



Gloucestershire Multi-Agency Risk Assessment Conference (MARAC)

Operating Protocol and Guide

2019

Produced by: Sophie Jarrett, County Domestic Abuse and Sexual Violence Strategic Coordinator

MARAC queries to be sent to: MARAC@gloucestershire.pnn.police.uk

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1. Introduction

This document has been produced to:

- Outline the MARAC process, how it operates, and the roles and responsibilities of those who participate.
- Provide clear guidance on the MARAC process and how agencies can participate.
- Outline the governance structures for MARAC.
- Act as a terms of reference for the MARAC process.

This document should be read in conjunction with the MARAC information sharing agreement, and local and national policies on safeguarding adults and children.

Any queries about the MARAC process should be directed to:

MARAC@gloucestershire.pnn.police.uk

1.1 Definition of domestic abuse

The Gloucestershire MARAC operates under the cross-government national definition of domestic abuse (2013):

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*
- *Economic/Financial*
- *Emotional*

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependant 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 pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victims.

This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

1.2 Purpose of the Multi-Agency Risk Assessment Conference (MARAC)

The MARAC is a best practice model, rolled out nationally, to respond to high risk victims of domestic abuse. It is a process that facilitates the sharing of multi-agency information and a collaborative assessment of risk and action planning to reduce serious harm to victims of domestic abuse.

The role of the MARAC is to facilitate, monitor and evaluate the effective information sharing to enable appropriate actions to be taken to increase public safety. The responsibility to take appropriate action therefore rests with individual participating agencies; it is not transferred to the MARAC. The MARAC is a process, not a formal body that holds risk.

The process is open to all partner agencies, both statutory and voluntary, who are engaged with the safeguarding of victims and their families from domestic abuse.

The key aims of the MARAC are:

- To share information to increase the safety, health and wellbeing of victims and their children/dependants.
- To jointly construct and implement a risk management plan that provides professional support to all those at risk and increase safety.
- To reduce repeat victimisation.
- To improve agency accountability.
- To improve support for staff involved in high risk cases.
- To work in partnership, where necessary, to safeguard children and adults.
- To determine whether the perpetrator poses significant risk to any particular individual or to the general community (linking when necessary to the Multi-Agency Public Protection Panel (MAPPA) process).

The heart of the MARAC is based on the principle that no single agency or individual knows the complete picture of the life of a victim, but all may have insights that are crucial to their safety and that of their children.

2. Identifying MARAC cases

Victims of domestic abuse may be identified as a result of direct victim disclosure, routine enquiry, or professional enquiry following the identification of the signs and symptoms of domestic abuse.

Guidance on identifying and responding to domestic abuse is available at www.glostakeastand.com

Once an agency or professional has identified domestic abuse, they should in the first instance consider any necessary immediate safety measures to secure the victims safety; this may involve calling emergency services to report crime, ensure medical attention is provided, and ensuring the victim has a safe environment to talk to the professionals involved.

Once safe to do so, an assessment of risk should be made using the Domestic Abuse, Stalking and Harassment and Honour Based Violence Risk Identification, Assessment and Management Tool (DASH)-See Appendix 1.

Cases identified as 'High Risk' should be referred into the Gloucestershire MARAC by following the process outlined in this guidance. High Risk can be determined through visible

high risk, escalation, victim perception and professional judgement (see section 2.1c for more detail).

2.1 Conducting a DASH Risk Assessment

The DASH¹ risk assessment is an evidence based tool, developed from extensive research into domestic homicides, 'near misses' and lower level incidents. The DASH has been developed nationally to ensure a consistent approach to domestic abuse risk assessment and provides a practical tool for all professionals who identify domestic abuse.

The DASH should be used whenever a professional identifies that someone is experiencing domestic abuse. It is a tool designed to be used for those suffering current rather than historic domestic abuse, and ideally, should be used as part of an immediate response to an incident of domestic abuse.

It is important to be aware that risk in domestic abuse situations can change very quickly, and as and when things change you should re-visit the risk assessment. Events and circumstances may undergo rapid and frequent change. Where this is the case, assessment must be kept under review.

The DASH risk assessment should not be relied upon as the sole assessment of risk; as such it should also be used in conjunction with your professional judgement. The DASH is not designed as a predicative process, and there is no existing accurate procedure to calculate or foresee which cases will result in homicide or further assault and harm². The tool therefore provides a framework and structure for understanding risk, but the overall assessment of risk should be determined with your own professional judgement of the circumstances in mind.

2.1a How to use the DASH

It is advised that the DASH is completed on a face to face basis, or over the phone, with the victim in a safe environment. There may however be exceptional circumstances in which you will have to complete the DASH retrospectively following a conversation with the victim; in these circumstances it is advised that the professional has a good understanding of the key risk factors identified in the DASH in order to aid the conversation and ensure enough information is gathered.

Before completing the DASH:

- Ensure immediate safety issues are addressed and the victim is in a safe environment.
- Establish how much time the victim has to talk to you and that it is safe for them to talk with you now.
- Take note of their contact details.
- Establish the whereabouts of the perpetrators and any children/dependants.
- Explain that you are asking these questions to better understand their circumstances and make an assessment of risk.

¹ Richards, L (2009) Domestic Abuse, Stalking and Harassment and Honour Based Violence Risk Identification, Assessment and Management Tool (DASH): www.dashriskchecklist.co.uk

² DASH practice guidance for all front line staff, www.dashriskchecklist.co.uk.

- Identify early on who the victim is frightened of (partner/ex-partner/family member).

The DASH consists of 28 questions, of these questions there are some that relate to 'high risk' indicators. The High Risk indicators are as follows³:

Victim's perception of risk of harm: victims of domestic abuse often tend to underestimate their risk of harm from perpetrators of domestic abuse. However, if they say they fear further harm to themselves, their child(ren) or someone else this should be taken seriously when assessing future risk of harm.

Separation (child contact): victims who attempt to end an abusive relationship are strongly linked to intimate partner homicide. Many incidents happen as a result of child contact or disputes over custody.

Pregnancy/new birth (under 18 months old): domestic abuse can start or get worse in pregnancy. Victims who are assaulted whilst pregnant, when they have recently given birth or who have young children are at heightened vulnerability and risk. This is in terms of harm to them and to the unborn/young child. Consideration should be given to an escalation in abuse.

Escalation: repeat victimisation and escalation must be identified. Domestic abuse victims are more likely to become repeat victims than any other type of crime; as violence is repeated it often gets more serious.

Isolation/community issues: victims of domestic abuse can often be isolated from their support networks of family and friends, limiting their ability to seek support. Needs may also differ amongst ethnic minority groups, older people, people with disabilities, travelling communities and LGBT people; this may be linked to perceived racism, language, culture, insecure immigration status and access to relevant support services. It is important here to note possible 'Honour'-based violence and forced marriage. Where victims are particularly isolated and vulnerable, their concerns should be taken seriously.

Stalking: persistent and consistent calling, texting, sending letters and following. Domestic abuse stalkers are the most dangerous, with stalking and physical assault identified as being significantly associated with murder and attempted murder. This is not just about physical violence but also coercive control and jealous surveillance. (Detailed stalking guidance is available at www.glostakeastand.com)

Sexual Assault: those who are sexually assaulted are often subjected to more serious injury. Those who report a domestic sexual assault tend to have a history of domestic abuse whether or not it has been reported.

Strangulation (choking/suffocation/drowning): this includes all attempts at blocking someone's airway.

³ www.dashriskchecklist.co.uk

Credible threats to kill: a credible threat of violent death can very effectively control people and some may carry out this threat.

Use of weapons: this does not have to only apply to traditional weapons such as knives and guns, but can be any item used to inflict damage and injury to a person.

