



*Altogether Better Policing*

**MARAC**

**Referral**

**form**

Multi-Agency Risk Assessment Conference (MARAC) provides a consistent approach to Risk Assessment which identifies those victims who are most at risk of serious harm. Agencies can then work together to reduce this risk using available interventions.

The process also enables effective information sharing, thus identifying risk that may previously have not been readily identified by the initial responding agency.

The purpose of this form is to enable referrals to be made into MARAC.

This form should be completed by members of staff as part of the agencies procedures for dealing with victims of Domestic Abuse.

Once completed the form and risk assessment should be sent via a secure email address and password protected to [marac@durham.pnn.police.uk](mailto:marac@durham.pnn.police.uk).

Any queries can be directed to the MARAC Coordinator; Catherine Glass

External 0191 3752072, Internal 75 2072.

Agencies should continue to follow their own procedures regarding Child Protection issues and continue to adhere to any agreed Domestic Abuse Polices.

## Agency details

The following details need to be completed before a Referral can be made

<b>Name of staff member making referral</b>	Click here to enter text.
<b>Referring agency</b>	Click here to enter text.
<b>Contact details of agency (Address, Telephone and email):</b>	Click here to enter text.
<b>Date of referral</b>	Click here to enter text.

## Details of Victim

*Please supply all of information below if available*

<b>Name</b>	Click here to enter text.
<b>DOB</b>	Click here to enter text.
<b>Is the victim aware of this referral?</b>	Click here to enter text.
<b>Address</b>	Click here to enter text.
<b>Safe Contact Referral</b>	Click here to enter text.
<b>Tenancy details (East Durham homes, Private rented etc.)</b>	Click here to enter text.
<b>Relationship to victim (Married, Separated, Family Members etc.)</b>	Click here to enter text.
<b>Occupation/place of work</b>	Click here to enter text.

## Details of Suspect

<b>Name</b>	Click here to enter text.
<b>DOB</b>	Click here to enter text.
<b>Address</b>	Click here to enter text.
<b>Tenancy details (East Durham homes, Private rented etc.)</b>	Click here to enter text.
<b>Relationship to victim (Married, Separated, Family Members etc.)</b>	Click here to enter text.
<b>Occupation/place of work</b>	Click here to enter text.

## Children

<b>Name</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
<b>DOB</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
<b>Address</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
<b>Parents</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

<b>School/Nursery</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
<b>GP Surgery</b>	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

## Other agency involvement

<p><b>Have any Child Protection Referrals been made by the agency following on from this consultation?</b></p> <p><b>If yes please give details</b></p>	<p>Click here to enter text.</p>
<p><b>Are you aware of any other agency involvement?</b></p> <p><b>If yes please give details (staff/worker involved etc.)</b></p>	<p>Click here to enter text.</p>

# Reasons for referral

(Use this space to add any other information which you feel is relevant, also include any actions that you have taken before submitting this form, and outline any other concerns you or the victim may have)

# Definition of Domestic Abuse

**The Home Office Definition of Domestic Abuse** 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults (aged 16 or over) who are or have been intimate partners or family members, regardless of gender or sexuality. This includes issues of concerns to black and minority ethnic communities such as 'so called' crimes of honour, forced marriage and female genital mutilation.

It will also include family members who are defined as mother, father, son, daughter, brother, sister, grandparents, in-laws and step-family.

**Honour Based Violence Definition** 'A crime or incident which has or may have been committed to protect or defend the honour of the family and/or community'

**Forced Marriage Definition** 'A forced Marriage is a marriage where one or both parties do not consent to the marriage or consent is extracted under duress'

**In cases of HBV and FM, a separate and specific Risk Assessment Form needs to be completed. For further information please contact MARAC, or the Police Domestic Violence Unit for further information.**

**PRIVATE & CONFIDENTIAL**

**Dear**

**Domestic abuse is a crime that can include assault, sexual assault, harassment, injury and damage to property. It is a crime that the police and other agencies treat seriously.**

Occasionally people are identified as being at “high risk” of becoming a victim again, and it is normal procedure that a Multi Agency Risk Assessment conference (M.A.R.A.C) is held, to discuss various issues in relation to the safety and well being of the identified person, and, if appropriate, their children.

The meetings are attended by individuals from various organisations; information may be sought from County Council Children and Adult Services, Health, such as G.P, Health Visitor, Mental Health, School Nurse etc, Domestic Violence Forum, Police, Probation Service, Independent Domestic Violence Advocate and Housing. Any information is shared and treated in the strictest confidence. A risk management plan is often implemented, offering the appropriate support available. We would like your consent to gather and share relevant information, so that we can look towards reducing repeat victimisation and any further harm being caused. If you give your consent please could you sign below.

We also work with many organisations that may be able to provide further help and advice. The National Domestic Violence helpline offers a 24 hour service and their contact details are 0808 2000247. Telephone calls from a landline are free but calls from mobile telephones are variable.

If you would like to discuss the contents of this letter or have any questions, please do not hesitate to contact the person who distributed it on our behalf.

