
- 5.2. The complaint will be dealt with by the relevant agency, utilising their internal complaint procedure.
- 5.3. Individuals do retain the right to raise a complaint with such bodies as the Information Commissioner or the statutory Ombudsman.

### Breaches

- 5.4. All agencies retain responsibility for any breach of these protocols by any member of their staff.
- 5.5. Steps to control breaches of these Protocols are to be undertaken in line with individual agency procedures. The MARAC Strategy Group is to be advised of all breaches of security and steps that have been taken by the agency to redress these.

## Section Two: MARAC Information Sharing Protocol

### 1. Introduction

- 1.1. The MARAC is a multi-agency meeting where **information is shared** between different agencies to develop a safety plan for the highest risk cases of domestic abuse.
- 1.2. This protocol does not replace any other information sharing arrangement between agencies in Kirklees. It is intended to clarify the arrangements for sharing information for the purposes of the MARAC.

### 2. Purpose of Information Sharing

- 2.1. The information that is shared between agencies at a MARAC meeting is used to construct safety plans for adults and children at risk of serious harm through domestic abuse. It may also be used to address risks faced by professionals and/or to improve public safety.

### 3. Principles for Information Sharing

- 3.1. Information sharing for the purposes of the MARAC complies with key legislation relating to crime and disorder, the protection of private data, the common law duty of confidence and human rights.
- 3.2. Personal information, which is information that could be used to identify a living person, may be shared to reduce the risk of serious harm from domestic abuse. Specifically, information may be shared to increase the safety of all victims of domestic abuse, including children; enable the protection of vulnerable people; and reduce crime and disorder locally.
- 3.3. Any disclosure of personal information should be proportionate to the risks faced. Professionals should aim to strike a fair balance between the protection of an individual's rights and the general interests of society.
- 3.4. The decision to share information should be properly documented at the time of disclosure, identifying the reasons why the disclosures are being made (i.e. what risk is believed to exist), what information will be disclosed and what restrictions on use of the disclosed information will be placed on its recipients
- 3.5. The party receiving the data should not use it for any purpose other than that set out in this Protocol, nor share it with any other party, without the disclosing partner's written permission and, if appropriate, the consent of the client.
- 3.6. It is the responsibility of each signatory agency to ensure that staff members comply with all relevant legislation, internal policies on disclosure and retaining of information and, where appropriate, relevant professional codes of conduct. Agencies are encouraged to seek their own legal advice wherever necessary.
- 3.7. Signatory agencies will ensure that information will be stored securely in accordance with the Data Protection Act. This data will be destroyed when no longer required for the purpose it was provided.



## 4. Information that may be Disclosed

- 4.1. Signatory agencies will need to make an informed judgement on a case-by case basis about information that should be disclosed through the MARAC process. This information may relate to victims, (alleged) perpetrators, children in the household or otherwise affected by the domestic abuse, and others that may be at risk of harm. Where relevant, the MARAC may also consider information about the perpetrator's family or other relationships.
- 4.2. The information shared by agencies may include:
  - name, date of birth, address(es), aliases and gender;
  - information about court orders, injunctions, bail conditions and other legal issues;
  - current information relating to recent contact, meetings, sightings, phone calls, which may include attendance or non-attendance at appointments, at A&E or in other health settings, and/or who is present during home visits and appointments;
  - relevant historic information regarding previous convictions, family or relationships history, other safety options considered or substance misuse issues;
  - other information relating to the risks facing the victim or other affected individuals.
- 4.3. Different levels of disclosure may be appropriate for different individuals in different circumstances. In all cases disclosure must be relevant and proportionate to the risks faced.
- 4.4. If professionals are in any doubt as to whether a decision to disclose is appropriate, advice should be sought from their agency representative on the MARAC Strategy Group and/or an appropriate senior representative within the organisation.

## 5. Consent

- 5.1. It is considered to be good practice to obtain consent from the victims prior to discussing the case at MARAC. As such, where appropriate and possible, explicit consent should be obtained and consent to share information should be recorded on clients records.
- 5.2. However, there may be circumstances where victims choose not to provide consent.
- 5.3. Furthermore, it may be inappropriate to attempt to seek consent if doing so:
  - would place a person, the individual, family member, and the worker or a third party at increased risk of significant harm if a child or serious harm if an adult;
  - may prejudice the prevention, detection or prosecution of a serious crime; and/or
  - leads to an unjustified delay in making enquires about allegations of significant harm to a child or serious harm to an adult.
- 5.4. If consent is not obtained, the victim's information should still be discussed at a MARAC. A decision as to whether to disclose information should not be based upon whether or not consent has been obtained. The decision to disclose information should conform with the principles set out above.

## 6. Information Sharing with Victims and Perpetrators

- 6.1. The victim should be informed of the outcome of the MARAC meeting unless it is considered unsafe to do so. The IDVA (MARAC) would normally undertake this task. In the absence of the IDVA, another agency representative will be nominated to provide feedback to the victim.
- 6.2. The perpetrator should NOT be informed about the MARAC meeting or its outcome. Agencies should take precautions to ensure that, as far as possible, the perpetrator is not made aware of the MARAC or subsequent safety plan. Participants should take extraordinary care not to inform the perpetrator of any element of the safety plan inadvertently (i.e. through a third party).

