



**Kent  
Police**

**MULTI AGENCY RISK ASSESSMENT  
CONFERENCE  
(MARAC)**

**IMPLEMENTATION GUIDE  
AND PROTOCOL**

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# Introduction

This guidance document has been produced by Kent Police, Public Protection Unit,

Its main purpose is to provide Area BCU Public Protection Units with a consistent framework upon which to

- Share information
- Implement and conduct Multi-Agency Risk Assessment Conferences (MARAC) for cases involving domestic violence.

Kent Police has utilised national guidance for an Assessment Framework for Information Sharing (AFIS) with partner agencies for several years. This process meets the recommendations of the Bichard Report and so will continue.

The Multi-Agency Risk Assessment Conference originated in Cardiff and is recognised by the Home Office as best practice.

## Acknowledgements

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Chief Superintendent Mick Lay and Detective Inspector Jayne Shackleton of Greater Manchester for their assistance and permission to use their MARAC documentation in developing our own guidance document.

CAADA (Co-ordinated Action Against Domestic Violence) – implementation programme guidance document that has assisted in the formation of this document.

PS Melani Morgan of Southampton Community Support Team who advised us of police procedures in identifying risk, managing risk and the referral to MARAC.

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## *What is MARAC?*

MARAC is a multi-agency response to tackling Domestic Abuse (DA).

In a single meeting, a Domestic Abuse MARAC combines up to date risk information with a comprehensive assessment of a victim's needs and links those directly to the provision of appropriate services for all those involved in a case: victim, children and perpetrator.

### *What are the aims of the MARAC?*

- To share information to increase the safety, health and well being of victims – adults and their children;
- To determine whether the perpetrator poses a significant risk to any particular individual and/or to the general community; also professional staff involved with DA cases
- To jointly construct and implement a risk management plan that provides professional support to all those at risk and that reduces the risk of harm
- To reduce repeat victimisation;
- To improve agency accountability
- Improve support and safety for staff involved in high-risk DA cases.

The responsibility to take appropriate actions rests with individual agencies; **it is not transferred to the MARAC.**

The role of the MARAC is to facilitate, monitor and evaluate effective information sharing to enable appropriate actions to be taken to increase public safety.

## *What Underpins the MARAC?*

In order for a MARAC process to work effectively there needs to be a common understanding of risk and the risk assessment process among all the participants. (see insert 1 Page 23 Multi-Agency Risk Identification Tool)

### ***Risk Assessments of Victims and Dependants***

The development of specific instruments to assess risk in domestic abuse cases is relatively new.

The instruments break down into 2 main categories:

- Those for use with perpetrators which seeks to establish the risk of re-offending and are principally used in the Criminal Justice System.
- Those for use with victims that assess the risk of homicide and are used by service agencies seeking to support the victim.

This is the risk assessment that informs the MARAC process. The analysis of risk factors associated with domestic homicide has been led by the Metropolitan Police Service and South Wales Police, based in both cases on the analysis of a combination of data from very serious cases including domestic homicides, serious assaults, Part 8 Reviews of child deaths and life threatening incidents involving children.

Based on this Kent Police has developed a checklist of risk factors, now known as SPECSS+ DA Risk Assessment Indicators.

### **Initial Risk Assessment /DA Risk Assessment Indicators**

It should be clear from the outset that there is not an expectation that those officers identifying the initial risk indicators will have high levels of knowledge about Domestic Abuse and its assessment.

Initial risk indicators are for the initial response officer to report what they see or what is disclosed to them, which will enable Specialist Domestic Abuse officers, statutory and voluntary partner agencies to undertake a more informed analysis. Identification and management of risk is vital to provide immediate co-ordinated intervention and prevention from harm.

Established risk factors include:

- Separation or child contact issues;
- Pregnancy or new birth;
- Escalation in violence;
- Consider Isolation
- Stalking and harassment
- Sexual Assault;

- Vulnerable adult – including mental health issues;
- Other factors – professional experience/judgement

***Other factors to be considered by DA Officers***

In addition to the established risk factors all risk assessments should take full account of whether the suspect has:

- Injured children or threatened or attempted to harm children
- Overtly threatened or attempted to harm self or others
- Damaged property or has threatened or harmed pets
- Regularly left the scene before the arrival of the police
- Threatened or attempted to abduct the children or take them abroad
- Minimised or denied the violence
- An attitude of dominance or shows no motivation to change
- A background of violence or a criminal career
- Violated agreements or orders on contact and non-contact
- Cultural awareness

If the responding officer deems the risk to be significant, then they are without delay to inform their supervisor, who will have overall responsibility for ensuring the incident is dealt with appropriately and if required immediate measures are put into place to reduce/manage risk.

The officer undertaking the initial identification of risk indicators and supervisor will ensure that the assessment runs inline with Kent Police Force Policy.

The officer will secure as much information as possible against the DA Risk Indicators criteria.

The Specialist Domestic Abuse Officer/Supervisor will then be responsible for reviewing the contents of the DA Risk Assessment Indicators daily and will take into consideration the following factors:

*Dangerousness* needs to be broken down and considered as follows

- ***Harm:*** the amount and type of violence being predicted by the risk factors
- ***Risk:*** the likelihood that harm will occur. This is an estimate that will change over time and context
- ***Clinical Assessment:*** The clinical assessment of dangerousness is based on an individual practitioner's judgement of a situation
- ***Actuarial Assessment:*** This involves the use of risk factors to compute the probability of harm occurring. In Domestic Abuse the risk factors identified and used in actuarial risk assessment relate to the likelihood of homicide occurring

Notification to a MARAC is based principally on an actuarial assessment of risk. The work of the MARAC permits a comprehensive clinical overlay to this.

The Specialist Domestic Abuse Officer will refer to MARAC all cases assessed as High Risk using a MARAC 1 Notification Form (see Insert 4 page 34).