Controlling and/or excessive jealous behaviour: complete control over the victim's activities and extreme jealousy are associated with serious violence and homicide. It is important to note that the perpetrator may also try and control professionals as well.

Child Abuse: evidence shows that both domestic abuse and child abuse can occur in the same family. Child abuse can act as an indicator of domestic abuse in the family, and vice versa. It is also important to note if children are witnessing or hearing the abuse.

Animal/pet abuse: there is a link between cruelty to animals, child abuse and domestic abuse. The use or threat of abuse against pets is often used to control others in the family. Abuse of animals may also indicate a risk of future harm.

Alcohol/drugs/mental health: the abusers use of drugs and alcohol are not the cause of abuse, but may be a risk of further harm or escalation. Physical and mental ill health has also been shown to increase the risk of domestic abuse.

Suicide/Homicide: threats from an offender to commit suicide have been highlighted as a factor in domestic homicide.

Note: within the DASH form used locally, high risk indicators are highlighted in blue bold lettering. Some of the factors listed above may be covered by more than one question on the DASH form.

In order to get a comprehensive assessment of risk, it is important to ask all the questions; ensuring you don't run the risk of overlooking something significant that may then result in your response being inadequate.

The DASH can be answered using ticks to signify a yes or no response; you are also encouraged to write additional relevant information and to be specific within comments whether it is the view of the victim, or your professional judgement/opinion.

Gloucestershire Domestic Abuse Support Service (GDASS) have created a completion guide for the DASH. This can be found in Appendix 2.

2.1b Police Risk Assessment

The police will also risk assess using the questions detailed in the DASH risk assessment. The DASH questions are however included in the Vulnerability Identification Screening Tool (VIST); this tool ensures that attending officers can access all relevant assessments and referrals on their handheld device for domestic abuse, child protection and adult safeguarding. Whilst officers use the VIST, their assessment of risk in domestic abuse cases will be the same as any other agency completing the DASH, with high risk DASH assessments, via the VIST, being referred into MARAC.

2.1c Outcome of the DASH

Following the completion of the DASH, a victim may be assessed at:

Standard Risk: Current evidence does not indicate likelihood of causing serious harm.

Medium Risk: There are identifiable indicators of risk of serious harm. The perpetrator has the potential to cause serious harm but is unlikely to do so unless there is a change in circumstances, for example, failure to take medication, loss of accommodation, relationship breakdown, and drug or alcohol misuse.

High Risk: There are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious.

Risk of serious harm (Home Office 2002): 'A risk which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible'.

Guidance on identifying and responding to domestic abuse is available at www.glostakeastand.com. This will provide guidance on responding to cases assessed at Standard or Medium Risk.

Cases identified as high risk should be referred into MARAC.

High risk can be determined in the following ways:

- **Visible High Risk:** This accounts for the number of ticks on the DASH. If the victim has answered yes to 14 or more questions, the risk of serious harm is clear and the case would meet the referral criteria for referral to MARAC.
- **Professional Judgement:** If the outcome of the DASH is less than 14, a professional can refer the case to MARAC on the grounds of professional judgement of high risk where they deem it appropriate. In these circumstances the professional will have identified key high risk factors from the DASH, and may also consider further contextual or circumstantial information not captured within the DASH that raises concerns of serious harm. The victim's perception of risk may also be considered.
- **Potential Escalation:** If the outcome of the DASH is less than 14, but the result of the DASH indicates that the victim is experiencing an escalation in frequency or severity of abuse, the case should be referred into MARAC on the grounds of potential escalation. This option can also apply if there have been 3 or more police callouts to the victim as a result of domestic abuse in the past 12 months.

2.1d Discussing risk with the victim

Informing the victim of their risk level following completion of the DASH can be difficult, and it is important that this is handled sensitively. Letting the victim know that they are at high risk of serious harm or death may be frightening and overwhelming for them to hear. It is therefore important that you state exactly what your concerns are by using the answers the victim gave to you, and explain what the next steps are i.e. safety planning, referral to services etc.

Equally, telling the victim that they are not currently high risk and that you may need to refer them to a different agency or provide a different service as a result may be disappointing for the victim. This therefore needs to be managed carefully to ensure the victim doesn't feel like their situation is being minimised or so they don't feel embarrassed for reaching out for help. Explain to them that there are high risk factors linked to serious harm and that if they experience any of these in the future that they should contact appropriate services, or emergency services.

If a victim has not been identified as high risk, you can still provide them with relevant contact details for support services, and conduct a safety plan with them. Guidance on identifying and responding to domestic abuse can be found at www.glostakeastand.com alongside the contact details for relevant support agencies.

3. Responding to a high risk DASH assessment

3.1 Immediate safety measures and referrals

Once you have identified a victim as high risk, you should at first consider any immediate safety measures before making a referral to MARAC. This may include ensuring any medical needs are attended to, whether emergency accommodation should be explored and whether police involvement is required.

MARAC cannot respond immediately to risks identified in a case, it is therefore paramount that you implement a safety plan/safety measures to protect the victim prior to their case coming into MARAC. MARAC will aim to respond to any referrals within 72 hours, but if you feel a more urgent response is required, please follow this up with the MARAC Administrator who can look to arrange a MARAC ASAP.

Guidance on Identifying and Responding to Domestic Abuse is available at www.glostakeastand.com and provides more detail on safety measures you may wish to consider.

You may also wish to consider discussing a safety plan with the victim; the GDASS safety advice sheet is available in Appendix 3.

Gloucestershire Domestic Abuse Support Service (GDASS) can be contacted at any stage to provide professionals advice and guidance.

As the victim has been identified as being at high risk of serious harm, you should also make a referral to GDASS so that an Independent Domestic Violence Advisor (IDVA) can make contact and provide specialist support and safety planning. Consent from the victim is preferred, but referrals can be made without consent due to the high risk assessment.

The IDVA is a specialist in assessing and reducing risk of harm in domestic abuse cases. They work closely with partner agencies to create safety plans, and are integral to the MARAC process. Further details on the services provided by GDASS and how you can make referrals can be found:

www.gdass.org.uk

Helpdesk: 01452 726570

support@gdass.org.uk / Secure: gdass.referral@gsg.cjsm.net

If during the risk assessment process, you identified any risk to children or vulnerable adults, you should make a referral to children's social care and adult social care. Details on making these referrals can be found:

Children's Social Care: <http://www.gloucestershire.gov.uk/health-and-social-care/children-young-people-and-families/report-a-child-at-risk/>

Adult Social Care: <http://www.gloucestershire.gov.uk/health-and-social-care/adults-and-older-people/report-suspected-abuse-safeguarding-adults-at-risk/>

3.2 Referral to MARAC

Once you have taken any necessary safety measures, you should then make your referral into MARAC.

In order to make a referral, please ensure you have all the information you need from the victim. This will include names, dates of birth, address of victim, perpetrator and any children or vulnerable adults. The full MARAC referral form/DASH assessment is available in Appendix 1. The referral to MARAC also includes the full DASH assessment, ensuring you only have one form to complete. Please ensure you familiarise yourself with the referral and DASH, and when making a referral to MARAC it is completed as fully as possible.

Given your high risk assessment, you are able to make a referral into MARAC without the victims consent. It is however advised that you seek, where possible, the victims consent to make the referral. Where victims have consented to the process, their views and wishes are more readily available to the MARAC when considering risk management plans. If the victims does not wish to give their consent, where safe to do so, it is advised that you still inform them of the referral into MARAC; detailing that you are sufficiently concerned for their safety that you will be making the referral. There may also be circumstances where the risks are so high that you are unable to seek consent or make the victim aware of the referral.