## 7. Legal Grounds for Sharing Information with the MARAC Framework

- 7.1. This Protocol operates in accordance with relevant legislation to: increase the safety of all victims of domestic abuse, including children; enable the protection of vulnerable people; and reduce crime and disorder locally.
- 7.2. Information sharing for the purposes of the MARAC complies with key legislation relating to the Crime and Disorder Act, the protection of private data, common law duty of confidence and the Human Rights Act.
- 7.3. The **Crime and Disorder Act** 1998 permits any person to disclose information to a relevant authority where the disclosure is necessary to address crime and disorder issues.
- 7.4. Under the prevention of crime exemption of the **Data Protection Act**, disclosures may be made to members of the MARAC if considered necessary to prevent a crime against a named individual or specified household. The risk of crime must be a genuine or likely risk.
- 7.5. In line with the **common law duty of confidence** – an obligation of confidence will exist where an individual has provided information to another in circumstances where it is reasonable to assume that the provider of the information expected it to be kept confidential. Where there is a clear duty of confidence the information can only be disclosed to “third parties” if there is informed consent, compulsion of law or public interest.
- 7.6. Under the **Human Rights Act** – disclosures between signatories to MARAC will comply with the HRA if it:
  - is made for the purposes of preventing crime, protecting the health and/or safety of alleged victims and/or the rights and freedoms of those who are victims of domestic violence and/or their children;
  - is necessary for the purposes referred to above and is no more extensive in scope than is necessary for those purposes; and
  - complies with all relevant provisions of law, including the DPA and the Caldicott Guidelines.
- 7.7. Under the **Caldicott Guidelines**, where an individual has not consented to the use of their information, that individual’s wishes should be respected unless there are exceptional circumstances, such as where there is a serious public health risk or risk of harm to the patient or other individuals, or for the prevention, detection or prosecution of serious crime. The Caldicott Guidelines are not law and, if there is an apparent conflict between legislation and the common law, legislation takes precedence.

## 8. Storage of information

- 8.1. Signatories to this Protocol are to ensure that they have adequate security arrangements in place to receive, store and send MARAC information securely.
- 8.2. MARAC information should only be distributed to individuals within the agency that either attend the MARAC or conduct research on MARAC cases on behalf of the agency.
- 8.3. Personal information that is shared for the purposes of MARAC must be:
  - e-mailed via secure government approved links;
  - stored in secure, password protected systems that can only be accessed by approved persons;
  - stored in a secure filing cabinet when not in use (for paper files);
  - accessed only by relevant staff in appropriate settings.
- 8.4. Each agency that attends a MARAC meeting can hold relevant information for as long as a risk to the victim or children remains. The information retained should be proportionate to the perceived risk.
- 8.5. It would be good practice for each agency attending a MARAC meeting to review its own initial recording of a case after six or twelve months and decide whether it was still relevant for it to retain all or some of the information that was initially recorded.
- 8.6. All MARAC related data that is held by agencies should be kept for no longer than is strictly necessary. Data should be destroyed in line with agencies' retention procedures.

## 9. Data Access Requests

- 9.1. The MARAC is not a legal entity and therefore the owner of information shared at a MARAC is the original supplying agency.
- 9.2. Any request for information recorded at the MARAC may only be shared with the consent of all agencies that supplied information to that MARAC. Individual agencies are expected to have and comply with their own data access procedures, and would be encouraged to seek their own legal advice prior to sharing any information.

### Disclosure to Individuals through the Data Protection Act

- 9.3. Section 7 of the Data Protection Act gives individuals the statutory right, subject to some exemptions, to see information which organisations hold about them. Individual agencies are expected to have and comply with their own data access procedures.
- 9.4. Given that the MARAC is not a legal entity and that the owner of information shared at a MARAC is the original supplying agency, any request for information will be directed to the most appropriate agency in the first instance. Individual agencies would then need to seek their own legal advice prior to sharing any information.
- 9.5. Data access requests pertaining directly to MARAC should be made in writing to the MARAC chair:

Inspector Wiseman  
 Kirklees Adult Safeguarding Unit  
 Dewsbury Police Station  
 Aldams Road, Dewsbury, WF12 8AR

## Disclosure into Family Court Proceedings

- 9.6. The Family Justice Council and CAADA have produced guidance regarding MARACs and disclosure into Family Court Proceedings. Three key principles underpin this guidance -
- A MARAC is not a legal entity and therefore the owner of information shared at a MARAC is the original supplying agency;
  - MARACs should only be required to disclose information by an order of the court;
  - Any request for information must be an informed request setting out the nature of the information sought i.e. there must be no 'fishing expedition'.
- 9.7. The question of disclosure should be considered well in advance of a contested hearing and be dealt with by an order for directions. Notice should be given to the Chair of the MARAC; if that is not practicable, the order should allow a MARAC representative to appear and object before compliance is required.
- 9.8. When any such order for disclosure is made and served on a MARAC, the Chair is under a duty to raise formal objection if disclosure will interfere significantly with a safety plan or may cause harm to any relevant child. If, however, a decision is made not to make a formal objection -
- The MARAC Chair should identify the documents currently held (which in practice will usually only be the minutes);
  - If the minutes refer to information supplied and held by another organisation, the court should be invited to make an order directed to that organisation (if necessary) unless the Chair has that organisation's consent to disclose;
  - If any document ordered to be disclosed is believed by the Chair to be potentially unreliable (e.g. the minutes), the court should be so informed;
  - If a MARAC is in doubt whether to disclose they may make disclosure to the court setting out their concerns and reservations (e.g. any potential impact on safety) but, in so doing, they accept that the court may nevertheless order disclosure;
  - The MARAC Chair may also draw to the attention of the court, the parties or the relevant organisation (as the case may be) that the significance of any information held depends upon other information held by a participating organisation and identify that organisation.
- 9.9. MARAC workers and IDVAs (as opposed to professional representatives of organisations attending a MARAC) should not ordinarily be called as a witness in court proceedings.