There are some key points that participants in a MARAC will need to agree locally. They are:

- The process for screening for Domestic Abuse by professional parties and consequent notification.
- The fact that all the questions must be asked and not just selected questions
- What is the threshold for risk at which one must breach client confidentiality
- How and with whom they share risk information

*As practitioners, we owe a duty of care to our clients since they have become our clients precisely because a propensity to harm exists. We need to make defensible rather than defensive decisions.*

*'Defensive beliefs and reactive approaches to risk (managing the harm once it has occurred) will increasingly be challenged by developments in risk assessment and risk management. The emphasis is moving to decision-making processes and their management' (CAARDA) (Co-ordinated Action Against Repeated Domestic Abuse)*

We would suggest that the MARAC presents many of the advantages of a consistent use of risk factors to compute the risk of harm occurring complemented by the clinical judgement of multiple practitioners.

## *Information Sharing with Partner Agencies*

### *The Purpose*

To provide guidance to Specialist Domestic Abuse Officers concerning the method and responsibility for sharing information with Local Authority Children and Family Services, Health Visitors, Outreach, Victim Support Services and Midwives.

### *Why?*

Research and experience have shown repeatedly that keeping children and pregnant women safe from harm requires professionals to share information regarding

- A child's health and development or exposure to possible harm
- A parent who may need help or be unable to care for a child adequately or safely
- Those who may pose a risk of harm to a child
- Provision of appropriate services to adult and children
- Our duties to protect children or vulnerable adults from harm balanced with their general duty of care towards other members of their household.

**A copy of the Domestic Abuse information sharing partner agencies protocol can be found on page 30. (See Insert 3)**

## *The Kent Police Process*

Police Officers who attend a Domestic Abuse incident where there is a child/children or vulnerable adult residing in the household, will record the information in line with Force Policy.

The Area BCU Public Protection Unit (PPU) will assess the risk assessment indicators by completing form 3365

Where the Assessment Framework for Information Sharing (AFIS) threshold is met see page 11. The Area BCU PPU Supervisor will e-mail form 3368 (Child or Vulnerable Adult coming to Police notice form) see insert 2 page 28 to the relevant agencies in line with Kent Police Force policy.

Upon receipt of Form 3368 the partner agencies will determine the level of risk to the victim by applying the Multi-Agency Risk Assessment Tool.

For this process the relevant party will identify an e-mail address/securely located fax address for receipt of the 3368 form.

The receiving agency will then, by e-mail, acknowledge receipt to the Area BCU Public Protection Unit.

The nominated representative within the NHS Trust has responsibility for identifying and allocating the report to the relevant Health care professional, where children are concerned.

The 3368 form is intended to raise agency awareness of a situation that they would not or might not be aware of. It is important however that ***no agency makes assumptions about the action another party to the protocol may take.*** If on receipt of the 3368 form the information raises concern with the agency, they are responsible for considering whether a referral under any procedures should be made to the local authority.

Where the receiving agency requires more information, contact can be made with the relevant agency deemed to be in possession of that information.

The agencies will assume responsibility for the security of the referral form received by them.

Each agency should nominate a designated person that will collect, process, store and disclose information held as appropriate, within the terms of this agreement and the relevant legislation.

# *Assessment Framework for Information Sharing (AFIS)*

## ***When do we share information?***

### ***Who do we share that information with?***

Information involving incidents of Domestic Abuse will be shared with children and family services and Health Visitors where the incident has led to police attendance or information and involves any of the following:

- When either the victim or alleged/perpetrator is known to be pregnant **OR**
- When there is a child abuse marker (CA) on the address irrespective of any severity of the incident **OR**
- Where a child under the age of 18 years is living in the household.

### **AND**

- A child has made the call for assistance

### **OR**

- It is the third reported incident within the previous 12 months (whether the child was present or not at the time of the incident)

### **OR**

- The incident is so serious that the Specialist Domestic Abuse Officer believes or feels that the information should be shared.

Information about Domestic Abuse involving **vulnerable adults** will be made to the Local Authority Vulnerable Adults Co-ordinator, Learning Difficulties Team or the most appropriate agency relevant to the incident.

- If it is the third incident within the previous 12 months

### **OR**

- If the circumstances of the incident are so serious that the Specialist Domestic Abuse Officer feels or believes information should be shared.

## *DA Risk Assessment Indicators and MARAC Notification*

*In this Section we look at: The DA Risk Assessment Indicators checklist as a basis for taking a case to MARAC, who does this?*

### ***The DA Risk Assessment Indicators***

When we talk about DA risk assessment indicators in this document, we are referring to the SPECSS+ risk assessment used by Kent Police and contained within the Kent and Medway Multi Agency Risk Identification Tool. these are the key risk factors to be considered with victims. (See Insert 1 page 23).

### ***Who does it?***

The formal risk assessment is normally carried out by the agency that receives the initial information or details of the Domestic Abuse incident or case. In most cases this is the police given that they receive the vast majority of crisis calls, although many different agencies may identify a client as suffering Domestic Abuse including the A&E department, Social Services and Health Visitors. In some cases it may be appropriate that the Specialist Domestic Abuse Officer review the initial risk assessment.

