**Southend, Essex & Thurrock MARAC Referral Form**

MARAC Referrals should be sent by email to the appropriate MARAC Coordinator;

EssexMARACReferrals@essex.police.uk

maracsouthend@southend.gov.uk

ThurrockMARAC@thurrock.gov.uk

Please note this form will be returned and the referral will not be processed unless completed in full

* **If you disclose any unreported crime on this referral, please be advised and advise the victim that police record these crimes and may be obliged to investigate them.**
* **Information sharing: In your referral, please only name the victim and suspect. If mentioning another adult party, please use their relation to the victim or the suspect ie ‘paternal Grandmother’ or ‘third party’. Any disclosure of personal sensitive information of adult third parties will result in the referral being rejected and returned to your agency as a breach of data protection rules.**
* **It is your responsibility to safeguard victims at the point of disclosure of domestic abuse, this is not the responsibility of MARAC.**
* **If this referral is incorrectly completed or mandatory information is not completed it will be rejected and returned. PDF files are not accepted.**

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| --- |
| 1. **Referring Agency**
 |
| **Date of referral** |       | **Referrer Name & Agency** |       |
| **Tel. Ext/ Email address** |       | **Referring Agency’s Line Manager or Safeguarding Lead who has approved this referral as High Risk.****Contact details**  | **This referral will not be accepted without confirmation of line manager approval of High Risk**,  |
| **Police Officer in Charge (if applicable)** |       | **Police Officer in Charge Tel. number/ Email address if external force to Essex – if known****Crime Report Number if known** |             |
| **Repeat Referral?** |  | **If yes- date of last MARAC** |       |
| **Has the victim been referred to MARAC in another area?** |  | **Does the victim want to speak to Police about any offences disclosed in this referral?** | **This question is mandatory and must be answered with a full rationale. The referral will not be accepted if this is not completed.** |
| 1. **Victim**
 |
| **Victim Name** |       | **Victim Age** |       |
| **Victim DOB** |       | **Gender** |  |
| **Victim Address** |       | **Victim Telephone Number** |       |
|  |  | **Relevant Contact Information** e.g. times to call, is number safe to call? |       |
|  |  | **Homeowner Details**e.g. Housing Association (specify which if known), Landlord including contact details |  |
| **Victim’s first language, if not English** |  | **Does the victim require an interpreter?**  |  |
| **Victims Occupation** |  | **Victims Employer** |  |
| **GP’s Details** |       | **Is the victim pregnant?** If yes, please provide any relevant information |  |
| **Have you made the victim aware of the MARAC referral? If not, why not?** |  | **What does the victim want from the MARAC process to make them feel safer?** |  |
| 1. **Victims Diversity**
 |
| **Victims Ethnicity** |  | **Sexual Orientation** |  |
| **Disabilities** |  | **Religion** |  |
| 1. **Perpetrator(s)**
 |
| **Perpetrator Name**  |       | **Perpetrator Address & Homeowner details**e.g. Housing Association (specify which if known), Landlord including contact details |       |
| **Perpetrator DOB/ Age** |       |  |  |
| **Relationship to Victim** |       |  |  |
| **Perpetrators Telephone Number** |       |  |  |
| **Perpetrators Occupation**  |  |
| 1. **Perpetrator Diversity**
 |
| **Perpetrators Ethnicity** |  | **Sexual Orientation** |  |
| **Disabilities** |  | **Religion** |  |
| 1. **Children (Victim & Perpetrator)**
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| **If you list Children, you must complete a safeguarding referral to children’s services, if this is not shown as completed below the referral will be returned for completion.** |
| **\*Date of referral to Children & Families Hub to be inserted here -**  |
| **Child** **Name** | **DOB** | **Age** | **Address** | **Relationship to Victim** | **Relationship to Perpetrator** | **School/ Educational Setting** |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
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| 1. **Reasons for Referral**
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| **Reason for Referral** | [ ]  **Professional Judgment**[ ]  **Escalation** [ ]  **Visible High Risk** (14 or more ticks on DASH) |
| **Number of ticks on DASH** |       |
| **Current Incident** | Notes to include: * Date of last incident and any other incidents disclosed. Explain briefly what happened and please confirm if these incidents have been reported to Police.
* If you disclose any unreported crime on this referral please be advised, and advise the victim, that police record these crimes and may be obliged to investigate them.
* In your opinion is it safe for the police to contact this victim if not why?
* Does the victim want contact with the police if not why?
* Why is this person high risk now?