## Section Three: MARAC Operational Protocol

The MARAC in Kirklees aims to operate in line with the ten principles for an effective MARAC, identified by Coordinated Action Against Domestic Abuse (CAADA):

1	Identification	All agencies identify high risk victims of domestic abuse through a risk assessment and/or referral to a specialist agency
2	Referral to the MARAC	All high risk victims who meet MARAC referral criteria are referred to the MARAC by a range of agencies within safe timeframes.
3	Multi-agency engagement	All relevant agencies are appropriately and consistently represented at the MARAC.
4	Independent representation and support for victims	All high risk victims are consistently supported and represented by an Independent Domestic Violence Advisor (IDVA) or other independent representative who prioritises safety throughout the MARAC process.
5	Research and information sharing	MARAC representatives research cases and share relevant and proportionate information to identify risk and inform safety planning. Safety and confidentiality are maintained at all times.
6	Action planning	Action plans are developed to address identified risks.
7	Number of cases and capacity	The MARAC has the capacity to ensure that all high risk victims who meet the MARAC criteria can receive support from their local MARAC.
8	Equality	The MARAC is committed to delivering equality of outcome to all.
9	Operational support	Consistent coordination and administration support the effective functioning of the MARAC.
10	Governance	Effective governance oversees the performance, sustainability and accountability of the MARAC

### 1. Identification

#### Definition of Domestic Abuse

1.1. The cross-government definition of domestic violence and abuse is:

“Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- psychological
- physical
- sexual
- financial
- emotional

'Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.”

## Identifying and Assessing Risk

- 1.2. All professionals that come into contact with victims of domestic abuse have a responsibility to consider if the victim, and/or their children, is at risk of serious harm.
- 1.3. In Kirklees, agencies use the Domestic Abuse, Stalking and Honour-based violence (DASH) Risk Model to identify high risk cases of domestic abuse. The DASH is provided as Appendix 1, and is also available from: [www.kirklees.gov.uk/marac](http://www.kirklees.gov.uk/marac)
- 1.4. The DASH is intended to be completed with the victim of domestic abuse. It contains 27 questions to quantify physical abuse; sexual abuse; coercion, threats and intimidation; economic abuse; emotional abuse and isolation; stalking; and risks to children/pregnancy. Professionals should note that information provided on the DASH will be shared with the MARAC Coordinator and Independent Domestic Violence Advisor (MARAC).
- 1.5. Cases where the DASH has 14 or more items ticked 'yes' are usually considered to be high risk and should be referred to MARAC. Cases that include physical abuse during pregnancy, strangulation, threats, cruelty to animals, the use of weapons and/or threats to kill are also usually considered to be high risk.
- 1.6. **Professionals that identify high risk of significant harm to victims should take immediate action to improve victim safety.** Professionals should follow their own agency procedures for reporting domestic abuse and taking action to reduce the risk of harm to victims and their children. Professionals should not wait until the MARAC to take action to prevent further abuse.
- 1.7. If the person experiencing domestic abuse is not considered as being at high risk of serious harm, professionals should make appropriate referrals or signpost to other services.

## Links with Existing Multi-Agency Working Arrangements

- 1.1 The MARAC is designed to enhance rather than replace existing multi-agency working arrangements. As such:
  - Agencies should take immediate action to prevent further abuse. Agencies should follow their own agency procedures to safeguard victims from further harm and discuss cases with designated professionals as appropriate;
  - Agencies should consider if the family meets the criteria for inclusion in the **Kirklees Stronger Families Programme** i.e. adult on benefits; unauthorised absences or child attends PRU/Alternative provision; anti-social behaviour or offences by child/young person; and/or domestic violence, mental ill-health, parents' offending or in prison, substance misuse, learning disabilities, long term health conditions and/or risk of homelessness. The criteria for the Stronger Families Programme is available from: [www2.kirklees.gov.uk/childrenandfamilies/parentsandcarers/strongerFamiliesGuidance.pdf](http://www2.kirklees.gov.uk/childrenandfamilies/parentsandcarers/strongerFamiliesGuidance.pdf)
  - Safeguarding Adults procedures should be followed if a professional considers an adult to be at risk of harm: [www.kirklees.gov.uk/community/careSupport/keepingSafe/safeguardingAdults.aspx](http://www.kirklees.gov.uk/community/careSupport/keepingSafe/safeguardingAdults.aspx)
  - Safeguarding Children procedures should be followed if a professional considers a child to be at risk of harm: [www.kirkleessafeguardingchildren.co.uk/procedures-guidance.html](http://www.kirkleessafeguardingchildren.co.uk/procedures-guidance.html)
  - Multi-agency Public Protection Arrangements (MAPPA) and arrangements for managing Potentially Dangerous People take precedence over the MARAC. Police will make the necessary arrangements to share information with the MARAC as appropriate.