Full details on the legislation that allows for information sharing without consent in high risk domestic abuse cases can be found in Appendix 4.

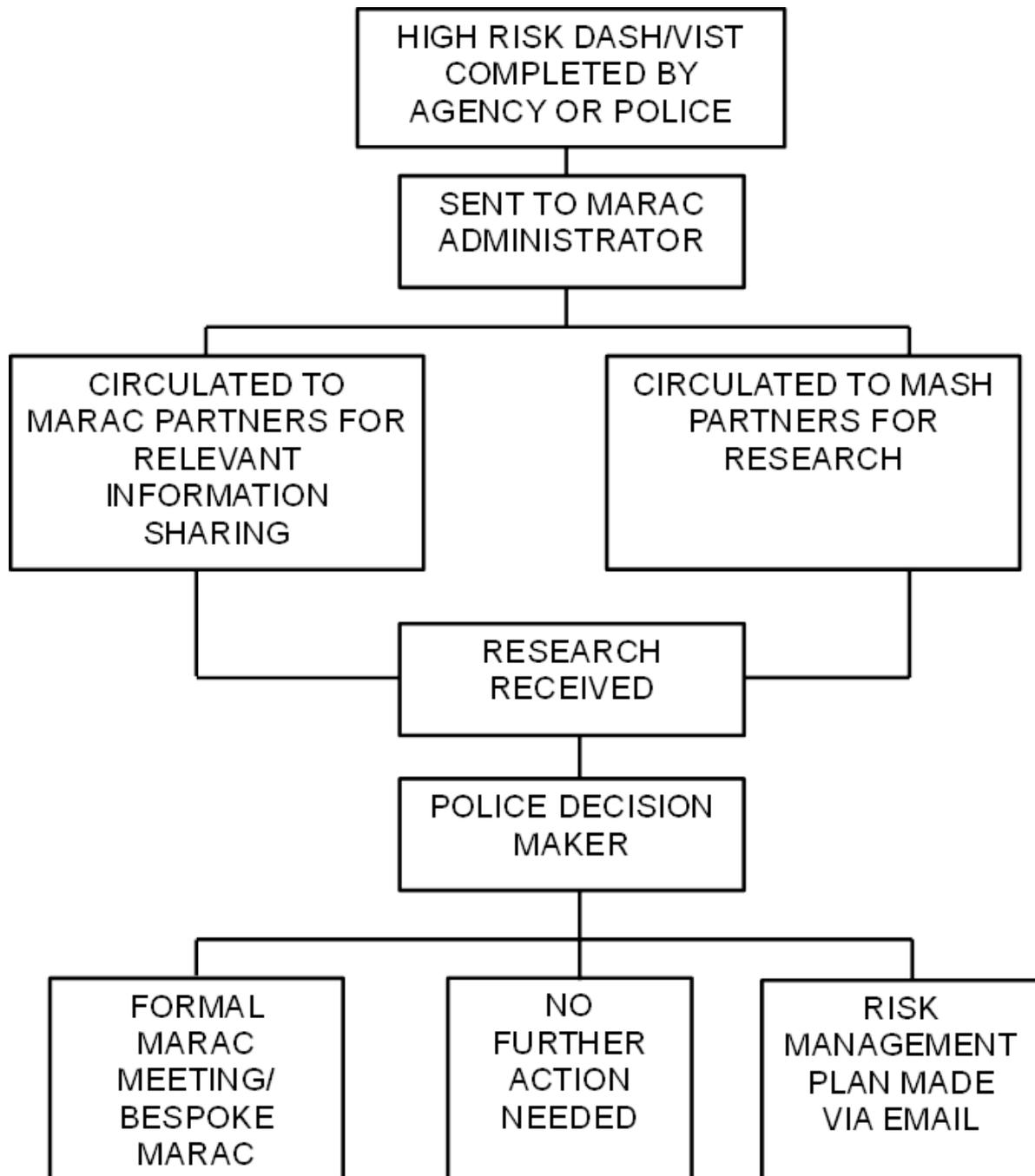
All MARAC referrals are submitted to the MARAC Administrator:

MARAC@gloucestershire.pnn.police.uk

4. The MARAC Process in Gloucestershire

The below diagram provides and overview of the current MARAC process in Gloucestershire at the point of referral. The diagram refers to the VIST alongside the DASH; the Vulnerability

Identification Screening Tool (VIST) is the tool used by police to complete risk assessment and refers automatically into MARAC where a case is high risk.



4.1 MARAC Case Research

As detailed in the above diagram, once a high risk DASH MARAC referral is made, the case details are circulated by the MARAC Administrator to all MARAC partner agencies for them to collate and submit their research on the case.

In order to support agencies in providing consistent and relevant information, a MARAC research form has been developed for agencies to complete. This is available in Appendix 5. This form provides structure for the type of information that is required by the MARAC to make an appropriate assessment of risk and plan actions to manage that risk. Information collated by agencies may vary, but will include in most cases:

- Demographic information about all parties involved in the MARAC case.
- Agency level of engagement with the victim, perpetrator, children or vulnerable adults.
- Context of recent contact with any party involved in the MARAC case.
- Any recent attitude, behaviour or demeanour changes identified.
- Any information linked to risk, including recent incidents/disclosures.
- Detail on who is considered to be at risk, and what the key priorities ought to be to secure that persons safety.
- Action that an agency can take to support the MARAC process and the victim.
- Any relevant history or further detail, including any risk to staff or other people who may come into contact with any party involved in the MARAC case.

All information sharing must be necessary, relevant and proportionate and should be shared in line with the MARAC Information Sharing Agreement, available at www.glostakeastand.com . This is the responsibility of each individual agency.

The MARAC case details will also be shared within the MASH for further research to be collated.

The main aim of collating research on MARAC cases is to ensure a broad picture is gathered of the circumstances and a clear understanding of all the agencies involved in the case. This sharing of information allows for a fuller picture of the risks to be developed and ensure agencies can work together in order to reduce risk.

When a request for research is made, the MARAC Administrator will provide a timescale for completion. This will usually be within 72 hours of the referral being circulated. There will however be some circumstances where research is requested within a smaller timescale; this will be in cases where the risk is known to very high, or the case is of a complex nature, requiring the MARAC to be convened within a day or so of its referral.

4.2 MARAC Decision making

Once all research has been collated by the MARAC Administrator, the case is then reviewed by the Police decision maker based within the Central Referral Unit (CRU). At this stage, each case will have one of the three following outcomes:

No Further Action (NFA): when multi-agency research details that all relevant actions to safeguard a victim have already been taken, and agencies are already working together to

achieve victim safety, the case will be classed as requiring no further action. At this stage, agencies should update the MARAC if there is a change in circumstances that indicates a need to review. At any stage, any agency can request that the MARAC case is referred into a formal/bespoke MARAC, or suggest additional action required.

Virtual risk management (Triage): when multi-agency research has indicated that some action has already been taken to safeguard the victim, but additional action is required, this will be completed via email. The cases dealt with in this way will be those where the victim is engaging well with services and only minor additional actions are required. At any stage, any agency can request that the MARAC case is referred into a formal/bespoke MARAC, or suggest additional action required.

Formal/bespoke MARAC: when multi-agency research indicates that the case is extremely high risk, or is very complex in nature, the case will be taken forward to a formal/bespoke MARAC. In these circumstances, robust risk management requires agencies to come together in a formal meeting to discuss the case in detail and develop jointly a plan to reduce the risk to the victim and other vulnerable persons. The bespoke nature of some of these MARACs means that specific professionals working directly with the victim or perpetrator can be invited to attend. These formal MARAC meetings may also request attendance from specialist agencies to provide their expertise, even where they may not hold information on the parties involved in the MARAC case.