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| **Background**  | Notes to include: * How long together?
* Separated? If so, when?
* Over what period has abuse occurred and summary of what has occurred. (You do not need to list every incident)
* Give details of agencies engaged with the perpetrator

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| **Current Information about the Perpetrator**(Please include further details if applicable- for instance bail conditions, date of next court appearance, agencies who may be supporting)  |                 |
| **Risks Identified****(Please include if perpetrator has access to weapons, particularly firearms. Are they a firearms licence holder?)** | Substance misuse [ ] Mental Health [ ] Animal Cruelty [ ] Strangulation [ ] Pregnancy [ ] Escalation [ ] Threats to kill [ ] Separation [ ] Child contact [ ] Weapons [ ] Lack of engagement [ ] Firearms [ ] Honour Based Abuse [ ] Other (Please specify)       | Breach of orders [ ] Threats to commit suicide [ ] Isolation [ ] Harassment [ ]  Controlling/ Jealous behaviour [ ] Sexual abuse [ ] Financial issues [ ] Cultural issues [ ] Child Protection [ ] Stalking [ ] Minimising [ ] Criminal history [ ] Violent history [ ]  |
| **Actions Taken at Time of Referral** | I**DVA** – Independent Domestic Violence Advisor (please can you confirm if consent is given) [www.essexcompass.org.uk](http://www.essexcompass.org.uk)COMPASS Contact – 0330-3337444* Date of referral –
 |
|  | **Sanctuary Scheme -*** Date of Referral –
 |
|  | **LADO – Local Authority Designated Officer*** Date of Referral –
 |
|  | **NCDV – National Centre for Domestic Violence*** Date of Referral -
 |
|  | **Safety Planning** * Date Completed –
 |
|  | **Alarm Installed** * Date Completed –
 |
|  | **SERICC** (South Crisis Services). – [www.sericc.org.uk](http://www.sericc.org.uk)* Date of Referral –
 |
|  | **CARA** (North Rape Crisis) - [www.caraessex.org.uk](http://www.caraessex.org.uk)* Date of referral -

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|  | **SOS Rape Crisis** (Southend, Castlepoint & Rochford)* **Date of referral -**
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|  |  |

**VICTIMS NAME…………………………………………**

**VICTIMS D.O.B……………………………………………**

**AGENCY COMPLETING………………………………..**

**Domestic Abuse, Stalking and Harassment and Honour Based Violence (DASH, 2009) Risk Identification and Assessment and Management Model**

**Risk identification and 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.**

**The DASH (2009) Risk Checklist was created by Laura Richards, BSc, MSc, FRSA on behalf of ACPO and in partnership with CAADA.**

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**It has also been endorsed by:**

**   **

**PLEASE DO NOT CHANGE THIS RISK IDENTIFICATION AND ASSESSMENT MODEL**

If you do have comments or suggestions please send them to:

Laura Richards, BSc, MSc, FRSA

Criminal Behavioural Psychologist

(E): laura@laurarichards.co.uk

(W): [www.laurarichards.co.uk](http://www.laurarichards.co.uk)

(W): [www.dashriskchecklist.co.uk](http://www.dashriskchecklist.co.uk)

**Risk Identification for Trained Front Line Practitioners** (Please refer to the DASH (2009) Practice Guidance on Risk Identification in full)

A number of high risk factors have been identified as being associated with serous violence and murder through researching many cases. Any professional using the DASH (2009) must be trained in it’s use. This is crucial to understanding what the high risk factors are and how they apply in each situation, and what needs to be done to keep the victim safe.

This form should be completed for ALL cases of domestic abuse by front line staff. Initial risk identification must be undertaken by asking ALL the questions on this checklist, as well as searching appropriate databases, such as the intelligence databases. First response staff and their supervisor should identify risk factors, who is at risk and decide what level of intervention is required.

Details of children resident at the address must be provided. Consider the nature of the information and what it means in terms of public protection - preservation of life, reduction and prevention of harm to victim and others.

Please ensure that when you ask these questions the victim is comfortable and understands why you are asking them – it is about their safety and protection. Particular sensitivity and attention is required when asking about whether the victim has been assaulted, physically and/or sexually by the perpetrator. The vulnerability of victims cannot be overstated. This could be further compounded by issues such as traditional gender roles, literacy, language and/or immigration or refugee status. Please take into consideration the victim’s perception of risk.