## 2. Referral to the MARAC

- 2.1. All victims that have been identified as at high risk of serious harm should be referred to the MARAC. Specifically:
- Professionals should make a referral to MARAC for all cases where the DASH-RIC had 14 or more items ticked 'yes'. This is considered to be **visible high risk**.
  - Professionals may use their **professional judgement** to make a referral to MARAC if they consider that the victim is at high risk of serious harm.
  - Professionals may make a referral to MARAC in cases of **potential escalation**, where abuse is escalating and it is necessary to share information more fully at the MARAC.
- 2.2. Professionals referring cases to MARAC should complete a MARAC referral form (provided as Appendix 2). Professionals should note that the details provided on the completed referral form will be shared with the MARAC Operational Group. The completed referral form and DASH should be sent to [marac@kirklees.gcsx.gov.uk](mailto:marac@kirklees.gcsx.gov.uk)
- 2.3. Professionals should note the referral deadline for each MARAC (the MARAC schedule is available from: [www.kirklees.gov.uk/marac](http://www.kirklees.gov.uk/marac)).
- 2.4. If professionals are unsure whether to refer a case to MARAC, they should seek advice from their designated professional in the first instance.

### Repeat Referrals

- 2.5. Referring agencies are expected to 'flag and tag' MARAC victims in their files for 12 months following a referral so that they are aware if a service user/client experiences a repeat incident with the same perpetrator. It is not recommended that perpetrators are flagged.
- 2.6. Agencies should refer all repeat incidents, regardless if the incident meets the criteria for a MARAC referral in its own right. Referring agencies should identify 'repeats' on their referral forms.
- 2.7. The MARAC coordinator and/or administrator may also flag cases where a previous victim is referred to MARAC with a different perpetrator, and/or a new victim is referred to MARAC as the partner of a perpetrator that has previously been linked to another MARAC victim.

### MARAC to MARAC Referrals

- 2.8. A MARAC to MARAC referral should be made when a victim moves between areas, either on a temporary (e.g. into refuge) or permanent basis. The referring MARAC should send:
- MARAC minutes relating to that case;
  - The original referral form;
  - A completed MARAC referral form; and
  - Any other documentation that is relevant to the new MARAC.
- 2.9. The minutes of a MARAC meeting will normally address risks to the victim in the original area. However, it may have been some time since the victim was discussed. As such, the MARAC referral form should provide any new information on the victim and their children.
- 2.10. If Kirklees MARAC receives a MARAC from another area, the MARAC Coordinator/Administrator will acknowledge receipt and include the case on the MARAC agenda.

### 3. Multi-Agency Engagement

- 3.1. All signatory agencies are required to send an appropriate representative to each MARAC.
- 3.2. Representatives must be of sufficient seniority within their agency to present cases that have been referred by their agency to the MARAC; share relevant and proportionate information with the MARAC; volunteer actions to safeguard victims and/or their children; and advise the MARAC Coordinator of progress in implementing agreed actions. Further detail about the specific responsibilities for agency representatives at MARAC is in [Part 9: Operational Support – MARAC Operational Group](#).
- 3.3. It is preferred that the same agency representative attends each MARAC. However, if the designated agency representative is unable to attend the MARAC, deputies may attend in their place. Deputies are expected to be fully briefed on the cases to be presented to MARAC, the information to be shared, and to provide an update against actions identified in previous MARACs.
- 3.4. If neither the designated agency representative nor a suitable deputy is able to attend MARAC, written information about the agency's involvement with the victim, perpetrator and/or any children should be shared with the MARAC Coordinator or Administrator prior to the meeting.
- 3.5. Attendance at MARAC will be monitored by the MARAC Strategy Group.

### 4. Independent representation and support for victims

- 4.1. Victims of domestic abuse are to be supported through the MARAC process by the Independent Domestic Violence Advisor (MARAC).
- 4.2. Professionals should note that there are two Independent Domestic Violence Advisors, or IDVAs, in Kirklees with distinct responsibilities:
  - Independent Domestic Violence Advisor (Court Proceedings), based at Connect Housing, who supports victims of domestic abuse through court process. This IDVA shares client information (current and previous) with the MARAC and undertakes actions to enable information sharing between the MARAC and court processes i.e. regularly seeking updates on court results and sentencing, ensuring restraining orders are applied for, speaking to the CPS regarding bail variations etc. The IDVA (Court Proceedings) may receive referrals directly from the MARAC;
  - Independent Domestic Violence Advisors (MARAC), based at Connect Housing. This IDVA supports victims through the MARAC process and receives referrals through the MARAC.
- 4.3. The role of the IDVA (MARAC) is to represent the views of the victim at the MARAC and to liaise between the victim and partner agencies to ensure that all relevant resources are being utilised to make the victim and any other vulnerable parties (including children) safe. The IDVA will be responsible for the case management for the duration of her role with the victim.
- 4.4. Referrals to the MARAC (including the DASH) will be forwarded to the IDVA (MARAC) within two days of a referral to MARAC. The IDVA will consider the work that has already been done to keep the victim safe, and make contact with the victim to determine if further support is required and to represent their views at the MARAC.
- 4.5. The IDVA will contact the victim after the MARAC to provide feedback about the discussion and actions agreed. In the absence of the IDVA (MARAC), other suitable agency representatives will be nominated to provide feedback.



## 5. Research and Information Sharing

### Preparation for the MARAC Meeting

#### MARAC Agendas

- 5.1. All cases referred to MARAC (before the referral deadline date) will be on the agenda for the next MARAC. Referrals received after the referral deadline date will be on the agenda for the subsequent MARAC.
- 5.2. The agenda contains all the information provided in each referral. It will be circulated at least 5 working days before the MARAC.

