

# Cheshire West and Chester

## Multi-agency Risk Assessment Conference (MARAC)

### Operating Protocol

Principal	The aim of this protocol is to ensure that CW&C MARAC is informed by research, is safety focused, takes a consistent approach, and follows the guidance issued by Safelives.
Purpose	To ensure that those harmed, who are discussed at MARAC, have a robust safety plan in which agencies are accountable for safety and risk management planning.
Applies to	All agencies party to the MARAC information sharing agreement (ISA) and nominated MARAC representatives.  Note: Responsible Authorities as set out in the <a href="#">Domestic Abuse Act 2021</a> , are Local Authority, Police, and Health
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## Abbreviations Table

MARAC	Multi-Agency Risk Assessment Conference
MOP	MARAC Operating Protocol
ISA	Information Sharing Agreement
DAIPS	Domestic Abuse Intervention and Prevention Service
SCP	Safeguarding Children Partnership
LSAB	Local Safeguarding Adults Board
SPOC	Single point of contact
GDPR	General Data Protection Regulation

## **I. Introduction**

The purpose of this MARAC Operating Protocol (MOP) is to establish accountability, responsibility and reporting structures for the Cheshire West and Chester MARAC, and to outline the processes which make for an efficient and effective MARAC.

The MOP is designed to enhance existing arrangements rather than replace them. This includes the safeguarding processes already in place through the Safeguarding Children Partnership (SCP), and the Local Safeguarding Adults Board, (LSAB)

## **2. Partner Agencies**

Appendix 1 lists all agencies who are signatories to the Information Sharing Agreement (ISA) and include details of the agency SPOC. This Appendix is not published on public sites and is for MARAC signatory agency use only.

## **3. Governance and Performance Management**

The aims of the MARAC are:

- To share information in order to increase the safety, health and well-being of adults, and their children who are harmed by domestic abuse.
- To share information about the person who harms in order to reduce the risk they pose to any particular individual or to the general community.
- To jointly create and implement a risk management plan that provides professional support to all those at risk and reduces the risk of harm.
- To reduce repeat instances of harm.
- To improve agency accountability by ensuring that all agencies have acted individually to reduce risk and harm prior to MARAC, and complete actions agreed at MARAC.
- Improve support for staff involved in high-risk Domestic Abuse cases.

MARAC is a key component of the [Domestic Abuse Strategy](#) which is overseen by the Domestic Abuse Local Partnership Board (Domestic Abuse Board).

The MARAC Steering Group is a sub-group of the Domestic Abuse Board and the chair of the Steering Group reports to the Board quarterly.

The core responsibilities of the MARAC Steering Group are to:

- To review MARAC processes against Safelives best practice standards.
- To offer challenge and recommendations to agencies to ensure those harmed by domestic abuse are safe and protected.
- To monitor the cases heard at MARAC, identify trends, themes, and referral pathways.
- To quality assure the decisions and actions agreed at MARAC through quarterly auditing.
- Monitor MARAC representation, attendance, and the quality of engagement from partner agencies.
- To ensure that all MARAC representatives have completed the SCP DA Foundation training as a minimum prior to attending MARAC meetings.
- Review data in relation to outcomes.
- To consider changes in legislation, policy, and research locally and nationally.
- To share information from the Domestic Abuse Board

*(This is not an exhaustive list and will be added to when required)*

The MARAC Steering Group meets quarterly and has manager representation from each of the key agencies and services represented at MARAC (these are agency decision makers and managers of the MARAC representatives):

<b>ORGANISATION</b>	<b>ROLE</b>
Cheshire West & Chester Council	Domestic Abuse Intervention & Prevention Service (DAIPS) Manager (Chair) DAIPS Senior Manager