Formal/bespoke MARAC meetings are arranged as and when required. Time is set aside each day for the possibility of conducting a MARAC meeting. Cases will be allocated a MARAC slot as soon as possible, and no later than a week after the case has been referred in. In some cases, due to the nature of the risk, a MARAC meeting may be convened the next day.

Formal/bespoke MARAC meetings will also be arranged when required to safety plan prior to the prison release date of the perpetrator.

4.3 Risk Management Plans

The plan put in place to safeguard the victim, their children and any identified vulnerable person will vary dependant on the risks presented. Many plans will involve agencies working together to respond effectively. For details on possible actions from MARAC, please contact the MARAC directly.

All risk management plans will be developed in keeping with the wishes of the victim. The views of the victim are generally presented to the MARAC via the Independent Domestic Violence Advisor (IDVA); further details on the role of the IDVA can be seen below. The views of the victim can however, also be presented to the MARAC by any other professional who is engaging well with them.

The development of a risk management plan, whether that is completed virtually, or via a formal MARAC meeting, remains a multi-agency responsibility. The final action plan from the MARAC is not the sole responsibility of the chair, but a collective decision agreed by all agencies who have been involved in the MARAC process. As such, all contributing agencies

are expected to update on actions they have already taken, suggest actions that they can take, and suggest and challenge other agencies to take action that will look to reduce the risk.

As such, the MARAC is not a formal body that holds the risk, but is a process that facilitates multi-agency information sharing and decision making. Agencies are therefore expected to participate fully in action/risk management planning and escalate any concerns to the MARAC chair should they feel there are gaps in the plan that need to be further explored.

Once a risk management plan is put in place, it's the individual agencies responsibility to update the MARAC administrator as soon as the action is completed. Updates should also be given if an action cannot be completed, or if the completion of an action changes the risk and other agencies need to be informed.

Due to the high volume of MARAC cases, the MARAC Administrator will not chase agencies for updates on their actions. It is the responsibility of agencies to therefore provide updates as soon as possible; without these updates, it can be assumed that actions have not been completed and there are therefore gaps in the risk management plan.

4.4 MARAC Roles and Responsibilities

The below sections outline the key roles and responsibilities of the key MARAC members.

4.4a Role of the MARAC Chair

The MARAC chair⁴ is responsible for establishing the MARAC process and ensuring the most appropriate response to high risk victims of domestic abuse; alongside the MARAC Steering Group.

The main role of the chair is to:

- Review the agency information shares on each case; including the actions already taken by agencies; and alongside seeking IDVA advice, make decisions as to the MARAC response each case will receive.
- Suggest agency actions to be taken on those cases responded to virtually.
- Facilitate discussion, information sharing and action planning during the formal/bespoke MARAC. This will also include summarising the key risks to support action planning.
- Ensure the victim remains the focus of the MARAC, and ensure their views are represented at the MARAC (most often by the IDVA).
- Promote accountability and responsibility with partner agencies. The chair is not responsible for ensuring actions are completed, but should ensure agencies are aware of their responsibility to complete actions and update in a timely manner.
- Provide advice and guidance to agencies when requested, on how they may be able to respond to high risk cases, or discuss risk.
- Manage the MARAC Administrator.

⁴ The MARAC is coordinated and chaired by Gloucestershire Police.

It is important to note, that whilst the MARAC chair will often coordinate the action plan for MARAC, they are not solely responsible for this or the risk for all MARAC cases. Agencies who participate in the MARAC are expected to offer up actions for the safety plan, and the risk is managed and held by all agencies.

4.4b Role of the MARAC Administrator

The MARAC Administrator is responsible for providing the administration support to the MARAC process.

The MARAC Administrators key responsibilities are to:

- Prepare and circulate MARAC cases to all partner agencies via secure means and request information shares within set timescales.
- Facilitate and ensure consistency in referral of cases from the full range of potential referring agencies based on the common risk identification tool (DASH) and referral forms.
- Prepare formal/bespoke MARAC meetings, ensuring circulation of paperwork in advance and inviting key partners to attend.
- Prepare accurate minutes and decision logs; updating decision logs once agencies provide updates on their actions from MARAC.
- Maintain a tracking system of MARAC cases and ensure repeat cases can be easily identified.
- Ensure relevant data is collected from the MARAC so that outputs and outcomes can be recorded and monitored by Safe Lives and the MARAC Steering Group.
- Maintain and develop necessary documentation to ensure the smooth running of the MARAC, such as referral forms, research form templates and minutes.
- Support the MARAC chair.
- Ensure information shares are in line with the MARAC information Sharing Agreement and that the principles laid out in this protocol and guide are adhered to; reporting any concerns to the MARAC chair or Steering Group.
- Make MARAC to MARAC transfers when necessary.

4.4c Role of the IDVA and victim engagement in the MARAC process

The main purpose of independent domestic violence advisors (IDVA) is to address the safety of victims at high risk of harm from intimate partners, ex-partners or family members to secure their safety and the safety of their children. Serving as a victim's primary point of contact, IDVAs normally work with their clients from the point of crisis to assess the level of risk, discuss the range of suitable options and develop safety plans.

They are pro-active in implementing the plans, which address immediate safety, including practical steps to protect themselves and their children, as well as longer-term solutions. These plans will include actions from the MARAC as well as sanctions and remedies available through the criminal and civil courts, housing options and services available through other organisations. IDVAs support and work over the short- to medium-term to put victims on the path to long-term safety.

They receive specialist accredited training and hold a nationally recognised qualification.

The role of the IDVA is key to the MARAC process, as not only are they often working with all MARAC victims to ensure their safety, but they are also able to ensure the victims views are fully represented at the MARAC. This ensures that any action planning keeps the victims thoughts and feelings in mind, and also consider what the victim feels will make them safe.

In some circumstances, where the IDVA is unable to engage with the victim, another agency who is working with the victim may be able to represent their views at the MARAC.

4.4d Role of the MARAC Agencies

As the MARAC is a multi-agency process, many different agencies will be engaged. The MARAC process is aimed at ensuring robust multi-agency decision making and risk management; as such, all agencies collectively share the risk management plans at MARAC and should contribute effectively.

The key responsibilities for agencies are to:

- Risk-assess domestic abuse cases and ensure referral into MARAC when appropriate.
- Ensure all staff are aware of the MARAC process and the need to share appropriate and proportionate information to help reduce risk.
- Provide accurate and timely information shares to the MARAC Administrator on request. This should be completed in line with the MARAC Information Sharing Agreement.
- Provide fully completed MARAC research forms for those cases where the agency is involved with either the victim, perpetrator, children or other connected vulnerable person. These forms can be completed by a key worker, but it is the responsibility of the agency MARAC representative to ensure these are completed and submitted on time.
- Attend formal/bespoke MARAC meetings. In some instances, agencies may be requested to attend even where they hold no information to share on the case; this will be to ensure expertise is utilised for robust risk management.
- Provide detail on what action can be taken to support the risk management plan and make suggestions on actions not just for your own agency, but for other agencies.
- Complete actions as soon as possible after the MARAC and provide updates to the MARAC Administrator. Due to capacity, the MARAC Administrator is unable to chase action updates, so it is agencies responsibility to ensure this is completed and can demonstrate their full role in the risk management of MARAC cases.

4.5 Links to other multi-agency panels

Where necessary, the Gloucestershire MARAC will ensure it links in with any other multi-agency panel that discusses cases and looks to manage risk. This may include child protection or adult safeguarding panels. Should a case meet the criteria for multiple panels, discussions should be held to agree the best approach and ensure the case is managed appropriately. It is important to note that where there is cross-over, statutory processes, such as child protection meetings, will take priority over the MARAC.