#### Agency Research

- 5.3. Upon receipt of the agenda, members of the MARAC Operational Group will collate any relevant, proportionate information they may hold about the victim, the perpetrator and any children in the household, including information that may indicate a risk to the victim or children and/or work that has been undertaken to improve victim safety.
- 5.4. In the event that the member of the MARAC Operational Group cannot attend the MARAC, this information should be forwarded to and discussed with the MARAC Coordinator/Administrator.
- 5.5. Agencies are expected to 'flag and tag' MARAC victims in their files for 12 months following a referral so that they are aware if a service user/client experiences a repeat incident. It is not recommended that perpetrators are flagged.
- 5.6. The agenda will include a list of cases that have not been discussed in 12 months and, as such, no longer need to be flagged in agency files.

#### Victim Contact

- 5.7. Where it is safe to do so, the IDVA (MARAC) will contact the victim prior to the MARAC to discuss safety planning and to bring the views of the victim to the meeting.

### At the MARAC Meetings

- 5.8. The MARAC meetings will be held at a minimum of once every month. MARAC meetings will be chaired by West Yorkshire Police or their nominated delegate.
- 5.9. Notes of each meeting will be recorded by the MARAC Administrator and circulated to attendees following the meeting.

#### Presenting Cases

- 5.10. Members of the Operational Group are required to present the cases that have been referred to the MARAC by their agency, or make arrangements for the member of staff that made the referral to present the case to the MARAC. The agency should contact the MARAC Coordinator/Administrator to make appropriate arrangements for additional members of staff to attend the MARAC.
- 5.11. The referring agency will introduce the case, identify the risk to victims and/or their children and provide an update of any further incidents or work undertaken since the referral was made.

#### Sharing Information

- 5.12. Following the presentation of the case by the referring agency, the MARAC Chair will invite other MARAC Operational Group members to share information about their agencies' involvement with the victim, the perpetrator, and any children affected by the abuse.

5.13. This may include:

- name, date of birth, address(es), aliases and gender;
- information about court orders, injunctions, bail conditions and other legal issues;
- current information relating to recent contact, meetings, sightings, phone calls. This could include attendance or non-attendance at appointments, who is present at an address during home visits, and attendance at A&E or other health settings. This may also include current information on attitude, demeanour, behaviour;
- relevant historic information regarding previous convictions, family or relationships history, other safety options considered or substance misuse issues;
- other information relating to the risks facing the victim or other data subjects.

5.14. Information sharing should be restricted to information that may indicate a risk to the victim or children, and/or work that has been undertaken to improve victim safety.

#### Restricted Information Sharing

5.15. There may be circumstances, such as when a victim at risk of being murdered as a result of honour-based violence, where information sharing may be restricted to a small number of agencies that attend the MARAC.

## 6. Action planning

### Identifying Risks to the Victim and/or Their Children

- 6.1. Referring agencies are required to identify risks to the victim and/or their children, and steps that have been taken to reduce those risks.
- 6.2. As a result of the information shared during the MARAC, agencies may identify further risks to the victim and/or their children.

### Safety Planning

- 6.3. Based on the risks identified above, further actions may need to be taken to improve safety for victims and their children. Agencies will draw up a safety plan to reduce the risk of harm to victims and their children.
- 6.4. The actions in the safety plan aim to encourage the victim to engage with support in future and increase their safety; and ensure that the MARAC has exhausted all relevant resources to make the victim and any other vulnerable parties (including children) safe.
- 6.5. Agencies will recognise where staff within their organisation may provide additional support, and volunteer actions to be undertaken by themselves and other staff within their agency to safeguard victims and/or their children. Agencies may also suggest actions that could be taken by other agencies to improve victim/child safety.

### Feedback to the Victim

- 6.6. Where it is safe to do so, the IDVA (MARAC) will contact the victim to provide feedback on what has been discussed at the MARAC and the actions that will be taken.

## Feedback to Relevant Staff

- 6.7. Following the MARAC, agencies will feedback relevant and appropriate information and actions to practitioners within their agency. Agencies will provide constructive feedback to those staff that made the referral to the MARAC, and advise any other practitioner if they need to undertake action to safeguard the victim and/or their children.

## Monitoring Actions from the MARAC

- 6.8. All safety plans will be recorded by the MARAC Coordinator/Administrator.
- 6.9. Members of the MARAC Operational Group are responsible for updating the Coordinator/Administrator when they complete their actions.
- 6.10. Agencies should liaise with each other outside the MARAC meeting to ensure they are monitoring the situation and updating one another about completed actions. Risk levels can change at any time so it is vital that the case is managed outside the meeting by the relevant agency partners.
- 6.11. Safety Plans will be reviewed at the following MARAC.

## 7. Number of Cases and Capacity

- 7.1. The MARAC Strategy Group will monitor the number of referrals to ensure that all high risk victims who meet the MARAC threshold can receive support from Kirklees MARAC.
- 7.2. This includes ensuring that there is sufficient capacity to provide independent representation for all MARAC cases.
- 7.3. This also includes ensuring that there is sufficient administrative capacity for the MARAC.

## 8. Equality

- 8.1. The MARAC Strategy Group will ensure that the MARAC process does not preclude any person from being referred to the MARAC on the basis of age, disability, race, belief, sexual orientation, gender or gender identity.
- 8.2. The MARAC Strategy Group will consider data from the MARAC to ensure that MARAC referrals reflect the local population, and that specialist agencies are in attendance at the meeting as appropriate.