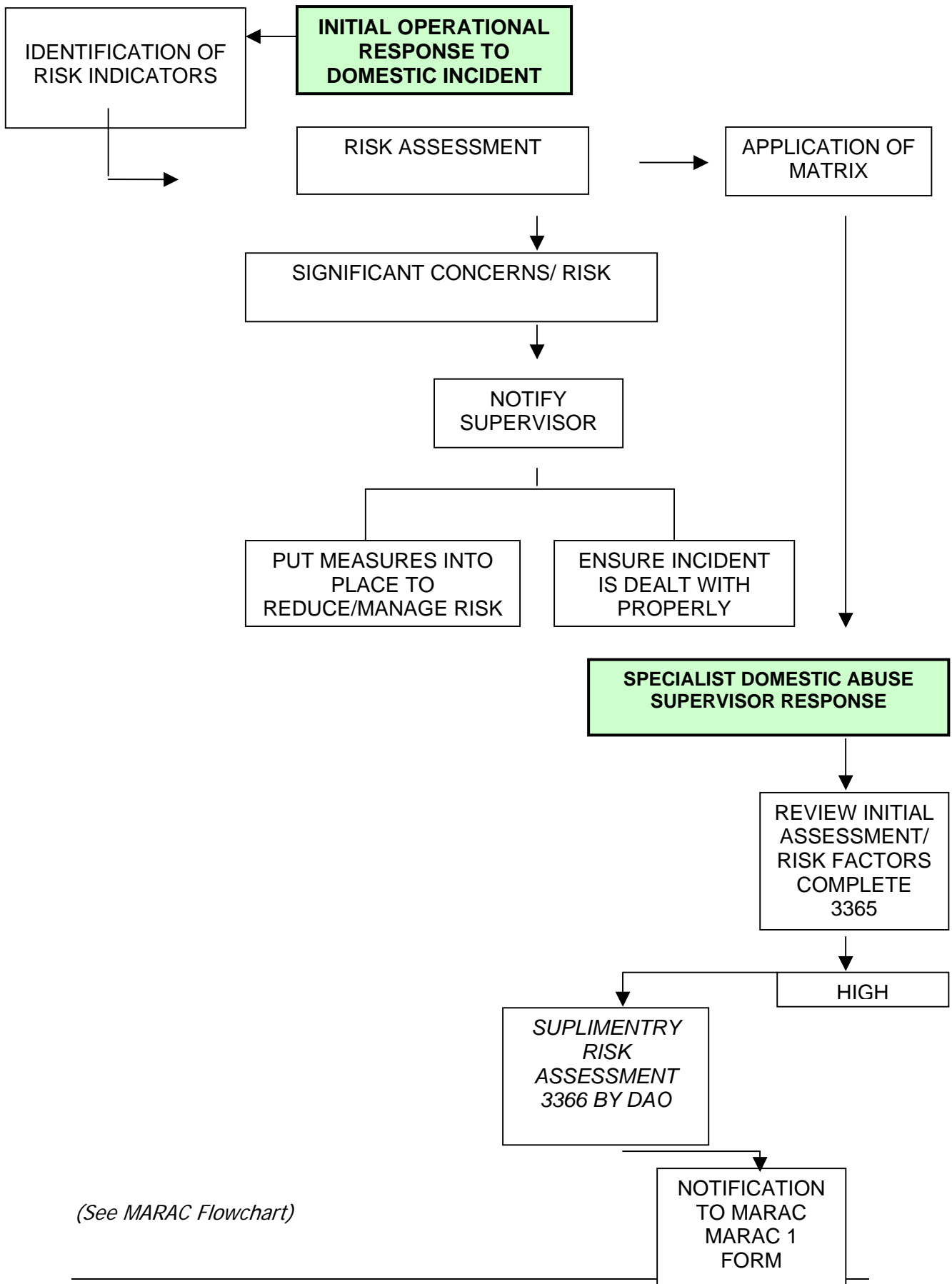
### ***What is the threshold for taking a case to MARAC?***

The MARAC meeting is **only for those cases assessed as high risk.**

When applying the Kent Police risk assessment matrix a Domestic Abuse victim MUST be brought to the MARAC process:

- When the assessment of risk is determined as High by either the DA Supervisor or the DAO.
- Any incident with 5+ incidents in previous year INCLUDING 2+ DA related crimes.
- Discretion can be used to upgrade the category of risk and bring the subject to MARAC but never to downgrade it. For example in areas where there is a high BME population who may be less willing to contact the police.

*MARAC PROCESS – Police initial response*



### ***How do notifications happen?***

The agency that identifies a client as high risk should make the notification to the MARAC co-ordinator Kent Police by completing and forwarding the MARAC 1 Notification Form (see Insert 4 page 34). The details of this notification will then be included in the agenda for the next meeting, unless this is an Emergency MARAC request.

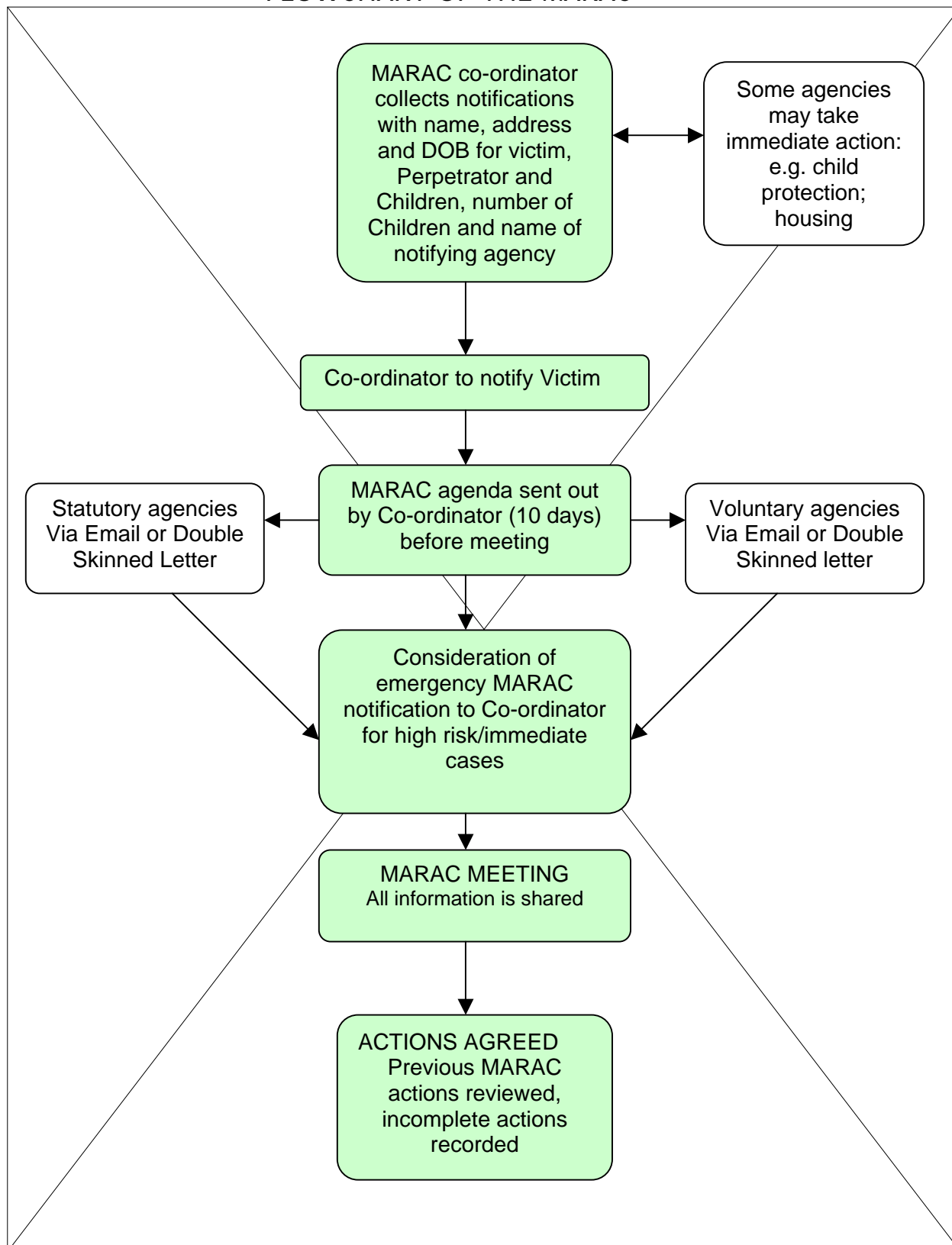
### ***What if different agencies have different information?***