	DAIPS Senior Practice Lead
	Early Help & Prevention (EHP) District Manager
	Education & Inclusion Senior Manager
	Adult Social Care (ASC) Team Manager
	Childrens Social Care iArt Manager
Cheshire Police	Detective Inspector (MARAC Chair)
ICB Cheshire & Merseyside	Designated Nurse Adult Safeguarding
	Deputy Designated Nurse Safeguarding Children
Countess of Chester Hospital	Named Midwife for Safeguarding and Domestic Abuse Trust lead
Cheshire and Wirral Partnership NHS Foundation Trust (CWP)	Head of Safeguarding
Housing Providers	Sanctuary Housing Area Manager
	Weaver Vale Housing Trust (WVHT) Head of Neighbourhoods
	For Housing (TBC)
Westminster Drugs Project (WDP)	Programme Manager
WHAG	Service Manager
Probation	Senior Probation Officer

#### **4. Process of the MARAC**

The MARAC process follows the best practice guidance set out by Safelives. The Safelives [10 principles of an effective MARAC](#) are followed and the MARAC is regularly reviewed to ensure its adherence to the principles.

**Identification of MARAC cases** The Domestic Abuse Stalking & Honour-Based Risk Indicator Checklist (DASH RIC) is the risk identification checklist to identify victims to be heard at MARAC. All referring agencies in Cheshire West and Chester should access a programme of training to ensure that staff are aware of the DASH RIC, its appropriate use, and the MARAC referral process. This training is accessed through the SCP.

The DASH RIC enables a practitioner to make an informed decision regarding risk and whether a MARAC referral is required.

The DASH RIC is a risk identification checklist and not a full risk assessment. It does support a practitioner to identify risks to children and vulnerable adults but should not be considered as a full and holistic risk assessment.

All MARAC referrals are subject to management oversight and screening within DAIPS.

#### **Criteria for MARAC**

The criteria for MARAC referrals are currently identified by use of the DASH RIC:

- Visible risk - 14 or more ticks
- Escalation - 3 or more domestic abuse incidents in a 12-month period
- Professional concern - a practitioner believes a person to be at high risk despite a lower actuarial score. This may be due to a number of factors including their background, nature of risk, minimisation of risk, non-engagement with protective agencies. The professional concern must be clearly articulated.

It should be noted that the criteria for referrals are regularly reviewed and may be changed following recommendations from the MARAC Steering Group with approval from the Domestic Abuse Board.

### **Criteria for MARAC re-referral**

It is recognised that re-referral is vital to ensure ongoing safety and MARAC effectiveness. A referral would be where domestic abuse incident has occurred within 12 months of the previous MARAC. It will be screened by DAIPS and referred to MARAC if appropriate.

It is expected that each agency takes responsibility for their own internal pathways for MARAC referrals. This includes appropriate training and supervision of practitioners regarding the completion of the DASH RIC and MARAC referral. Particular attention must be given to appropriate documentation of decision making for information sharing particularly where consent has not been obtained.

MARAC does not rely on consent and information is shared on the basis of legal gateways including Public Task.

The DASH RIC also prompts practitioners to inform their MARAC representative that a referral from their organisation will be made it is essential that the representative is aware of their role in presenting the information.

### **Referral Process**

Referral to the MARAC is made by use of a MARAC referral form linked to the DASH RIC (see Appendix 2) which requires agencies to complete essential fields fully. This includes names, dates of birth, address, schools, and GP information as well as an outline of the key risks and background factors. It also includes information on victims' awareness of and consent to the MARAC process as well as safe contact mechanisms. Accurate completion of this form is essential and enables all agencies to research MARAC information effectively and to complete any immediate safety actions and interventions.

Referrals should be sent using the online portal:

<https://www.cheshirewestandchester.gov.uk/residents/crime-prevention/domestic-abuse/multi-agency-risk-assessment/referring-to-marac.aspx>

Should this not be possible then secure email to [idva.west@cwandc.cjsm.net](mailto:idva.west@cwandc.cjsm.net) if external agency to CWaC or if an internal referrer [IDVAWEST@cheshirewestandchester.gov.uk](mailto:IDVAWEST@cheshirewestandchester.gov.uk)

The DASH RIC emphasises the need to follow agency, and local safeguarding procedures for children and adults. It stresses that MARAC is not an immediate response to safeguarding. However, it does identify where referrals to CW&C i-ART (children) and Access West teams (adults) must also be made where appropriate to do so.