## 9. Operational Support

### MARAC Operational Group

- 9.1. Members of the MARAC Operational Group attend each meeting of the MARAC. All partner agencies are required to send an appropriate representative to each MARAC.
- 9.2. Members of the Operational Group must be of sufficient seniority within their agency to fulfil the responsibilities outlined below. Agencies should allow their representatives sufficient time to fulfil their responsibilities in relation to the MARAC Operational Group.
- 9.3. Members of the Operational Group are required to attend the MARAC regularly.

- 9.4. Members of the Operational Group are required to support staff within their organisation to make appropriate referrals to the MARAC. This may include acting as a point of contact and source of support for staff regarding MARAC; providing advice on the circumstances in which professionals should complete a DASH risk assessment and/or a referral to MARAC; and signposting professionals to domestic abuse services and/or other forms of support.
- 9.5. Members of the Operational Group are required to present cases that have been referred by their agency to the MARAC. Members of the Operational Group will need to introduce the case, the risk to victims and/or their children and the action that has been taken to mitigate those risks. Members of the Operational Group may find it useful for the member of staff who made the referral to be present at the MARAC, and should contact the MARAC Coordinator to make arrangements for this to occur.
- 9.6. Members of the Operational Group are required to research all MARAC listed cases and share relevant and proportionate information with the MARAC. This will include liaising with their Strategy Group representative to ensure that their agency has the necessary procedures in place to research all MARAC listed cases; conducting (or coordinating) information gathering for every MARAC; compiling relevant and proportionate information to the MARAC; and sharing this information with MARAC.
- 9.7. During the course of the MARAC, it may become apparent that further actions will need to be taken to improve safety for victims and their children. Members of the Operational Group will need to recognise where staff within their organisation may provide additional support, and volunteer to do so.
- 9.8. Members of the Operational Group are required to feedback relevant and appropriate information and actions to practitioners within their agency. Following the MARAC, members of the Operational Group will need to provide feedback to those staff that made the referral to MARAC, and to any other practitioner that may need to undertake action to safeguard the victim and their children.
- 9.9. Members of the Operational Group are required to inform the MARAC co-ordinator of progress on agreed actions.
- 9.10. Members of the Operational Group that have any difficulty in fulfilling these responsibilities, or other issues, should raise it with the MARAC Strategy Group.

#### Deputies

- 9.11. If the designated member of the MARAC Operational Group is unable to attend MARAC, deputies may attend in their place. Deputies are expected to be fully briefed on the cases to be presented to MARAC, the information to be shared, and progress against the actions identified in previous MARACs.
- 9.12. If neither a MARAC representative or a suitable deputy is able to attend, the agency should notify the MARAC Coordinator or Administrator and send detailed information about the information to be shared at MARAC, including progress against previously identified actions.
- 9.13. If the agency has referred a case to MARAC yet is unable to attend, suitable arrangements will need to be discussed with the MARAC Coordinator or the MARAC Chair.

#### Other Agency Involvement

- 9.14. Agencies that are not signatories to this protocol may refer cases to MARAC. Referring agencies are bound by the terms of this operating protocol and the information sharing protocol.
- 9.15. As such, agencies that are not signatory to this protocol are required to:
  - make appropriate referrals to MARAC (i.e. refer cases where a victim of domestic abuse is at high risk of harm on an appropriate form and supported by a DASH)

- attend MARAC to present cases referred by their agency;
  - bring relevant and proportionate information to the MARAC;
  - commit their agency to action which will further safeguard MARAC clients;
  - feedback relevant and appropriate information and actions to practitioners who have supplied information within their agency;
  - inform the MARAC co-ordinator of progress on agreed actions; and
  - raise agency concerns to the MARAC strategy group.
- 9.16. If an agency that is not a signatory to this protocol regularly makes referrals to MARAC, the MARAC Strategy Group will approach that agency to become a signatory to this protocol and nominate appropriate representatives to attend the MARAC Operational Group and MARAC Strategy Group.

### **MARAC Chair**

- 9.17. The role of the MARAC Chair is to ensure that the MARAC addresses the safety of the highest risk victims of domestic abuse (in partnership with other agencies). The Chair is not responsible for the actions of each attendee, but will aim to foster an ethos of accountability and responsibility in the MARAC.
- 9.18. The chair will ensure that the MARAC focusses on the risks to victim and/or their children.
- 9.19. The chair will encourage participation from all agencies to help create a proactive safety plan where the risks and needs of victim, children and perpetrator are addressed by the MARAC appropriately.
- 9.20. Issues with attendance, the completion of actions, and the recording of data in relation to the MARAC should be raised with Chair (or the MARAC Coordinator) in the first instance.

#### During the MARAC Meeting

- 9.21. At the beginning of the meeting, the Chair will introduce any new representatives, explain briefly how the MARAC meeting will proceed, read out the confidentiality statement and remind representatives of the focus on risk.
- 9.22. The chair will then identify and address incomplete actions and record in the minutes.
- 9.23. The chair will encourage all representatives to participate in the meeting and encourage representatives to provide relevant information succinctly, to help keep the meeting focused and running on time. The chair will ensure that the victim's needs and views are clearly stated, and that agencies focus on risk.
- 9.24. The chair will encourage agencies to volunteer relevant actions and ensure that the MARAC has exhausted all relevant resources to make the victim and any other vulnerable parties (including children) safe.