Please ensure you ask the victim about the abuser’s behaviour when stalking and honour based violence are present. Do not just tick the box ‘yes’. You must identify what is happening. There are specific risk factors that relate to these areas as well. Assessment of risk is complex and NOT related to the number of risks appearing alone. Rather, the risk posed to the victim or others in a particular situation will be dependent upon what they are and how they apply in that context. Refer to the full DASH (2009) Practice Guidance on Risk Identification.

Record what steps you have taken to ensure the immediate safety of the victim(s) and any children. Ask yourself ‘Am I satisfied that I have done all I can?’ Everything you do must be recorded.

The risk identification process must remain dynamic. Events and circumstances may undergo rapid and frequent change. Where this is the case, the assessment must be kept under review. Risk identification is based on structured professional judgement. This model is most effective when undertaken by professionals who have been fully trained in its use. High risk cases may well require a multi-agency response and should be referred to the relevant risk management panel i.e. the Multi-Agency Risk Assessment Conference (MARAC) or Multi-Agency Public Protection Panel (MAPPP). MARACs are for the most serious and high risk cases.

**Risk Assessment Categorisation**This is *based* on the Offender Assessment System (OASys) developed by the Prison and Probation Services definitions of what constitutes standard, medium, high risk. Please use your professional judgement to categorise the risk level:

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| --- | --- |
| **Standard** | Current evidence does not indicate likelihood of causing serious harm. |
| **Medium** | There are identifiable indicators of risk of serious harm. The offender has the potential to cause serious harm but is unlikely to do so unless there is a change in circumstances, for example, failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse. |
| **High** | There are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious. Risk of serious harm (Home Office 2002 and OASys 2006):‘A risk which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible’. |

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| current situationThe context and detail of what is happening is very important. The questions highlighted in bold are high risk factors. Tick the relevant box and add comment where necessary to expand. | Yes☑ | No☑ |
| 1. Has the current incident resulted in injury? (please state what and whether this is the first injury)
 |  [ ]  | [ ]  |
| 2. Are you very frightened? Comment: | [ ]  | [ ]  |
| 3. What are you afraid of? Is it further injury or violence? (Please give an indication of what you think (name of abuser(s)….. might do and to whom)  Kill: Self 🞎 Children 🞎 Other (please specify) 🞎 Further injury and violence: Self 🞎 Children 🞎 Other (please specify) 🞎Other (please clarify): Self 🞎 Children 🞎 Other (please specify) 🞎 | [ ]  | [ ]  |
| 4. Do you feel isolated from family/ friends i.e. does (name of abuser(s)…..) try to stop you from seeing friends/family/Dr or others? | [ ]  | [ ]  |
| 5. Are you feeling depressed or having suicidal thoughts? | [ ]  | [ ]  |
| 6. Have you separated or tried to separate from (name of abuser(s)….) within the past year?  | [ ]  | [ ]  |
| 7. Is there conflict over child contact? (please state what) | [ ]  | [ ]  |
| 8. 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? Consider the context and behaviour of what is being done. Ask 11 additional stalking questions\*) | [ ]  | [ ]  |
| Children/Dependents (If no children/dependants, please go to the next section) | Yes | No |
| 9. Are you currently pregnant or have you recently had a baby in the past 18 months? | [ ]  | [ ]  |
| 10. Are there any children, step-children that aren’t (…..) in the household? Or are there other dependants in the household (i.e. older relative)?  | [ ]  | [ ]  |
| 11. Has (…..) ever hurt the children/dependants? | [ ]  | [ ]  |
| 12. Has (…..) ever threatened to hurt or kill the children/dependants?  | [ ]  | [ ]  |
| Domestic Violence History | Yes | No |
| 13. Is the abuse happening more often? | [ ]  | [ ]  |
| 14. Is the abuse getting worse? | [ ]  | [ ]  |
| 15. Does (…….) try to control everything you do and/or are they excessively jealous? (In terms of relationships, who you see, being ‘policed at home’, telling you what to wear for example. Consider honour based violence and stalking and specify the behaviour) | [ ]  | [ ]  |
| 16. Has (…..) ever used weapons or objects to hurt you? | [ ]  | [ ]  |
| 17. Has (…..) ever threatened to kill you or someone else and you believed them? | [ ]  | [ ]  |
| 18. Has (…..) ever attempted to strangle/choke/suffocate/drown you? | [ ]  | [ ]  |
| 19. Does (….) do or say things of a sexual nature that makes you feel bad or that physically hurt you or someone else? (Please specify who and what) | [ ]  | [ ]  |
| 1. Is there any other person that has threatened you or that you are afraid of? (If yes, consider extended family if honour based violence. Please specify who. Ask 10 additional HBV questions\*)
 | [ ]  | [ ]  |
| 1. Do you know if (…..) has hurt anyone else ? (children/siblings/elderly relative/stranger, for example. Consider HBV. Please specify who and what)