It is very helpful to gather risk information from more than one source both for the safety of the victim and the safety of staff that might be supporting them, particularly if their job involves home visiting. All agencies attending the MARAC should review the list of risk factors on the DA risk assessment indicators and identify what information their agency holds about any of them. So for example, the Probation Service may have information about previous convictions but not about threats to kill or threats of suicide, while the police or refuge worker attending the meeting might have this information but not be aware (perhaps because the victim is not aware) of a perpetrator's previous criminal history.

### ***What to do with cases that are not high risk currently?***

If a case is not currently assessed as high risk the victim should still be offered the services of other agencies or organisations and information shared in accordance with the Kent Police Policy.

## FLOWCHART OF THE MARAC



## *The MARAC Meeting*

### **Actions ahead of the MARAC**

#### ***Who collects information for the meeting and what information?***

The MARAC Co-ordinator will collect the information for the meeting, compile the agenda and take the minutes of the meeting. The actions from the previous meeting will be collated and the details given at the next. The agenda will be circulated 10 days before the meeting.

Kent Police will also obtain consent of the victim subject of the MARAC in the form of a letter. (See Insert 5 page 35)

#### ***How is it circulated?***

The agenda with the relevant information is circulated by email where possible (typically to statutory sector agencies) or by registered post 'double skinned' and marked 'Private and Confidential-to be opened by addressee only' and addressed to the nominated representative where there is no email system (such as for many voluntary sector agencies).

Once each agency receives the agenda with the list of cases that will be reviewed they should establish what information is held by their organisation about each case.

#### ***Action before the MARAC***

In every case there may be certain police actions carried out before the MARAC. These would include initial target hardening, risk management and DA markers on addresses and Sanctuary Scheme etc. In cases where there are children or vulnerable adults involved, Children' Services and Adult Social Care Services may also take some immediate precautionary measures ahead of the meeting.

NB 'double skin' involves the contents placed into an envelope containing sender details placed within a second envelope.

## *The Meeting*

### ***What is the role of the chair?***

The role of the Chair<sup>1</sup> is to structure the meeting and prioritise cases in such a way that all those attending are able to use the time available as efficiently as possible. Thus for example, cases including children are normally held first so that representatives from Children's Services can leave once these are completed.

The Chair will normally review incomplete actions agreed at the last meeting and make a record of any outstanding actions at the outset of the MARAC. Once actions are completed results should be fed back to the MARAC Co-ordinator in the form of timely updates.

It is the Chair's responsibility to ensure that all agencies understand precisely what is required of their agency either directly or indirectly.

It should be recognised that some cases may require longer-term involvement at MARAC than others, which will be reflected during the review process.

At the start of each meeting the Chair will outline the confidential nature of the meeting and attendees will sign the confidentiality declaration contained within the MARAC administration pack (See Insert 6 page 36).

Those attending the MARAC should have the authority within their agencies to prioritise the actions that arise from the MARAC and to be able to make an immediate commitment of resources to those actions.

### The following agencies might attend the MARAC.

The agencies invited should only be those that have a role to play in the victim's safety, so it is **crucial** to have non-criminal justice system groups there. It is also helpful if there is a consistency in the nominated representatives from the different agencies.

### Permanent attendees as appropriate:

- Police (officer to report on cases and other public protection officers as necessary);
- Social Services;
- Health representatives (midwifery, health visitors, child protection nurse and hospital staff as appropriate);
- Housing;
- Probation;
- Education;
- Outreach
- Victim Support

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<sup>1</sup> The Chair is normally from the Police and is of Detective Inspector rank or equivalent

Additional attendees (as individual cases dictate). Areas will need to know whom the appropriate people are, who will attend at the chair's discretion and remain present for as long as they are making a positive contribution to the particular case and the chair deems it appropriate.

- Community based and voluntary perpetrator programmes
- Mental health
- Housing options
- Local drug and alcohol services
- Children and Family Court Advisory and Support Service (CAFCASS)
- Court based user groups (Chair or representative. Not necessarily judicial)
- National Association of Child Contact centres (NACCC) local centre representative
- Children's support organisations
- Women's Aid
- Victim Support and Witness Care
- Any other agency with expertise in the particular area of need e.g. cultural awareness or disability support

**The victim does not attend the meeting, nor does the perpetrator, or the Crown Prosecution Service.**

### ***Introductions***

In the early stages of developing a MARAC process it is suggested that each representative from every agency provides the meeting with a brief overview of their organisation. This should cover the services they provide, procedures, remits, their limits and any direct involvement of that representative with the individual or family being discussed. It will assist the Chair to give the agencies responsibility for actions that are relevant and specific to them. All professionals should have a better understanding of who can best assist risk victims in their daily role as a result.

### ***Minute Taking***

The MARAC Co-ordinator will take the minutes. The minutes will be prepared based on MAPPA guidelines on the same day wherever possible as the MARAC. A MARAC template for minute taking is included in this guidance (Insert 6 page 36).

### ***The Action List***

As noted above, it is very important that the action list is summarised after each case by the Chair of the meeting and that all attendees are clear what they are committing to do on behalf of their agency.