### **MARAC List/Agenda**

MARACs in Cheshire West and Chester currently take place monthly on a Tuesday, Wednesday, and Thursday in locality areas. The distribution of the MARAC listing takes place in two stages. The main listing is distributed 2 weeks before the MARAC with a possible additional list up to one week before the MARAC which is when the list is closed. The MARAC does not have a deadline, referrals are taken throughout the month and presented at the next MARAC.

The final agenda is geographically split. Any referrals in the final week before the MARAC are listed for the following month.

### **Actions before the MARAC**

All agencies are expected to complete any immediate safety actions prior to the MARAC including but not limited to:

- Vulnerability markers on properties.
- Target hardening and Fire home safety referrals.
- IDVA safety planning with the person harmed which addresses immediate and longer-term safety (for example, changes to mobile phones, signposting to civil remedies).



- Raising flags on case files to ensure anyone working with the person harmed is aware of the MARAC referral. Agencies capable of flagging are Police, Health, Probation, Local Authority.

#### Repeat 'Flagging' guidance:

Where a person has not been referred to the MARAC within 12-month period agencies should remove any MARAC flag. People who this applies to will be flagged in the MARAC minutes at the end of that 12 months. For example, if a person was subject of a MARAC in January 2017 and there have been no repeat incidents within the following 12 months, notification will be given within the minutes of the January 2018 meeting. This is to enable partner agencies to remove 'flagging' on those people within their own recording systems.

#### **Contacting the Person Harmed prior to the MARAC**

The referring agency (with the exception of Police) is expected to inform the person harmed of the MARAC referral. Where this has not occurred the rationale for this must be clearly identified in the referral.

All MARAC requests are referred to DAIPS. DAIPS have a Referral and Assessment Protocol (Appendix 3) and contact is governed by clear practice standards.

Where possible DAIPS will inform the person harmed of being heard at MARAC and the process will be explained. Consent is not required but where they do not consent, they are advised of their rights to have this view shared at the MARAC and how legal gateways are used, such as the Crime and Disorder Act 1998.

Prior to MARAC a DAIPS practitioner will attempt to offer support and obtain the voice of the person harmed so that they can advocate on their behalf during the MARAC.

If DAIPS are unable to make contact with the person harmed, the referrer is advised of this via secure email.

**MARAC meeting**

The MARAC takes place monthly and is chaired by the Detective Inspector from the Vulnerability Hub.

The role of the chair is to:

- Conduct the meetings in a structured and fair manner to include all representatives and maximise use of their time.
- Ensure that agency representatives have the opportunity to make their contribution to information sharing and action planning.
- Ensure that agencies are clear about their commitment to timed actions and hold agencies to account for their contribution. This includes highlighting any incomplete actions from the previous meeting and addressing persistent failures to meet commitments outside of the meeting at a senior level within the organisation.
- To ensure the actions identified are taken by the most appropriate agency.
- To ensure that the risk management plan and risk analysis is meaningful and aimed at reducing harm.
- Ensure that anti-oppressive practice is adhered to, and the meeting takes a trauma informed approach.
- Ensure that agencies adhere to the 'MARAC Flagging Guidance'.

There is an expectation that the nominated MARAC representatives are MARAC trained, will attend each meeting to enable a consistent approach to and ensure clients are receiving a robust service. Where it is not possible for the nominated representative to attend, the organisation will send another person who must have undertaken the MARAC training, have experience and knowledge and understanding of MARAC aims and functions, and must have authority to make decisions for their organisation.