### **MARAC Coordinator**

- 9.25. The MARAC Coordinator supports the Chair to ensure that the MARAC runs smoothly, and provides information to enable the Strategy Group to oversee the MARAC.
- 9.26. The coordinator establishes and maintains effective communication between all parties who attend MARAC. This includes providing appropriate information to partner agencies about

the MARAC process and working with the Chair to identify gaps within agencies that attend the MARAC and work to include these agencies in the MARAC process.

- 9.27. The coordinator will also identify and, with the approval of the Strategy Group, implement improvements to the MARAC process.
- 9.28. The coordinator will coordinate relevant information to enable the Strategy Group to monitor the effectiveness of the MARAC.
- 9.29. The coordinator will work closely with the administrator to ensure that actions, and progress against actions, is recorded (i.e. recording where actions are complete, cannot be completed or are incomplete and bring these to the attention of the next meeting).

### **MARAC Administrator**

- 9.30. The MARAC Administrator will prepare the MARAC agenda to ensure that cases are reviewed in the most time effective manner. As part of this work, the Administrator may provide feedback to agencies on their referrals, and liaise with the MARAC Coordinator to ensure any specialist attendees are present at the MARAC.
- 9.31. The administrator will refer MARAC cases ahead of the meeting to the IDVA service in a timely way. The MARAC Administrator may also make other referrals (i.e. to SWANS) as appropriate.
- 9.32. The administrator will prepare accurate notes of the meeting, which summarise the information presented by agencies, and include agreed actions.
- 9.33. The administrator will maintain a tracking system of MARAC cases which have been flagged for twelve months following the last incident, and to notify colleagues when twelve months have passed so that these flags can be removed from their respective systems.

## **10. Governance**

### **MARAC Strategy Group**

- 10.1. All partner agencies are represented on the MARAC Strategy Group.
- 10.2. The Strategy Group is responsible for monitoring and conducting regular assessment of the overall performance of the MARAC. This includes addressing operational issues, raising awareness of the MARAC, and maintaining effective partnerships with key local bodies.
- 10.3. The Strategy Group will respond to issues raised by the MARAC Operational Group.
- 10.4. The Strategy Group will monitor and evaluate the data from the MARAC.
- 10.5. The Strategy Group will ensure that the MARAC operates in line with legal responsibilities and keeps up-to-date with changes to legislation national guidance. This includes participating in reviews following a homicide where appropriate.
- 10.6. The Strategy Group will oversee efforts to raise awareness about the MARAC with local practitioners and ensure that training is available in risk identification, referral pathways, safety planning and MARAC processes. In Kirklees, MARAC awareness raising and training is linked with the wider Domestic Abuse Strategy that includes basic awareness raising and routine enquiry.
- 10.7. The Strategy Group will oversee the review of the Information Sharing and Operational Protocol.

Responsibilities of Individual Members

- 10.8. Members of the Strategy Group must be of sufficient seniority within their agency to address the practical and resource implications of MARAC. Agencies should allow their representatives sufficient time to fulfil their responsibilities in relation to the MARAC Strategy Group.
- 10.9. Members of the Strategy Group are required to attend the MARAC Strategy Group regularly.
- 10.10. Members of the Strategy Group are required to ensure that their agency has clear procedures for staff in relation to recognising domestic abuse, assessing risk (including the circumstances in which a DASH should be completed) and making appropriate referrals domestic abuse services and to MARAC.
- 10.11. Members of the Strategy Group are required to ensure that their agency has the necessary procedures in place to enable members of the MARAC Operational Group to research all MARAC listed cases and share relevant, proportionate information for MARAC purposes.

**Performance Monitoring**

- 10.12. The Strategy Group oversees the regular collection of anonymised data on the MARAC.
- 10.13. This data may be shared with CAADA, the Domestic Abuse Strategy Group and wider audiences as appropriate.



## Domestic Abuse, Stalking and Harassment and Honour Based Violence (DASH 2009) Risk Model

The DASH is for all professionals working with victims of domestic abuse, stalking and harassment and honour based violence. This tool is designed to be completed by professionals in consultation with the victim. Where this is not possible, a DASH should still be completed, but professionals should make it clear that information is to the best of the professional's knowledge.

Agency		Contact Name	
Email/phone		Date	

Victim name		Victim DOB	
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Current Situation		
Has the current incident resulted in injury and whether this is first injury?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Are you very frightened?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What are you afraid of? Is it further injury or violence? Please give an indication of what you think (state name) might do and to who:		
Kill: <input type="checkbox"/> Self <input type="checkbox"/> Children <input type="checkbox"/> Other (specify)		
Further injury and violence: <input type="checkbox"/> Self <input type="checkbox"/> Children <input type="checkbox"/> Other (specify)		
Other (please specify): <input type="checkbox"/> Self <input type="checkbox"/> Children <input type="checkbox"/> Other (specify)		
<b>Do you feel isolated from family/friends, i.e. does the abuser try to stop you from seeing friends/family/doctor or others?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you feeling depressed or having suicidal thoughts?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Have you separated or tried to separate from your abuser within past year?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Is there conflict over child contact?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Does the abuser constantly text, call, contact, follow, stalk or harass you?</b> Please expand to identify what and whether you believe that this is done deliberately to intimidate you? Consider the context and behavior of what is being done. If 'Yes', please complete section xx	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Children and Dependents		
<b>Are you currently pregnant or have you had a baby in the last 18 months?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any children, step-children that aren't the abuser's that live in the household? Or are there other dependents in the household (i.e. older relatives)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever hurt the children/dependents?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the abuser ever threatened to hurt the children/dependents?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Domestic Violence History		
<b>Is the abuse happening more often?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Is the abuse getting worse?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No