### ***Keeping Information Secure***

All agencies should be aware of the confidential nature of information discussed at the MARAC and ensure that all written information is stored securely.

## *Developing an Action Plan*

*In this section we review what information to share at the MARAC and what actions might typically ensue as a result.*

Only accurate information that is directly relevant to the safety of the victim should be shared by the attending agencies.

Information sharing at MARAC conferences is strictly limited to the aims of the meeting and attendees should sign the declaration (Insert 6 page 36) to that effect at the start of each conference. Information gained at the meeting cannot be used for other purposes without reference to the person/agency that originally supplied it.

### ***When should actions be taken?***

If victims and their children are at high risk of being severely hurt or killed, the individual representatives of each agency must agree to prioritise the actions assigned and deliver them within a defined and agreed time scale as determined by the MARAC. It will be the responsibility of that individual to ensure that actions are complied with and reviewed within defined time scales. In any case a full review will be undertaken at the next scheduled MARAC.

MARAC actions must be reported back to the victim as directed by the Chair.

## *Emergency MARACs*

An emergency MARAC is an exceptional event. It is only called when serious risk of harm to the victim is so imminent that statutory agencies have a duty of care to act at once, rather than waiting for the next MARAC.

The process for calling an emergency MARAC is as follows:

1. Initial phone call notification by any agency to MARAC Co-ordinator in their absence Kent Police Area DAO.
2. This call should be recorded by both agencies and details completed on the MARAC 1 Notification Form (Insert 4 page 34) as soon as practicable.
3. MARAC Co-ordinator should contact all the other relevant statutory agencies at once and make them aware of the situation.
4. Non-statutory agencies are not normally expected to attend the meeting unless they are the notifying agency. However, they may be contacted by phone during the meeting to check both what information they have about the case and whether there are specific actions that they can take to address risk.
5. The MARAC should be held as soon as practicable
6. The identifying agency must attend so that the details presented at the meeting are accurate
7. Urgent actions must be executed immediately and the emergency MARAC case should be prioritised on the next MARAC agenda so that the chair can review the action list and present the case to all the attending agencies.
8. Agencies will report on the completion of their specific actions via the chair as soon as practicable.

## *Outcome Measurement*

*In this section we review what are the key parameters for measuring the outcomes of the MARAC*

The key aims of the MARAC are:-

- To share information to increase the safety, health and well being of victims – adults and their children;
- To determine whether the perpetrator poses a significant risk to any particular individual or to the general community;
- To construct jointly and implement a risk management plan that provides professional support to all those at risk and that reduces the risk of harm
- To reduce repeat victimisation;
- To improve agency accountability
- Improve support for staff involved in high-risk Domestic Abuse cases.

Within these, the key outcome indicator must be improved victim safety. This can be analysed in relation to two elements.

- Firstly the level of repeat victimisation of victims whose cases have been reviewed at MARAC can be measured.

By repeat victimisation we mean any call to the police or other emergency services involving Domestic Abuse within a 12-month period following the MARAC. If possible repeat visits as a result of Domestic Abuse to the A&E services should be monitored.

- Secondly, we recommend that some comparison is made for those victims who do suffer a repeat incident about the degree of abuse that they suffer before reporting it.

While no repeat incidents is clearly a goal, if it can be demonstrated that confidence in the response of the range of agencies represented at MARAC is increased and victims seek help at an earlier stage than had previously been the case that is also a positive outcome.

Both these conclusions need to be compared to the overall level of reporting in the area to be sure that a lack of reports does not reflect a greater loss of confidence in the system overall. However, in areas where MARACs are being implemented, we would be surprised if this were to be the case since there is a clear commitment on the part of local partners to improve the response.

In terms of outputs rather than outcomes, it is important to measure

- The number of cases reviewed at MARAC over a 12 month period

- The range of agencies making referrals
- Data relating to diversity issues including ethnicity, sexuality and disability
- The total number of children involved
- The number of cases where the victim supports a prosecution

### ***Why measure outcomes?***

There are 4 key reasons why it is important to measure outcomes of the MARAC.

- Firstly, and most importantly, it encourages accountability to the victims, both adult and children, whom all partner agencies are trying to help. It keeps safety at the fore front of all the agencies.
- Secondly, it allows one to measure the cost-benefit analysis of running a MARAC. This should permit those agencies involved to be more accountable to their funders and be able to justify committing sufficient resources to the work. For those in the voluntary sector it should underpin the effectiveness of their efforts to fund raise if clear outcomes can be shown.
- Thirdly, it allows one to establish to what extent the MARAC contributes to other performance targets such as improving confidence in the CJS for example.
- Finally, it encourages accountability and consistency between agencies. It permits participants to measure the impact of their work and builds commitment to the process.

**KMDVSG**

Kent and Medway Domestic  
Violence Forum

**DOMESTIC ABUSE**

**Multi-Agency  
Risk Identification Tool**

**This form is designed for Agencies who do not have their own Assessment Tool or who would like a supplementary form for identifying domestic abuse risk. The purpose of the form is to support agencies to make defensible decision-making based on the police model of risk.**

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Public Protection Unit  
Kent Police HQ**

## Agencies Risk Identification Tool

Details of client:	
<b>Name:</b>	
<b>Safe Contact Number</b>	
<b>Address</b>	
<b>GP Name/Address</b>	

Details of children:					
Name	Date of Birth	School Attending	Have they seen or heard any of the abuse?	Relationship to perpetrator	What contact does the perpetrator have with the children?