## **Minutes and Administration**

The MARAC Administrator tasks are to:

- Compile the MARAC listing.
- Circulate the agenda (and any amendments) to all MARAC representatives.
- Minute the MARAC meeting.
- Circulate MARAC action spreadsheet.
- Circulate the minutes within 1 week of the MARAC meeting.
- Record the minutes on the person's Liquid Logic record.

## **Information Shared at MARAC**

All agencies who are part of the MARAC have signed up to the Cheshire West and Chester MARAC Information Sharing Agreement (DSA). This agreement sets out their responsibilities in relation to the sharing, storing and review of the sensitive, personal data which a MARAC requires in order to be effective.

All elements of Data Protection are complied with, information is shared securely either by email to DAIPS or brought to the MARAC and shared verbally. Each agency is responsible for the security of their own information and any breaches of Data Protection will be addressed in the meeting and reported as a breach to their own agency.

The ISA identifies a data controller and a SPOC within each agency to whom all concerns regarding information sharing may be addressed.

## **Role of MARAC Agency Representatives**

The MARAC representatives are responsible for:

- Undertaking appropriate MARAC Training
- MARAC attendance.
- Presenting the relevant information from their agency referral.
- Ensuring that their agency has completed the MARAC research on each person listed ahead of the meeting.

- Presenting relevant and proportionate information to the MARAC that informs a safety plan.
- Ensuring actions are progressed to the most appropriate practitioner in their agency and that those actions are completed within the timescales specified.
- Informing the MARAC administrator on completion or progress on agreed actions in accordance with times specified at the MARAC meeting.
- Raising any concerns for their agency with the MARAC Chair.

### **Induction**

It is acknowledged that at times agencies may need to change their MARAC representative. The role of a MARAC representative holds a significant level of responsibility. Therefore, the following induction actions must be completed before a new MARAC rep is appointed:

- Completion of CW&C domestic abuse training level 1 and 2
- Completion of appropriate MARAC training
- Read and understand the MARAC operating protocol.
- Meet with the MARAC Chair to discuss expectations.
- Observe a MARAC
- Conduct a handover meeting with the previous representative and share any outstanding actions.
- Review the Safelives website regarding MARAC processes and resources.

### **Action Planning**

Once all agencies have shared information during the MARAC and any additional risks or needs have been identified, an action plan must be formed. MARAC representatives are encouraged to identify actions for their own agency as well as other agencies.

Actions must be proportionate to the risk or need and be specific, measurable, achievable, realistic, and timely (SMART) and are aimed at improving safety and outcomes for the client, children and their families and the professional supporting them.

Examples of specific timed actions would be:

- Police to crime the physical assault committed by XX during the incident.
- XX to make the client aware of weekly Children Centre activities taking place at XX children's centre.
- School to undertake work with the children that ensure that their voice and feelings are heard and understood and acted upon.
- Safeguarding concerns have been established and a referral to i-ART must be made using the MARF.
- Referral for xx to the Gateway recovery programme.

(This is not inclusive of which agency would be asked to complete the action and the date for completion)

Agencies are required to email DAIPS to confirm in detail the completion of all actions.

MARAC actions are audited quarterly by the MARAC steering group to review the effectiveness of actions and monitor repeat MARAC referrals (see Appendix 4 for QA tool)

### **Emergency MARACs**

Cheshire West and Chester do not undertake emergency MARAC's. DAIPS will contribute to Child Protection and Adult Safeguarding strategy meetings and may arrange a professionals meeting if it is felt that an urgent response is required.

### **MARAC Plus meetings**

MARAC plus meetings are held when there are concerns that a client has been heard at MARAC a number of times and the risk has not reduced. This enables a core group of agencies to have a more in-depth discussion regarding the victim. The process of MARAC is the same with regards to information sharing and an action plan implemented. Where possible this is agreed at the monthly MARAC meeting. Where there is an urgent need to hold a MARAC plus DAIPS will take responsibility for

arranging the meeting and informing the monthly MARAC that a MARAC plus meeting has been held.