Children 🞎 Another family member 🞎 Someone from a previous relationship 🞎 Other (please specify) 🞎 | [ ]  | [ ]  |
| 22. Has (…..) ever mistreated an animal or the family pet? | [ ]  | [ ]  |
| Abuser(s) | Yes | No |
| 23. Are there any financial issues? For example, are you dependent on (…..) for money/have they recently lost their job/other financial issues? |  [ ]  | [ ]  |
| 24. Has (…..) had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life? (Please specify what)  Drugs 🞎 Alcohol 🞎 Mental Health 🞎 | [ ]  | [ ]  |
| 25. Has (…..) ever threatened or attempted suicide? | [ ]  | [ ]  |
| 26. Has (…..) ever breached bail/an injunction and/or any agreement for when they can see you and/or the children? (Please specify what)Bail conditions 🞎 Non Molestation/Occupation Order 🞎 Child Contact arrangements 🞎 Forced Marriage Protection Order 🞎 Other 🞎 | [ ]  | [ ]  |
| 27. Do you know if (……..) has ever been in trouble with the police or has a criminal history? (If yes, please specify)DV 🞎 Sexual violence 🞎 Other violence 🞎 Other 🞎 | [ ]  | [ ]  |
| Other relevant information (from victim or officer) which may alter risk levels. Describe: (consider for example victim’s vulnerability - disability, mental health, alcohol/substance misuse and/or the abuser’s occupation/interests-does this give unique access to weapons i.e. ex-military, police, pest control) or is there serial offending? |  |  |
| Is there anything else you would like to add to this? |  |  |

In **all** cases an initial risk classification is required:

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| **risk to victim:** |
| STANDARD [ ]  | MEDIUM [ ]  | HIGH [ ]  |

**DASH (2009) Additional Stalking and Harassment Risk Questions**

**Q8. 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? Consider the context and behaviour of what is being done)

**PRACTICE POINTS: If the victim answers ‘yes’ to this question then you must ask the following as they are risk factors for future violence:**

* Is the victim very frightened?

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* Is there previous domestic abuse and harassment history?

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* Has (insert name of the abuser....)vandalised or destroyed property?

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* Has (insert name of the abuser....) turned up unannounced more than three times a week?

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* Is (insert name of the abuser....) following the victim or loitering near the victim?

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* Has (insert name of the abuser....) threatened physical or sexual violence?

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* Has (insert name of the abuser....) been harassing any third party since the harassment began (i.e. family, children, friends, neighbours, colleagues)?

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* Has (insert name of the abuser....) acted violently to anyone else during the stalking incident?

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* Has (insert name of the abuser....) engaged others to help (wittingly or unwittingly)?

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* Is (insert name of the abuser....) been abusing alcohol/drugs?

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* Has (insert name of the abuser....) been violent in past? (Physical and psychological. Intelligence or reported)

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**DASH (2009) Additional HBV Risk Questions**

**Q20. Is there any other person who has threatened you or who you are afraid of?\*** (If yes, please specify who and why. Consider extended family if HBV)

**Practice Point: If the victim is subject to HBV and answers ‘yes’ to this question, ask the following questions:**

* Truanting – if under 18 years old is the victim truanting?

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* Self-harm – is there evidence of self-harm?

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* House arrest and being ‘policed at home’ – is the victim being kept at home or their behaviour activity being policed(describe the behaviours)?

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* Fear of being forced into an engagement/marriage – is the victim worried that they will be forced to marry against their will?

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* Pressure to go abroad – is the victim fearful of being taken abroad?

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* Isolation – is the victim very isolated?

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* A pre-marital relationship or extra marital affairs – is the victim believed to be in a relationship that is not approved of?

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* Attempts to separate or divorce (child contact issues) –is the victim attempting to leave the relationship?

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* Threats that they will never see the children again – are there threats that the child(ren) will be taken away?

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* Threats to hurt/kill – are there threats to hurt or kill the vitcim?

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