Details of the alleged perpetrator:	
<b>Name:</b>	
<b>Date of Birth</b>	
<b>Address if known</b>	
<b>Does the perpetrator have parental responsibility for children?</b>	
<b>Past history of abusive behaviour if known</b>	
<b>Other issues: e.g.</b> <ul style="list-style-type: none"> <li>• Mental health issues/prescribed medication use</li> <li>• Drug or Alcohol issues</li> <li>• Access to weapons</li> </ul> <b>(Please give details of possible)</b>	

What civil measures are in place? (Please state date the order was issued – if known)
<ul style="list-style-type: none"> <li>• Occupation Order</li> <li>• None molestation order</li> <li>• Other .....</li> </ul>

Risk Identification Tool – SPECSS+	
<b>Separation/Child Contact Issues</b>	(Date/s of incident/s detailed)
Victims trying to terminate relationships frequently become homicide victims even after separation. Many incidents happen as a result of child contact	

or disputes over contact. <b>Have separated or told your abuser you want to separate from them?</b>	
<b>Pregnancy / New Birth</b>	
30% of domestic violence starts or intensifies in pregnancy. <b>Are you or have you recently been pregnant? Are you having problems with your partner/ex-partner over access or child contact issues?</b>	
<b>Escalation</b>	(Please record the date of incidents documented)
Physical Assaults becoming worse or happening more often. <b>Severity of violence tends to escalate after each incident. Is this incident worse than previous incidents or happening more often?</b>	
<b>Consider Isolation/Cultural awareness</b>	
Issues of bringing shame upon family when reporting incidents, terminating relationships or not consenting to marriage, language, culture, insecure immigration status, ability to access services and social isolation, which may include same sex relationships, disability, mental health or substance abuse can combine lethally to the risks normally presented in domestic abuse. <b>Are you particularly isolated from support or help or have you any personal or cultural issues that make it harder for you to seek help?</b>	
<b>Stalking</b>	
Obsessive behaviour such as watching, following, and constant calling of ex-partners are often apparent in the lead up to murder. <b>Do they follow or harass you in any way?</b>	
<b>Sexual Assault</b>	
Those who are sexually assaulted are subject to more serious injury and perpetrators are more dangerous. <b>Do they say or do things of a sexual nature that makes you feel bad or that physically hurts you or someone else?</b>	
<b>SPECSS+</b>	
<b>Morbid Jealousy, Threats to kill – you, the children or self Drug or Alcohol issues Access to Weapons Abuse of family pet Child Contact Issues Other significant behaviours – please specify</b>	

Assessing the Risk		
Risk	Support Plan	Action Taken
<b>STANDARD</b> – No significant current indicators of risk of harm	(Outline plan/action taken)	For example <ul style="list-style-type: none"> <li>➤ Information on local services given.</li> <li>➤ Discussed options</li> <li>➤ Discussed with line manager</li> <li>➤ Referral to another agency</li> <li>➤ Accepted client for support</li> </ul>
<b>MEDIUM</b> – There are identifiable indicators of risk of harm. The offender has the potential to cause 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.	(Outline plan/action taken)	For example <ul style="list-style-type: none"> <li>➤ Referral to Children's Services</li> <li>➤ Case meeting called</li> <li>➤ Discussion with line/manager/team meeting</li> <li>➤ Support plan agreed</li> </ul> <p>Other</p>
<b>HIGH</b> – There are identifiable indicators or risk of serious harm. The potential event could happen at any time and the impact would be serious.	Safety Plan (see RARA)	For example <ul style="list-style-type: none"> <li>➤ Referral to police</li> </ul> <p>With Consent -Without Consent</p> <ul style="list-style-type: none"> <li>➤ Referral to Safeguarding Adult Services</li> <li>➤ Referral to Duty and Assessment Team</li> <li>➤ Child protection concerns</li> </ul>

If the risk is assessed as high to Medium risk or if you are accepting the case you may wish to use this form as a record of your interaction with the client. This information may be needed in the unlikely event that serious case review or murder review occurs, to evidence the action you took to ensure the safety of the family.

**AT THIS POINT PERSONAL DATA MAY BE COLLECTED AND SHARED WITH CONSENT, HOWEVER THIS COPNSENT MAY BE WAIVERED IN EXCEPTIONAL CIRCUMSTANCES WHERE THERE IS RSK OF HARM TO CHILDREN OR SERIOUS RISK TO THE CLIENT** – refer to your organisations data sharing policy and guidance documents.

Example	RARA RISK MANAGEMENT PLAN – action Plan			
Agency	Remove	Avoid	Reduce	Accept
Police	Arrest Suspect	Re-house victim	Multi-agency intervention Safety Planning	MAPPA MARAC

RADAR NHS TRUST GUIDELINES – Caring for vulnerable women					
NHS	Routine Enquiry	Ask direct questions	Document injuries and Abuse	Assess Safety	Review and refer
e.g. Midwives	Screen all women	Is everything ok at home?	With consent if possible – and not in hand held notes	Are children present? Own personal safety.	Present option

RISK MANAGEMENT PLAN – ACTIONS

DATE:

--

NAME OF PERSON COMPLETING RISK ASSESSMENT:

SIGNATURE

NAME SUPERVISOR / MANAGER

SIGNATURE

DATE:

## KENT POLICE

**To be completed when Assessment Framework for Information Sharing (AFIS) threshold is met**

Date:	Nominal	CR/SI No				
<b>CHILD OR VULNERABLE ADULT COMING TO NOTICE OF POLICE</b>						
<b>SUBJECT'S DETAILS</b>					Child Yes	VA Yes
Surname				Forename/s		
Sex Male	Ethnic origin 0. Unknown		DOB:	Place of Birth		
Home Address					Post code	
Informants Details						
Tel No's	Home			Mob		
Current location of child or vulnerable adult				School attended		
<b>FAMILY DETAILS</b>						
	Surname	Forename/s	DOB/ Age	Relationship to subject	Nominal/ PNC	Address (if different)
1						
2						
3						
4						
5						
6						
<b>CIRCUMSTANCES</b> (Include physical condition of subject, the home and the apparent vulnerability)						

Date/time/place of incident						
<b>DAO TO COMPLETE</b>						
1	Do you have concerns for the welfare or safety of the child/VA?					Yes
2	Is this a Domestic Abuse incident?					Yes
3	If yes-did subject witness the incident?					Yes
4	Has subject expressed concerns for themselves or others?					Yes
5	Do you feel subject is at risk now?					Yes
<b>If the answer to any of the above is 'yes' please give details below</b>						
Action taken to date						
<b>INFORMATION SHARED WITH</b>						
Agency		Date		Name		
Young Offenders Team (YOT)						
L.I.O						
Children's Services						
School						
G.P/Health						
Mental Health Team						
Social Care Team (adults)						
Other professionals involved						
Reporting Officer						
Rank				Name		
DIV/Unit				Date	Time	

## *Domestic Abuse– Information Sharing – Partner Agencies Protocol*

1.1 The purpose of this guidance is to explain the procedure whereby Kent Police provides information in pursuant of the principles of the ‘interests of the child’ as contained within the Children Act 1989, the power contained in Section 115 of the Crime and Disorder Act 1998 and the Domestic Abuse Bill which includes the harm to children witnessing Domestic Abuse. Where certain conditions are satisfied, Section 115 enables any person to disclose information for the purposes of any provision of the Crime and Disorder Act 1998 to a relevant authority, or to a person acting on behalf of such an authority.