Core agencies invited to a MARAC plus are DAIPS, Police, Children's Social Care and Health representatives. Any other specific agency such as Drug and Alcohol services that have a significant contribution will be invited

### **Closed MARAC**

Closed MARAC's are considered when there is a specific sensitive issue such as evidence of Honour Based Abuse, in some cases child sexual harm, significant police investigations or operations and if the victim, abusing adult or significant family members are employed by any of the involved agencies. In these cases, the listings will not go out to all parties and each agency will be asked for information discretely and in proportion to the MARAC referral.

In situations of Honour Based Violence and Forced Marriage a discussion regarding a closed MARAC must take place between the chair of MARAC and the manager of DAIPS.

The decision making must consider the following points:

- Consult specialist service to contribute to risk management decisions ([www.karmanirvana.org.uk](http://www.karmanirvana.org.uk) [www.saverauk.co.uk](http://www.saverauk.co.uk) [www.safelives.org](http://www.safelives.org) )
- All records are to be locked down and only accessed by Director, Senior Manager, Operational Manager and named IDVA.
- The benefits of a full MARAC discussion compared to a closed MARAC regarding a resulting effective safety plan.

When considering a closed MARAC, the following information regarding HBA and forced marriage should be evidenced in risk making decisions. Honour based violence is a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and / or community by breaking their honour code.

For young victims it is a form of child abuse and a serious abuse of human rights.

It can be distinguished from other forms of violence, as it is often committed with some degree of approval and/or collusion from family and/or community members. Women, men and younger members of the family can all be involved in the abuse.

The link below is the Pan Cheshire procedure from the Harmful Practices Strategy.

[https://www.proceduresonline.com/pancheshire/cheshire\\_west/p\\_honor\\_based\\_viol.html](https://www.proceduresonline.com/pancheshire/cheshire_west/p_honor_based_viol.html)

Forced marriage is a crime. It is a form of domestic abuse and where it affects people with disabilities it is an abuse of an adult with care and support needs.

There is a clear distinction between forced marriage and arranged marriage. In arranged marriages, the family of both spouses take a leading role in arranging the marriage but the decision to accept the arrangement or not remains with the prospective spouses. In forced marriage, one or both spouses do not, or through lack of mental capacity cannot, consent to the marriage. This is the case if a person's disability prevents them from giving informed consent to a marriage. In 2013, 97 of the 1013 (9.6 per cent) of cases known to the Forced Marriage Unit concerned a disabled person.

It is important to recognise that forced marriage situations can involve the person being at risk from a number of people in the family and/or community through so-called 'honour-based violence'. Serious injury or death may be threatened or perpetrated against someone who does not cooperate with the marriage or their family.

Disclosures of potential forced marriage must be taken seriously. Advice on safety planning and practice guidance can be gained from the Home Office's Forced Marriage Unit

The links below direct to the Home Office Forced Marriage Unit, the statutory guidance and multiagency practice guidance.

[www.gov.uk/stop-forced-marriage](http://www.gov.uk/stop-forced-marriage)

<https://www.gov.uk/guidance/forced-marriage#guidance-for-professionals>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/322307/HMG\\_MULTI\\_AGENCY\\_PRACTICE\\_GUIDELINES\\_v1\\_180614\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/322307/HMG_MULTI_AGENCY_PRACTICE_GUIDELINES_v1_180614_FINAL.pdf)

## **5. Equality**

The MARAC will ensure that all equality strands are respected, and all representatives behave in a non-judgmental way and respect diversity. All work undertaken at the meeting will be informed by a commitment to equal opportunities and effective practice with regards to age, disability, gender, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex or sexual orientation.