Where a case links to other ongoing panels, the MARAC chair should be consulted to ensure an agreement of approach can be met. In some circumstances, multiple panels may be held for the same case due to the differing purposes of those panels, for example, a MARAC may

take place to discuss the safety of the victim, but link into the MAPPA⁵ which will look to meet to manage the risk of the perpetrator.

The Gloucestershire MARAC will also have links to MARACs in other areas across the country. Where a MARAC victim moves to another county, or moves into Gloucestershire, MARAC to MARAC transfers are conducted to ensure the risk management plan travels with the victim.

5. Governance and Performance Management

The Gloucestershire MARAC is overseen and monitored by the MARAC Steering group. The role of this group is to:

1. To provide governance to the MARAC process, conducting regular troubleshooting and quality assurance.
2. To ensure the Gloucestershire MARAC operating protocol and information sharing protocol are fit for purpose and any resulting policy or practical issues are addressed.
3. To lead on the development of the MARAC process in Gloucestershire.
4. To ensure effective performance management of the MARAC.

The membership of the steering group is drawn from a range of member agencies of the MARAC process and is chaired by the County Domestic Abuse and Sexual Violence Strategic Coordinator.

Should any agency identify any issue with the MARAC process, they can report this into the steering group via the DASV Strategic Coordinator to be considered and resolved where possible. The Steering group will also report into the Domestic Abuse and Sexual Violence Commissioning Steering Group should any identified issues be difficult to resolve or require senior leadership intervention.

Should an agency wish to make a formal complaint about the conduct of a specific agency involved in the MARAC process, this should be made in line with that agencies complaints procedure. It is advisable that notification of any formal complaint is also copied to the steering group chair so they are able to address any generic issues within the MARAC process.

In order to ensure the continued development of the MARAC and ensure the process remains robust, the steering group will also undertake regular case audits. Results from the case audits will be incorporated in the steering group action plan to continue the development of the MARAC.

The role of the Steering group is to also oversee the performance management of the MARAC process. Regular data on the MARAC is considered by the steering group to consider the following:

- Volume of referrals
- Repeat victimisation rate

⁵ Multi-Agency Public Protection Panels (MAPPA): statutory process to manage high risk offenders.

- Multi-agency referral numbers
- Trends and patterns linked to those cases identified in the MARAC process

Should an agency wish to request data on the MARAC process, this request should be made in the first instance to the MARAC Chair or the DASV Strategic Coordinator.

6. Key MARAC Contacts

Gloucestershire MARAC Chair and Administrator

Email: MARAC@gloucestershire.pnn.police.uk

Tel: 01452 753467

Gloucestershire MARAC Steering Group

County Domestic Abuse and Sexual Violence Strategic Coordinator

Email: Sophie.Jarrett@gloucestershire.pnn.police.uk

Tel: 01452 753295

Gloucestershire Domestic Abuse Support Service (GDASS)

For advice, referral and IDVA service

Website: <http://www.gdass.org.uk>

Email: support@gdass.org.uk

Secure email: gdass.referral@gsg.cism.net

Helpdesk line: 01452 726570

Professionals line: 01452 726561

Further details on support available in Gloucestershire, and guidance documents to support agency response can be found at

www.glostakeastand.com

Gloucestershire
 Domestic Abuse, Stalking, Harassment and Honour Based Violence
DASH 2018
 (Based on 2009 original)
Risk Assessment Form

Level of Risk SELECT _____

Name of Person Completing:	
Date of completing:	
Date of incident:	
Police incident No. (if not known please state):	
OIC (if not known please state):	

Victim Details						
Surname						Forename
DOB						
Address						
	Own Occ. <input type="checkbox"/> /	Private rent <input type="checkbox"/>	/Housing Assoc. <input type="checkbox"/>			
Postcode	Male/Female			SELECT		
Contact No						
Ethnic Self Classification	16+1 code					
Officer perceived ethnicity	6+1 code					
Children						
(PLEASE MAKE SURE THAT THESE BOXES ARE MARKED YES/NO – INFO SENT TO SOCIAL CARE AND FORMS PART OF ANY RISK ASSESSMENT FOR THEM IF CONFIRMED TO BE PRESENT)						
	Name	DOB	School	GP	Present During Incident?	Resident at Address?
1					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4					Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Perpetrator Details

Surname _____ **Forenames** _____
DOB _____
Address _____
Postcode _____ **Male/Female** **SELECT**
Contact _____
No _____
Ethnic Self Classification **16+1 code** _____
Officer perceived ethnicity **(6+1 code)** _____
Is Perpetrator Parent To _____
Child(ren) above _____
Relationship Spouse Ex-spouse Partner Ex-partner
 Other Specify:

Vulnerable Adults Present

Do Not Include 'The Victim' of the Domestic Abuse unless they meet the definition* below

Any professional who becomes aware of a vulnerable adult who is being abused should make an Alert to the **Adult Helpdesk** of Gloucestershire County Council on **01452 426868** in office hours. Out-of-hours service is provided by the Emergency Duty Team. The Alert will be made within 24 hours.

Full Name	Date of Birth	*Nature of vulnerability (A vulnerable adult is 18 or over and is, or may be, in need of community services due to age, illness or mental or physical disability AND who is, or may be, unable to take care of himself/herself or protect himself/herself from significant harm or exploitation).

CURRENT SITUATION

The context and detail of what is happening is very important.

The questions highlighted in blue bold are high risk factors.

Tick the relevant box and add comments wherever possible to expand and add context.

1	Has the current incident resulted in injury? (please state what and whether this is the first injury)	YES <input type="checkbox"/>		NO <input type="checkbox"/>
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2	Are you very frightened? Comment:	YES <input type="checkbox"/>		NO <input type="checkbox"/>
----------	---	---------------------------------	--	--------------------------------

What are you afraid of? Is it further injury or violence?
(Please give an indication of what you think(name of abuser(s)).... might do and to whom)

Kill: You Children Other

3	Further injury and violence: You <input type="checkbox"/> Children <input type="checkbox"/> Other <input type="checkbox"/>
----------	---

Other (please clarify):
You Children Other

ADDITIONAL STALKING QUESTIONS	6	<ul style="list-style-type: none"> Has (...) tried to be near you? Such as approach you, come to your home, come to your work. 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Has (...) entered your house without your permission? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Has the stalking become worse in recent days/weeks? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Has (...) reached a point where they are expressing they have nothing to lose? For example 'I have no other way out', 'If I can't have you no one can' etc 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Are there any situations where you can't avoid having contact with (...)? Such as work, live close by, child contact. 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Has (...) previously stalked you or someone else? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		<ul style="list-style-type: none"> Has (...) experienced any significant changes in their life that might cause them stress/upset? For example, loss of loved one/job/relationship 	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Children/Dependants
(if no children/dependants, please go to the next section)

9	<p>Are you currently pregnant or have you recently had a baby in the past 18 months?</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<p>Is anyone in the household pregnant? Yes or No If YES please identify who is pregnant and what their expected birth date is?</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
10	<p>Are there any children, step-children that aren't in the household? Or are there other dependants in the household (i.e. older relative/vulnerable adult)?</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
11	<p>Has (.....) ever hurt the children/dependants? Comment:</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
12	<p>Has (.....) ever threatened to hurt or kill the children/dependants? Comment:</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Domestic Violence History

13	<p>Is the abuse happening more often?</p>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
----	--	---------------------------------	--------------------------------

⁶ Additional questions added to support CRU in utilising SASH tool when required.