1.2 The primary legislation is covered by The Children’s Act 1989, Section’s 10 and 11 of the Children Act 2004 and the Crime and Disorder Act 1998. However this legislation does not override existing legal safeguards on personal information. By participating in this process, each partner declares its commitment to the procedures set out and acknowledges that the manner in which information can be exchanged takes into account The Crime and Disorder Act 1998, The Data Protection Act 1998, The Human Rights Act 1998, the common law duty of confidentiality, and any other relevant legislation.

1.3 The manner in which information can be exchanged takes into account the following legislation.

- (a) The Data Protection Act 1998, for the processing of personal information.
- (b) The Human Rights Act 1998, for the rights of the individual’s privacy.

1.4 The following legislation will also be relevant to us:

- (a) Common Law Duty of Confidence (Social Services, medical profession, patient confidentiality, Police, Health Visitors and Midwives).
- (b) Nursing and midwifery Council Codes of Conduct
- (c) The Freedom of Information Act 2000
- (d) The Mental Health Act 1983 (The Health Sector).
- (e) Health and Social Care Act 2001 (For Health/Social Services).
- (f) Children Act 1989 and Children’s Act 2004
- (g) NHS and Community Care Act 1990

(h) S.37 and S.39 Crime and Disorder Act 1998

(l) 'What To Do If You're Worried A Child Is Being Abused' (Home Office Publication)

(j) 'Working Together' 2006

(k) The Mental Capacity Act 2005

1.5 Any partner may withdraw from this process upon giving written notice to the other partners. Information, which is no longer relevant, should be destroyed in accordance with agency guidelines. This relates to any information that the partner has obtained during this process.

1.6 In addition there is a need for all agencies to hold information securely. Any agency receiving any Confidential Information or Personal Data from any other agency hereto must keep such information confidential and take steps to prevent unauthorised access or disclosure of the same, and in this regard each agency must ensure the security of such information it receives by ensuring that care is taken to avoid any breach (intentional or otherwise) or disclosure to third parties outside the remit of this agreement. "Partners may stipulate additional security handling requirements in respect of sensitive information."

## **2.0. Confidentiality**

2.1.1 Except as specified in clause 2.1.5, Parties shall not use or divulge or communicate to any person (other than those whose province it is to know the same for the Purpose, or without the prior written authority of the Data Controller of the originating Party) any Data obtained from another Party, which it shall treat as private and confidential and safeguard accordingly.

2.1.2 The Parties shall ensure that any individuals involved in the Purpose and to whom Police Data is disclosed under this Agreement are aware of their responsibilities in connection with the use of that Police Data. For the avoidance of doubt, the obligations or the confidentiality imposed on the Parties by this process shall continue in full force and effect after the expiry or termination of this process.

2.1.4 Respect for the privacy of individuals will be afforded at all stages of the Purpose.

2.1.5 Clause 2.1.1 above shall not apply where disclosure of the Police Data is ordered by a Court of competent jurisdiction, or subject to any exemption under the Act, where disclosure is required by a law enforcement agency or regulatory body or authority, or is required for the purposes of legal proceedings, in which case the relevant Party shall immediately notify the Data Controller of the Originating Party in writing of any such requirement for disclosure of the Police Data in order to allow the Data Controller for that Party to make representations to the person or body making the requirement.

2.1.6 The restrictions contained in clauses 2.1.1 and 2.1.5 shall cease to apply to any Data which may come into the public domain otherwise than through unauthorised disclosure by the Parties to the Agreement.

### **3.0 Audit of Security**

The partner agencies participating in this protocol will undertake to store all information held securely as per the terms of the Security and Data Management Section, to dispose securely of all information held, and to conduct 6 monthly audits of their security arrangements to ensure that they are effective.

#### **3.1 Audit of Protocol**

3.1.1 Audit of Data: Each Partner will collect, process, store and disclose all data held in accordance with this Protocol and relevant legislation, and will ensure that all information held is accurate, relevant and fit for the purpose for which it is intended. The Data Controllers of each Partner Agency will undertake regular audits of the data to ensure that this process is being complied with.

The Partners undertake to ensure that the Data Controllers of each Partner Agency will conduct an annual audit of this Protocol, in order to ensure compliance, recommend any necessary remedial actions and ensure it remains fully effective.

#### **3.2 Data Protection and Freedom of Information**

3.2.1 The use and disclosure of any Personal Data shall be in accordance with the obligations imposed upon the Parties to this Agreement by the Data Protection Act 1998 and the Human Rights Act 1998. All relevant codes of practice or data protection operating rules adopted by the Parties will also reflect the data protection practices of each of the parties to this process.

3.2.2 The Parties agree and declare that the information accessed pursuant to this process will be used and processed with regard to the rights and freedoms enshrined within the European Convention on Human Rights. Further, the Parties agree and declare that the provision of information is proportional, having regard to the purposes of the process and the steps taken in respect of maintaining a high degree of security and confidentiality.

3.2.3 The Parties undertake to comply with the provisions of the Data Protection Act 1998 and to notify as required any particulars as may be required to the Information Commissioner.

3.2.4 If any Party receives a request under the subject access provisions of the Data Protection Act 1998 and personal data is identified as belonging to another Party, the receiving Party will contact the other Party to determine if the latter wishes to claim an exemption under the provisions of the Act.

3.2.5 It is acknowledged that where a data controller cannot comply with a request without disclosing information relating to another individual who can be identified from that information, they are not obliged to comply with the request, unless;

The other individual has consented to the disclosure of the information to the person making the request; or

It is reasonable in all the circumstances to comply with the request without the consent of the other individual. In determining whether it is reasonable, regard shall be had, in particular, to: -

- Any duty of confidentiality owed to the other individual;
- Any steps taken by the data controller with a view to seeking consent of the other individual;
- Whether the other individual is capable of giving consent;
- Any express refusal of consent by the other individual.