It is acknowledged that Cheshire West and Chester do not have a significant BM&E population however are committed to ensuring the needs of these groups and of those above are met by the following actions:

- Promotion of the RIC and MARAC process to a wide variety of community and statutory organisations including disability services, LGBT, organisations representing West Cheshire's small but significant BME communities.
- Ensuring minority groups are reflected in data analysis by the MARAC steering group.
- Ensuring specific agencies are invited to MARAC or contacted to share information to support a case irrespective of their involvement with the client (this is considered in line with GDPR).
- Equality information is shared within the monthly Safelives return.
- A 6 monthly report to the Board outlining equality strands and trends.



## **Evaluation**

Data from the MARAC is recorded on the Safelives MARAC spreadsheet and returned to Safelives every month. This information is also shared with the MARAC Steering Group.

The information includes the number of cases, percentage of repeats, range of referring agencies and diversity of victims.

The MARAC Steering Group analyses the data in detail and recommends actions to address gaps and celebrates achievements.

This data is also reported to the Board and is scrutinised, in particular diversity streams and repeat MARAC cases.

DAIPS provide a narrative report for the Board each quarter regarding MARAC and are responsible for taking any actions and implementation.

## **7. Complaints**

Complaints may be made by any stakeholder in the MARAC process including a MARAC client. Complaints from a MARAC representative should be made initially to the MARAC chair to explore local resolution. If the complaint is regarding the MARAC chair, then the manager of DAIPS should be contacted.

Since the Local Authority administer the MARAC, should a subject of MARAC wish to make a complaint the CW&C corporate complaints procedure will be followed. A record of such a complaint will be recorded on the clients DAIPS file.

The following process for managing MARAC representative complaints will be used:

- a. individual agency addresses concern verbally with agency against whom the complaint is made
- b. if the person making the complaint does not receive a satisfactory response in their view, then a written complaint, copying in the MARAC

chair should be made to the most senior person within that agency who has strategic responsibility for domestic abuse.

- c. if a resolution is still not achieved the MARAC Chair will convene a meeting of the parties concerned in order to attempt to resolve the issue

All complaints will be brought to the attention of the MARAC Steering Group so that relevant learning can be considered.

## **8. Withdrawal**

Any partner may withdraw from this Protocol upon giving written notice to the other signatories. Data which is no longer relevant should be destroyed or returned. The partner must continue to comply with the terms of this Protocol in respect of any data that the partner has obtained previously through being a signatory.

## **10. Review**

The MARAC Steering Group reviews compliance with the Protocol and addresses any issues relating to its use. The Protocol is formally reviewed every two years and any major change requires renewed sign-up by all participating agencies. An example of a major change is the alteration of the MARAC threshold. Renewed sign-up will otherwise take place every three years.

The signatories agree that DAIPS have responsibility to review the document every two years, make amendment to wording where needed and make proportionate changes that are linked to research, legislation or guidance.

**Please note that more information and guidance on MARAC is given on the Safelives website.**

[www.safelives.org.uk](http://www.safelives.org.uk)

## **Designated Officer**

Each partner will appoint a Designated Officer to authorise this protocol who will be a manager of sufficient standing and have a co-ordinating and authorising role for their organisation.

In relation to MARAC this officer will identify the MARAC representative for their organisation and any MARAC representatives of different sections of an organisation who are tasked with information research.

### **Data/Information Officer**

Each partner will also supply the name of their agency data or information officer who is responsible for the development and implementation of data procedures within their organisation.

### **Agreement**

**In signing up to this protocol I commit**

**(Organisation) \_\_\_\_\_**

**to abiding by its terms and conditions.**

Signed \_\_\_\_\_

Name \_\_\_\_\_

Post \_\_\_\_\_

Date \_\_\_\_\_

### **Name and contact details of information officer:**

Name:

Contact details:

## APPENDIX 1

ISA INSERT WHEN COMPLETE – required amendments due to GP Info

## APPENDIX 2

MARAC referral form [Referring to Marac | Cheshire West and Chester Council](#)

## APPENDIX 3

Referral and assessment protocol



MARAC REFERRAL  
and ASSESSMENT PR