14	Is the abuse getting worse?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
15	Does (.....) try to control anything you do and/or are they excessively jealous? <i>(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 behaviour)</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
16	Has (.....) ever used weapons or objects to hurt you?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
17	Has (.....) ever threatened to kill you or someone else and you believed them?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
18	Has (.....) ever attempted to strangle/choke/suffocate/drown you? <i>(Consider when was the last time this happened, how frequently etc)</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
19	Does (....) do or say things of a sexual nature that makes you feel bad or that physically hurt you or someone else? <i>(Please specify who and what)</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
20	Is there any other person that has threatened you or that you are afraid of? <i>(If yes, consider extended family if honour based violence. Please specify who)</i>	YES <input type="checkbox"/> Expand Below	NO <input type="checkbox"/> To Q21
If Yes to 20	<ul style="list-style-type: none"> • Truanting – if U18 is victim truanting? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
ENHANCED DASH	<ul style="list-style-type: none"> • Self-harm – is there evidence of self harm? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> • House arrest and being 'policed at home' – is the victim being kept at home or their behaviour/activity being policed? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> • Fear of being forced into an engagement/marriage – is the victim worried that they will be forced to marry against their will? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> • Pressure to go abroad – is the victim fearful of being taken abroad? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> • Isolation – is the victim very isolated? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> • A pre-marital relationship – is the victim believed to be in a relationship that is not approved of? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>

	<ul style="list-style-type: none"> Attempts to separate or divorce (child contact issues) – is the victim attempting to leave the relationship? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> Threats that they will never see the children again – are there threats that the child(ren) will be taken away? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	<ul style="list-style-type: none"> Threats to hurt/kill – are there threats to hurt or kill the victim? 	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Additional Information:			
	Do you know if (.....) has hurt anyone else? <i>(children/siblings/elderly relative/stranger, for example. Consider HBV. Please specify who and what)</i>		
21	Children <input type="checkbox"/> Another family member <input type="checkbox"/> Someone from a previous relationship <input type="checkbox"/> Other <i>(please specify)</i> <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
22	Has (.....) ever mistreated an animal or the family pet?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Abuser(s)			
23	Are there any financial issues? For example, are you dependent on (.....) for money/have they recently lost their job/other financial issues?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
24	Has (.....) had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life? <i>(Please specify what)</i> Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> Mental Health <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
25	Has (.....) ever threatened or attempted suicide?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Has (.....) ever breached bail/an injunction and/or any agreement for when they can see you and/or the children? <i>(Please specify what)</i>		
26	Bail conditions <input type="checkbox"/> Non Molestation <input type="checkbox"/> Occupation Order <input type="checkbox"/> Child Contact arrangements <input type="checkbox"/> Forced Marriage Protection Order <input type="checkbox"/> Other <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

27 Do you know if (.....) has ever been in trouble with the police or has a criminal history?
 (If yes, please specify) YES NO

DA Sexual violence Other violence Other (please specify)

28 Has the victim or perpetrator access to lawfully held and licensed weapons. YES NO

If Yes to 28 • Please provide full details – Weapons, Ammunition, Certificate Number etc.

Other relevant information (from victim or professional) **which may alter risk levels.**

Describe: (consider for example victim's vulnerability - disability, mental health, alcohol/substance misuse and/or the abuser's occupation/interests-does this give unique access to weapons i.e. ex-military, police, pest control) or is there serial offending?

Victim Safety

Does the victim want contact from Gloucestershire Domestic Abuse Support Service? YES NO
 GDASS offer a free and confidential service to victims of domestic abuse
 01452 726570. www.gdass.org.uk

If yes, please advise the victim that the information they have provided on this form will be shared with GDASS

For victims of stalking, please refer them to the National Stalking Helpline 0808 802 0300. They will offer advice, support and triage to local services. More details on local support can be found at www.glostakeastand.com

FOR INFORMATION

National Domestic Violence Helpline is available 24 hours a day, 7 days a week for victims of domestic abuse
0808 2000 247 (24 hours)
www.womensaid.org.uk

DASH Risk Assessment

For **STANDARD/MEDIUM risk DASH (Domestic Abuse)** please refer to GDASS at gdass.idva@gsg.cjism.net

For **STANDARD/MEDIUM risk DASH (Stalking)** please refer to National Stalking Helpline 0808 802 0300 or www.glostakeastand.com for local support options.

If the case is assessed as **HIGH risk Domestic Abuse**, please advise the victim that the case may be referred to **MARAC (regardless of consent)**, and explain what the MARAC is. YES

If the case is assessed as **HIGH risk Stalking**, please advise the victim that the case may be referred to **Stalking Clinic (regardless of consent)**, and explain what the stalking clinic is. YES

'Multi-Agency Risk Assessment Conferences (MARAC's) and Stalking Clinics are meetings where information about HIGH risk domestic abuse victims (those at risk of murder or serious harm) is shared between local agencies to draw up a coordinated safety plan that helps victims with options to keep them and their children safe'.

For **HIGH risk DASH (Domestic Abuse)** please refer to MARAC at marac@gloucestershire.pnn.police.uk and complete section below to provide a summary of the case.

For **HIGH risk DASH (Stalking)** please refer to Stalking Clinic at stalkingclinic@gloucestershire.pnn.police.uk and complete section below to provide a summary of the case.

Risk Management Framework

This is based on the Offender Assessment System (OASys) developed by the Prison and Probation Services definitions of what constitutes standard, medium, high risk.

Please use your professional judgement to categorise the risk level.

As a guide, standard risk cases are usually scored as anything under 7, medium between 7-14 and High risk 14 or above. Scoring is based on the numbered questions, with additional questions enhancing understanding of risk and influencing your professional judgement. **Your professional judgement is the overriding factor however, so this must be at the forefront when categorising risk.**

Risk To Victim and Family:		
STANDARD <input type="checkbox"/>	MEDIUM <input type="checkbox"/>	HIGH <input type="checkbox"/>
Current evidence does not indicate likelihood of causing serious harm .	There are identifiable indicators of risk of serious harm. The offender has the potential to cause serious harm but is unlikely to do so unless there is a change in circumstances, for example, failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse.	There are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious . Risk of serious harm (Home Office 2002 and OASys 2006): <i>'A risk which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible'</i> .

Under what basis has the client met the high risk threshold for MARAC:		
Visible high risk (from DASH): <input type="checkbox"/>	Professional Judgement of high risk: <input type="checkbox"/>	Escalation in severity and/or frequency: <input type="checkbox"/>
Please indicate under which lawful basis you are sharing information (please see MARAC guidance at www.glostakeastand.com)		
Child Protection Act 2004: <input type="checkbox"/>	Pt.3 Schedule 8 Data Protection Act 2018 (Safeguarding): <input type="checkbox"/>	Common Law: <input type="checkbox"/>
S.115 Crime & Disorder Act 1998: <input type="checkbox"/>	Human Right Act 2004: <input type="checkbox"/>	The Care Act 2004: <input type="checkbox"/>
Data Protection Act 2018: Article 6: Article 9:		
Please ensure the information you share is relevant, adequate and necessary to achieve the purpose (Safeguarding), proportionate and will not significantly increase the risk to client/family.		