3.2.6 If any Party receives a request for information under the provisions of the Freedom of Information Act 2000 identified as belonging to another Party, the receiving Party will contact the other Party to determine whether the latter wishes to claim an exemption under the provisions of that Act or wishes to issue a response neither to confirm nor deny that information is held.

3.2.7 Where any Party receives a Notice under Section 10 of the Data Protection Act 1998, that Party will contact the person nominated to ascertain whether or not to comply with that Notice.

## **SECURITY & DATA MANAGEMENT SECTION**

The Partners agree that

4.1 Partners shall keep confidential all personal data supplied pursuant to this protocol.

4.2 Data will only be used for the purpose for which it was requested.

4.3 Data will be securely stored and destroyed when no longer required. This clause shall survive termination of the protocol or the withdrawal of any of the Partners.

4.4 No publication of data supplied pursuant to this Agreement will identify any individual, unless there is consent to such publication from that individual.

4.5 Partners will ensure that information exchange and use of information at a local level will be in a secure environment.

4.6 Partners agree to comply with the seventh principle of the Data Protection Act 1998 regarding security and to ensure that adequate security arrangements are in place, in order to protect the integrity and confidentiality of the information held. The ideal standard would be ISO/IEC 17799 but it is recognised that not all partners will be able to meet these requirements, but that all should be able to satisfy minimum requirement that personal information disclosed must:

- Not be emailed over Internet links.
- All letters to be sent in a sealed envelope to the full address of the individual concerned with the marking "Private and Confidential" marked clearly.
- Be protected by back-up rules.
- When stored on a computer system, it must be password protected and this password will be revised regularly.
- When manual, be stored in a secure filing cabinet when not in use.
- Be located in a geographically secure environment.

RESTRICTED  
**MARAC 1 NOTIFICATION FORM**

DATE OF NOTIFICATION:	AGENCY:
Name of person notifying:	Contact number:
NOTIFICATION TO MARAC (please specify)	SCHEDULED/EMERGENCY

VICTIM	ALLEGED/PERPETRATOR
SURNAME:	SURNAME:
FORENAME(S):	FORENAME(S):
ALIAS:	ALIAS:
DOB:	DOB:
ADDRESS:	ADDRESS:
ETHNIC ORIGIN:	ETHNIC ORIGIN:
OCCUPATION:	OCCUPATION:
RELIGION:	RELIGION:
STATUS OF RELATIONSHIP;	
IF REFUGEE/ASYLUM SEEKER: (victim only)	
NATIONALITY:	STATUS:
GP DETAILS (victim only):	
OTHER PERSONS LIVING IN THE HOUSEHOLD, IE BROTHER, LODGER	
<b>CONSENT:</b>	
Service User's Consent obtained?	If not, can you satisfy the requirement to share information without consent? YES/NO

LIST ALL CHILDREN OF VICTIM/ PERPETRATOR			
NAME	DOB	SCHOOL	ADD, IF DIFFERENT FROM ABOVE

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**Our Ref:**

**Your Ref:**

**Address:**

Dear Mr/Mrs

Domestic violence is a crime that can include physical assault, sexual assault, harassment and damage to property, among other factors. It is a crime that Kent Police treat seriously and our policy is one of positive intervention to reduce the risk of further domestic abuse incidents.

You have been identified as being at "high risk" of becoming a victim again and our concern is such for your safety that your name will now be put forward to be considered at a Multi Agency Risk Assessment Conference. By doing this we can provide you with support and advice about your options and access to relevant support services in relation to criminal and civil law, housing, safety planning, Sanctuary Scheme, Children and Drug/alcohol/mental health issues

Present at these meetings will be professionals from agencies that can assist in your safety and well being and we will share information between agencies on a confidential basis. This meeting will be held on

If there are issues or concerns that you wish to be shared on your behalf, then please contact the Domestic Abuse Unit on. We will do all we can to work with you to prevent further incidents.

We work with many local organisations that may also be able to provide you with help and advice. I am enclosing a list of useful telephone numbers.

Yours sincerely,

Domestic Abuse Unit

## *The MARAC Administration Pack*

### Contents:

1. Sample Agenda
2. MARAC Interventions
3. Confidentiality Declaration
4. Sample Minutes

## MARAC AGENDA

- 1) Introduction of all attendees
- 2) Chair reads out MARAC confidentiality statement
- 3) Confidentiality statement signed by all attendees
- 4) Incomplete actions from last meeting addressed
- 5) Chair invites review of new cases to MARAC
- 6) All agencies with information about a case share this at the meeting
- 7) Reports from agencies not represented shared by chair
- 8) Chair summarises action points after each case for individual agencies
- 9) Chair to close meeting

## MARAC Interventions

Intervention methods to be considered at MARAC;

- 1) Location of interest marker on address
- 2) Panic alarm installed
- 3) Police watch (preferably with victim consent, police patrols completing either drive pasts or calling at address)
- 4) Cocoon watch (preferably with victim consent contact neighbours, friends and relatives and ask them to report incidents)
- 5) Joint child protection visit
- 6) ASBO – Anti Social Behaviour Order
- 7) PPO – Persistent and Prolific Offender Team
- 8) Sanctuary Scheme
- 9) Probation IDAP breach
- 10) OSMAN letter
- 11) Letter to victim informing them of MARAC and perceived risk (as standard)
- 12) NSO and PCSO contact





# MARAC

## Attendance and Minutes

Location:

Date:

Attendees:

Apologies:

- 1) Introductions
- 2) Confidentiality statement read out by chair and signed by attendees
- 3) Incomplete actions addressed from previous MARAC
- 4) Cases for consideration by MARAC;

- Victim – perpetrator  
Home address  
Children and dates of birth  
Brief summary of recent incident and history  
Actions: (to be listed with name of agency responsible)

- Victim – perpetrator  
Home address  
Children and dates of birth  
Brief summary of recent incident and history  
Actions: (to be listed with name of agency responsible)

DATES OF NEXT MEETINGS;