**I give my consent for information to be shared with the relevant agencies and for MARAC purpose only.**

**Signed** [Click here to enter text.](#) **Date** [Click here to enter text.](#)

Yours Sincerely

Catherine Glass

MARAC Coordinator

**ACPO/CAADA Domestic Abuse, Stalking and Harassment and Honour**

**Based Violence (DASH 2009) Risk Model**

**Adapted by Durham Constabulary for use by Multi-Agencies in Co Durham & Darlington**



**Domestic Abuse, Stalking and Harassment and Honour Based Violence (DASH 2009) Risk Identification and Assessment Checklist for Co Durham & Darlington Multi-Agencies**

**Risk assessment is not a predictive process and there is no existing accurate procedure to calculate or foresee which cases will result in homicide or further assault and harm.**

**This risk identification and checklist has been slightly adapted by Durham Constabulary so that agencies within Co Durham and Darlington can use this form as part of the MARAC referral documentation.**

**The only amendments are to de-bold questions so that agency staff concentrate and complete all the questions of the assessment with the victim and never with the perpetrator present. The questions, once staff start to become familiar with them should be asked as part of a conversation with the victim providing explanations for the victim if they are unsure what is meant by a particular phrase i.e. “stalking”.**

**MARAC training is currently being rolled out across Co Durham and Darlington and staff should make every effort to attend this to familiarise themselves fully with the MARAC process.**

**If any member of staff has concerns or is unsure with any aspect of this process please consult firstly with your supervisor or contact the MARAC Coordinator for advice and guidance**



# DASH Risk Assessment

Please complete ALL applicable questions

<p><i>Please explain that the purpose of asking these questions is for the safety and protection of the individual concerned. Tick the box if the factor is present. Please use the comment box at the end of the form to expand on any answer.</i></p> <p><i>It is assumed that your main source of information is the victim. If this is not the case, please indicate in the right hand column along with any information.</i></p>	Yes	No	Don't Know	<p>State the Source of information e.g.(victim) Any comments or additional information?</p>
1) Has the current incident resulted in injury?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
2) Are you very frightened?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
3) What are you afraid off? Is it further injury or violence? Please give an indication of what you think [name of abuser(s)] might do and to whom, including children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
4) Do you feel isolated from family/friends? I.e., does [name of abuser(s)] try to stop you from seeing Friends/family/doctor or others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
5) Are you feeling depressed or having suicidal thoughts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
6) Have you separated or tried to separate from (name of abuser(s)...) within the past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
7) Is there conflict over child contact? (please state what)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
8) Are you pregnant or have you recently had a baby (within the last 18 months)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
9) Is the abuse happening more often?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.

10) Does (.....) constantly text, call, contact, follow, stalk or harass you? (Please expand to identify what and whether you believe that this is done deliberately to intimidate you?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
11) Are there any children, step-children that aren't (.....) in the household? Or are there other dependants in the household (i.e. older relative)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
12) Has (.....) ever hurt the children/dependants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
13) Has (.....) ever threatened to hurt or kill the children/dependants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
14) Is the abuse getting worse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
15) Does [name of abuser(s)] try to control everything you do and/or are they excessively jealous? <i>For example: in terms of relationships; who you see; being 'policed' at home; telling you what to wear. Consider 'honour'-based violence (HBV) and specify behaviour.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
16) Has [name of abuser(s)] ever used weapons or objects to hurt you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
17) Has [name of abuser(s)] ever threatened to kill you or someone else and you believed them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
18) Has [name of abuser(s)] ever attempted to strangle / choke / suffocate / drown you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
19) Does [name of abuser(s)] do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else? If someone else, specify who.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
20) Is there any other person who has threatened you or who you are afraid of? If yes, please specify whom and why. Consider extended family if HBV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
21) Do you know if [name of abuser(s)] has hurt anyone else?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.

Consider HBV. Please specify whom, including the children, siblings or elderly relatives:				
22) Has [name of abuser(s)] ever mistreated an animal or the family pet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
23) Are there any financial issues? <i>For example, are you dependent on [name of abuser(s)] for money/have they recently lost their job/other financial issues?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
24) Has [name of abuser(s)] had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
25) Has [name of abuser(s)] ever threatened or attempted suicide?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
26) Has [name of abuser(s)] ever broken bail/an injunction and/or formal agreement for when they can see you and/or the children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
27) Do you know if [name of abuser(s)] has ever been in trouble with the police or has a criminal history?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
<b>Consideration by professional</b>				
Is there any other relevant information (from victim or professional) which may increase risk levels? Consider victim's situation in relation to disability, substance misuse, mental health issues, cultural / language barriers, 'honour'- based systems, geographic isolation and minimisation.	Click here to enter text.			

Are they willing to engage with your service? Describe.	
Consider abuser's occupation / interests. Could this give them unique access to weapons? Describe.	Click here to enter text.
What are the victim's greatest priorities to address their safety?	Click here to enter text.

**RISK TO VICTIM:**

**PLEASE APPLY APPLICABLE GRADING BELOW**

STANDARD

MEDIUM

HIGH

When grading risk this is based on 3 things how the victim rates their level of risk, how you rate the victims level of risk based on what they have said or on what you have seen i.e. injuries that the victim may not have fully explained but cause you concern and finally on your professional judgement. In Durham we encourage all agencies to make a referral to our MARAC Coordinator who is happy to discuss and give advice re any assessment but also to receive any assessment even if you are unsure whether it is High Risk. The MARAC Coordinator can look at the information on this risk assessment and can then start a process of information sharing if she feels the risk dictates to ascertain what other agencies may know about the victim.

Total Number questions were answered "Yes":