COMPULSORY SECTION. Please provide a Summary of the case for the MARAC/Stalking Clinic Referral and any other relevant information. If you are referring based on your professional judgement of high risk, please provide details on why you believe the case is high risk:



APPENDIX 2: GDASS DASH COMPLETION GUIDE

Question number	Question	Historical / Current	Include the following information:
1	Has the current incident resulted in injury?	Currently only	<p><u>Current</u> incident only. Otherwise select 'No'</p> <p><u>Note previous injuries regardless</u> (FIRST/WORST/LAST) include approx. dates of injuries and any medical treatment received.</p>
2	Are you very frightened?	Currently only	<p>Most people will say they are scared, but we need to know what the worst thing they think could happen is – don't give them the option, let them tell you.</p> <p>Who they feel the risk is to i.e. Children/Themselves/New partners etc.</p> <p>Use Q3 to record this.</p>
3	What are you afraid of? Is it further injury or violence?	Currently only	As above
4	Do you feel isolated from family/ friends i.e. does (name of abuser(s).....) try to stop you from seeing friends/family/Dr or others?	Currently only	Has the AP <u>made</u> them feel isolated?
5	Are you feeling depressed or having suicidal thoughts?	Currently only	Is this diagnosed? If so, are they receiving medication for this?
6	Have you separated or tried to separate from (name of abuser(s)....) within the past year?	Currently only	<p>Within the past year only.</p> <p>How many times?</p> <p>When was the last time?</p> <p>What makes them go back, in their opinion?</p>
7	Is there conflict over child contact?	Currently only	<p>Note any child contact arrangements.</p> <p>Are these court ordered?</p>
8	Does (.....) constantly text, call, contact, follow, stalk or harass you?	Currently only	<p>If texts/calls, how many approx. a day?</p> <p>Are they possibly being tracked?</p>

			Why do they feel they are being watched? Is this feasible?
9	Are you currently pregnant or have you recently had a baby in the past 18 months?	Currently only	Within last 18 months only.
10	Are there any children, step-children that aren't in the household? Or are there other dependants in the household (i.e. older relative/vulnerable adult)?	General	Remember other vulnerable adults.
11	Has (.....) ever hurt the children/dependants?	Include Historical	This is referring to direct physical abuse only. Including inappropriate chastisement. Note down if there is significant emotional abuse but select 'No'.
12	Has (.....) ever threatened to hurt or kill the children/dependants?	Include Historical	As above.
13	Is the abuse happening more often?	Currently only	More often. So in what way has it escalated? How regularly is it happening now compared to previously?
14	Is the abuse getting worse?	Currently only	This refers to increase in severity only. Primarily relating to physical incidents. How does the current abuse compare to previously?
15	Does (.....) try to control anything you do and/or are they excessively jealous?	Currently only	Tracking – Why do they feel they are being watched? Is this feasible? What aspects of their life do they feel they have no control over? Consider parenting
16	Has (.....) ever used weapons or objects to hurt you?	Include Historical	This can include normal household objects. If AP have threatened to use a weapon select 'No' but note this with which weapon
17	Has (.....) ever threatened to kill you or someone else and you believed them?	Include Historical	The key to this is whether they believed the threat. Do they think this is a real possibility? Approx. dates of incidents. Most recent date.
18	Has (.....) ever attempted to strangle/choke/suffocate/drown you?	Include Historical	Did they lose consciousness? Were threats made at the time? How regularly is this happening?

			<p>Are they using objects to do this? i.e scarves/belts.</p> <p>Approx. dates of incidents. Most recent date.</p>
19	Does (....) do or say things of a sexual nature that makes you feel bad or that physically hurt you or someone else?	Currently only	<p>If this is not happening currently select 'No'.</p> <p>Note any previous incidents.</p>
20	Is there any other person that has threatened you or that you are afraid of?	Currently only	<p>Always consider HBV.</p> <p>Get details (name/Address/DOB if possible) of anyone who poses an additional risk. This is especially important if HBV is suspected.</p>
21	Do you know if (.....) has hurt anyone else?	Include Historical	<p>Consider Clare's Law.</p> <p>Are these DV related?</p>
22	Has (.....) ever mistreated an animal or the family pet?	Include Historical	<p>This includes inappropriate chastisement</p> <p>Do they currently keep animals?</p> <p>Has a report been made to police or RSPCA?</p>
23	Are there any financial issues? For example, are you dependent on (.....) for money/have they recently lost their job/other financial issues?	Currently only	<p>How is money earned?</p> <p>What is it spent on?</p> <p>Can the victim reasonably live on their income?</p> <p>Should allegations management be considered? (Usually high risk only).</p>
24	Has (.....) had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life?	Include Historical	<p>Are they currently receiving any medical treatment or counselling for these?</p> <p>Approx. how much is taken? Is this a normal amount for this person?</p> <p>How does it affect their behaviour?</p>
25	Has (.....) ever threatened or attempted suicide?	Include Historical	<p>Although it says include historical, consider mainly throughout this relationship.</p> <p>Include approx. dates and the victim's perceived reasons for these.</p>

			Was medical interventions used or sought.
26	Has (.....) ever breached bail/an injunction and/or any agreement for when they can see you and/or the children?	Include Historical	Are there convictions for this? Do they know whether there have been breaches relating to offences against others?
27	Do you know if (.....) has ever been in trouble with the police or has a criminal history?	Include Historical	Consider Clare's law.
28	Has the victim or perpetrator access to lawfully held and licensed weapons.	Currently only	If considered high risk, this must be reported to police immediately.
Summary of MARAC Referral and any other relevant information:			<p>Use this box to outline <u>the first, worst and last incidents</u>.</p> <p>If you feel this is high risk, use this box to clearly outline exactly why you feel there is <u>an immediate risk of significant harm or murder to the victim</u>. Use bullet points.</p> <p>If you feel it is high risk but are not referring to a MARAC, use this box to explain why. For example, case may already be held by MARAC or client is moving to refuge. In the case where client is moving to refuge request a MARAC to MARAC transfer from MARAC Administrator after discussion with your line manager.</p> <p>List any agencies or workers already involved, including best method of contact.</p> <p>Are the children, if any, known to Social Care.</p>



APPENDIX 3: GDASS SAFETY ADVICE SHEET

SAFETY PLANNING AND ADVICE

Keeping Safe at home

- Plan escape routes out of your property, if the perpetrator comes in the front door, how do you get out?
- Set up a code word with your friends and family, if they call they know when you're in trouble.
- Keep with you any important and emergency telephone numbers: e.g. Police DV unit, 24 hour domestic abuse helplines. Emergency contacts.
- Are there neighbours you can trust? If so ask them to contact the police if they hear anything
- Pack an emergency bag for yourself & the children. Hide it somewhere safe away from the house, maybe with a friend you can trust
- Keep a small amount of money on you at all times – including change for the bus or phone.
- Keep your mobile phone on you and charged, with credit, at all times. If this is not possible, can you hide one somewhere?
- If you suspect he or she is about to become violent, try avoid the kitchen or garage where there are likely to be knives or other weapons.
- Avoid locking yourself in small rooms. Always try and get out of the property.
- Give your friends or family a spare key to your house, if you are locked in they can help you escape.

If you have recently left your property

- Does your new property have secure windows and doors? If not speak to GDASS or your landlord about making it more secure.
- Avoid places where you are isolated or alone or places you used to go with the perpetrator, at least in the immediate period of separation, if possible.
- Alter your routine as much as you can. E.g. alter your working hours, walks home etc
- If you have any regular appointments that your partner knows about e.g. Hospital, Doctor etc, try to change your appointment time and/or the location of the appointment.
- Try to choose an alternative route or mode of transport when approaching or leaving places you cannot avoid. E.g. work/schools etc.
- Consider informing your employer or others at your place of work – particularly if you think your partner might try to contact you there.
- Mobile phones can be traced so try to change your SIM card or even better get a new pay as you go phone.
- Some mobile phones, particularly iPhone, have tracking programmes attached. Please refer to your manual or change your handset if you are not sure whether this could affect your phone.
- If you do wish to telephone your partner, ensure it is from a number withheld phone. Dial '141' before typing the number to withhold it.
- Avoid using shared credit or debit cards, as if your partner saw the statements it would show where you have been.
- Your support worker can help you open a new account if you need to.
- Make sure your address does not appear on any Court papers.
- Talk to your children about the need to keep your whereabouts confidential. Especially if they are having contact with the perpetrator.
- Ensure schools have any relevant court orders relating to the children, or a photograph of the perpetrator if they have been told by a court that they are not to have contact.