<b>Does the abuser try to control everything you do and/or are they excessively jealous?</b> (in terms of relationships, who you see, being 'policed at home', telling you what to wear for example. Consider honour based violence and stalking and specify the behavior.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever used weapons or objects to hurt you?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever threatened to kill you or someone else and you believed them?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever attempted to strangle/choke/suffocate/drown you?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Does the abuser say or do anything of a sexual nature that makes you feel bad, or that physically hurt you or someone else?</b> (please specify who and what)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Is there any other person that has threatened you or that you are afraid of?</b> (If yes, consider extended if honour based violence. Please specify who).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you know if the abuser has hurt anyone else? (children/siblings/elderly relative/stranger, consider HBV). Please specify who and what. <input type="checkbox"/> Children <input type="checkbox"/> previous relationship <input type="checkbox"/> Other family member <input type="checkbox"/> other (please specify)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever mistreated an animal or the family pet?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Abuser(s)		
Are there any financial issues? For example, are you dependent on the abuser for money/have they recently lost their job/other financial issues?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems living a normal life?</b> (please specify what) <input type="checkbox"/> Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Has the abuser ever threatened or attempted suicide?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the abuse ever breached bail/an injunction and/or any agreement for when they can see you and/or the children? Please specify what <input type="checkbox"/> Bail conditions <input type="checkbox"/> Non-molestation/restraining/occupation order <input type="checkbox"/> child contact arrangements <input type="checkbox"/> other (please specify) <input type="checkbox"/> forced marriage protection order	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you know if the abuser has ever been in trouble with the police or has a criminal history? Please specify what.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Comments
Please comment on all the areas ticked yes, identifying by number and any other relevant comments: (consider for example victim's vulnerability, disability, mental health, alcohol/substance misuse and/or the abuser's occupation or interests and if this gives access to weapons (i.e. ex-military, police, pest control?))

What is the level of risk in this case?		
<input type="checkbox"/>	<b>Standard</b>	No significant indicators of risk
<input type="checkbox"/>	<b>Medium</b>	There are identifiable indicators of risk of harm. The abuser has potential to cause harm but is unlikely to do so unless there is a change in circumstances, i.e. failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse.
<input type="checkbox"/>	<b>High</b>	There are identifiable indicators of serious harm. The potential even could happen at any time and the impact would be serious. All high risk cases to be referred to MARAC.

<b>Does victim consent to referral to MARAC?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Additional Risk Factors – Stalking		
Please only complete this section if question 8 (does the abuser constantly text, call, contact, follow, stalk or harass you) was answered 'yes'.		
Is the victim very frightened?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there any previous domestic abuse and/or harassment history with this victim or other victims?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the suspect ever vandalized or destroyed property belonging to the victim?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the suspect turned up unannounced to the victim's home, workplace etc more than once a week?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have there ever been threats of physical or sexual violence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any third party been harassed since the harassment began i.e. family, friends, colleagues?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the suspect acted violently towards another during the stalking incident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have others been engaged to help wittingly or unwittingly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
History of the abuser abusing drugs or alcohol?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the suspect known to have been violent in the past (physical or psychological)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Referral Form

Please ensure all fields are completed – failure to complete relevant fields may result in delays.  
MARAC referrals should be sent by **secure email** to [marac@kirklees.gcsx.gov.uk](mailto:marac@kirklees.gcsx.gov.uk)

Agency		Contact Name	
Email/phone		Date	

Victim name		Victim DOB	
Address		B&ME <input type="checkbox"/> Disabled <input type="checkbox"/> LGBT <input type="checkbox"/> Gender Female	
Telephone number		Is this number safe to call?	Contact info e.g. times to call
Victim aware of MARAC		Consent given:	

Perpetrator(s) name		Perpetrator(s) DOB	
Perpetrator(s) address		Relationship to victim	

Children (inc unborn)	DOB/EDD	Relationship to victim	Relationship to perpetrator	Address	School(If known)

Reason for Referral	Please choose <b>one</b> of the following:				
	Visible high risk	<input type="checkbox"/>	<b>xx</b> ticks on DASH		
	Professional judgement	<input type="checkbox"/>	<b>Comment:</b>		
	Potential Escalation	<input type="checkbox"/>	<b>Comment:</b>		
Information/ incident that prompted risk assessment					
Contributory factors					
Relevant history					
Who is victim afraid of?					
Who is safe to talk to?					
Who is not safe to talk to?					

Risks and Interventions	
<i>From the information collated above, identify the risks to victims and/or their children, and provide details of the interventions that have been offered/ in place to mitigate those risks.</i>	
Risk to victim and children	Interventions offered/in place

Other Relevant Information/Comments

The information in this form will be shared with agencies for the purposes of the MARAC.

The MARAC is a regular meeting where local agencies share information about high risk domestic abuse victims (those at risk of murder or serious harm) and work together to develop a risk focused, co-ordinated safety plan to support the victim. The actions in the safety plan aim to encourage the victim to engage with support in future and increase their safety; and ensure that the MARAC has exhausted all relevant resources to make the victim and any other vulnerable parties (including children) safe.

The MARAC provides an opportunity to facilitate, monitor and evaluate information sharing between agencies to ensure that appropriate actions are being taken to reduce the risk of further violence. It is intended to enhance, rather than replace, existing multi-agency working arrangements.

**Professionals must take immediate action to safeguard victims of domestic abuse, including children.**