Packing an Emergency Bag

Having an Emergency Bag means that if you had to flee your house you can take some basic belongings with you easily reducing the need to return to the property when it may not be safe to do so.

What to Pack:

- Some form of identification.
- Passports, Visas and work permits.
- Money, savings books, cheque book, credit/debit cards.
- Keys for the House, Car, Work etc. (You could get additional keys cut and put them in your bag)
- Child, Family Tax and any other benefit information
- Driving licence & car registration documents.
- Prescribed medication/repeat prescription.
- Clothing & toiletries for you and the children.
- Address book & emergency contact numbers.
- Personal items (photos etc.) or favourite toys for your children.
- Copies of any legal documents e.g. injunctions

Do not put yourself in danger getting these items, pack what you can; there may be opportunities to get things later on.

Social Networking

Facebook:

How to **block** someone from contacting you:

- Choose 'privacy shortcuts', this is the second button in from the right on the blue bar at the top.
- Choose 'How do I stop someone from bothering me?'
- Write email address or user name in the box – select 'Block'

Blocking someone prevents them from being able to view your page or searching for you from their username or email address. They will be able to search from someone else's account if they want to.

General privacy/security settings:

- 'Privacy shortcuts' – 'See more settings'

This then allows you to stop people being able to find you if they 'google' you and choose who can add you as a friend.

- Select 'Security' from the left hand list

This allows you to choose your security settings for your profile.

Twitter:

General privacy/security settings:

- Choose the icon second in from the right on the main toolbar, 'settings'.
- Choose 'Security and Privacy' from the list of options on the left hand side of the page.

You can then choose whether you allow people to follow you without verification and who can tag you in pictures etc.

- The 'settings' icon, as above, also allows you to select to deactivate your account at the bottom of the page.

Instagram:

How to **block** someone from contacting you:

- Open mobile app. Click on a person's name if they are showing on your timeline, or use the search function (the magnifying glass at the bottom of the screen) to find them by name.
- Open their profile. Select the three dots in the top right hand corner.
- Choose 'block'. Then choose 'block' on the 'are you sure...' message.
- To hide your story from certain people, also choose 'hide your story'. Although if they are blocked they should not be able to see this anyway.

General privacy/security settings:

- Open mobile app, open your profile by selecting the person on the bar at the bottom of the screen.
- Select the three dots in the top right hand corner
- Scroll down to 'Private Account'. Press the button to turn it on. It is blue when on.

This then means that only your friends can see your profile and you have to 'accept' people who wish to follow you. Hashtags will not work in the wider network in this mode.

Snapchat:

How to **block** someone from contacting you:

- Open mobile app. Screen should show front facing camera.
- Select the search function. Find contact then click on them.
- Choose 'Block' or 'Remove friend' from the left hand side of the page.

To stop someone viewing your story:

- Open mobile app. Screen should show front facing camera.
- Swipe right then select the settings cog.
- Select 'custom' under 'Who can view my story' then choose which friends you are happy to be able to view it.

Someone who is blocked should not be able to view your story.

Whatsapp:

How to **block** someone from contacting you:

- Open mobile app. Choose conversation (single person only).
- Select the three dots in top right hand corner. Then choose 'More'. Select 'Block'

How to email chat history:

- Open mobile app. Choose conversation
- Select the three dots in top right hand corner. Then choose 'email chat'. Then following instructions and enter email address.

This is useful if you would like to block someone but need a record of the chat history. Or if you would like to send a chat history to police, your support worker or another professional. You cannot redact this function and the whole chat history will be sent.

To leave a group:

- Open mobile app. Choose group conversation.
- Select the three dots in top right hand corner. Select 'group admin'.
- Choose 'Exit group'. Then choose 'Delete group'

Do not accept friend requests from someone you do not know, even if they share mutual friends. Ensure that Location Settings are turned off on your phone. Updating your social networking with these on will alert your followers/friends as to where you are. Location settings vary phone to phone, please check your manual if you are not sure how to do this.

APPENDIX 4: LEGISLATION FOR SHARING INFORMATION

Full details on the information sharing processes for MARAC can be found in the MARAC Information Sharing Agreement at www.glostakeastand.com

Information is exchanged at the MARAC on the basis of the following (allowing information to be shared when the victim has not consented):

- Crime and Disorder Act 1998: purpose of prevention and detection of crime. Section 115 details which 'relevant authorities' have the power (but not a legal duty) to share information if it is necessary for the purposes of any provision under the Crime and Disorder Act.
- Data Protection Act 2018:
 - Part 3, schedule 8: Safeguarding of children and of individuals at risk. This further empowers organisations to process personal data for safeguarding purposes lawfully, without consent: this would mean sharing information where there is substantial public interest and necessary for the purpose of protecting an individual from neglect or physical, mental or emotional harm; or protecting the physical, mental or emotional well-being of an individual where the individual is either:
 - A child or adult at risk
 - Has care and support needs
 - Is experiencing or at risk of neglect or any type of harm
 - Is unable to protect themselves.
 - This still expects the possibility of obtaining consent, unless it would prejudice the safeguarding purpose.
 - Special Category Data: to lawfully process this data, you must identify a lawful basis under article 6 and a separate condition under Article 9. These do not have to be linked.
 - Under Article 6 MARAC information sharing and processing will most often fall under:
 - Public Interest
 - Vital Interests: This lawful basis for sharing information covers where it is conducted to protect someone's life.
 - Legitimate Interests: This lawful basis for sharing information requests that you consider whether you are pursuing a legitimate interest that the processing of data is necessary for that purpose and the individual's interests don't override the legitimate interests.
 - Under Article 9 MARAC information sharing and processing will most often fall under:
 - Explicit consent from the victim
 - Substantial Public Interest
- Human Rights Act: Articles 2&3: right to life, right to be free from torture or inhuman or degrading treatment.
- The Care Act 2014: Prevention of abuse and Neglect.
- Mental Capacity Act 2005: Person lacks the mental capacity to make the decision regarding consent.
- Common Law: overriding public interest.

APPENDIX 5: MARAC RESEARCH FORM

MARAC Research Form			
Ensure information sharing is relevant and proportionate			
Date completed:		Date of MARAC:	
Name of victim		DOB:	
Address:			
Alleged Perpetrator:		DOB:	
Address:			
Dependants (u 18) <i>Include DOB</i>	1.		
	2.		
	3.		
	4.		
	5.		
Others living at address:			
Agency:			
Key Worker: (if applicable)		Contact:	
Form completed by:		Contact:	
Completed regarding	Victim <input type="checkbox"/>	Alleged Perpetrator <input type="checkbox"/>	Other (please specify)
If you are/have been working with victim and alleged perpetrator please complete a separate form for each.			
Is the case currently open to your agency:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Details of contact with person: <i>(Please detail last contact and whether or not, if applicable, they have engaged with the service)</i>			
Note any recent attitude, behaviour and demeanour, including any changes to these:			
Highlight any relevant information relating to current risk: <i>(Including your professional judgement and any potential triggers)</i>			
Who do you feel is at risk? <i>(Include reasons why)</i>			
What are the greatest priorities in regard to this persons safety?			
Actions required from MARAC: <i>(Please include any actions you wish to receive from this process)</i>	1.		
	2.		
	3.		
	4.		

Do you have any other information which would be useful:

For example:

- Previous attendances
- Others who may be at risk
- Relevant history
- Risks to staff

**Please send the completed form to the MARAC Administrator secure address on:
marac@gloucestershire.pnn.police.uk**