

# Suffolk MARAC Referral Form

MARAC referrals should be sent by **secure email** to [MARACadmin@suffolk.pnn.police.uk](mailto:MARACadmin@suffolk.pnn.police.uk).

Please complete the form in full and submit with the DASH Risk Assessment (if completed)

<b>Referring Agency</b>	Apple Surgery
<b>Contact Name(s)</b>	Joe Bloggs
<b>Telephone Number</b>	01473 000000
<b>Email Address</b>	Joe.bloggs@nhs.net
<b>Date</b>	18/05/17

*\*\* When submitting a referral you (or a representative) are expected to attend the allocated meeting to present your concerns \*\**

**Details of the Parties involved:**

<b>Victim Name</b>	Muriel Smith	<b>Victim DOB</b>	01/05/1972
<b>Address</b>	1 Free Street, Simpletown, Suffolk		
<b>Telephone number</b>	01473 111111	<b>Is this number safe to call?</b>	No
<b>Please insert any relevant contact information, eg times to call</b>	Only call between 10am and 4pm- if male answers say wrong number		
<b>Diversity data (if known)</b>	B&ME <input type="checkbox"/> Disabled <input type="checkbox"/> LGBT <input type="checkbox"/> Gender <input type="checkbox"/> Female		

<b>Perpetrator(s) Name</b>		<b>Perpetrator(s) DOB</b>	08/03/1969
<b>Perpetrator(s) address</b>	John Smith	<b>Relationship to victim</b>	Husband

<b>Children</b> (include all children who are in contact with the parties)	<b>DOB</b>	<b>Relationship to victim</b>	<b>Relationship to perpetrator</b>	<b>Address</b>	<b>School (If known)</b>
Milo Smith	13/06/06	Son	Son	As above	Simpletown Primary School

**Reason for Referral:**

Professional judgement	x	Visible high risk ( 14 ticks or more on SafeLives - DASH RIC)	12
Potential escalation (3 or more incidents reported to the Police in the past 12 months)	u/k	MARAC repeat (further incident identified within twelve months from the date of the last referral)	u/k
If yes, please provide the date listed / case number (if known)	unknown		
Is the victim aware of MARAC referral?	Yes	If no, why not?	
Has consent been given?	Yes		
Who is the victim afraid of? (to include all potential threats, and not just primary perpetrator)	Husband		
Who does the victim believe it safe to talk to?	Health Professionals/ School		
Who does the victim believe it not safe to talk to?	Husband		
Has the victim been referred to any other MARAC previously?	u/k	If yes where / when?	

**THIS PART OF THE FORM MUST BE COMPLETED**

**Please give a brief summary of your concerns and the risks as you see them.**

Although the score is 12 I feel that this could escalate and the patient has now asked for help. I am referring on Professional Judgement.

**Please outline any specific ways in which you feel MARAC could assist this case:**

**Information sharing- making other agencies aware of the situation.  
 Increase the safety of victim and child  
 Address Domestic Abuse with Husband**

SAMPLE

# Suffolk MARAC DASH Risk Checklist

Please ensure that the MARAC referral form is completed and submitted with this Risk Assessment if a referral to MARAC is required

Referring agency	Apple Surgery
Contact name(s)	Joe Bloggs
Telephone / Email	01473 000000
Date	18/05/17

Victim Name	Muriel Smith	Victim DOB	01/05/1972
Address	1 Free Street, Simpletown, Suffolk		

## Aim of the form

- To help frontline practitioners identify high risk cases of domestic abuse, stalking and 'honour-based' violence
- To decide which cases should be referred to MARAC and what other support might be required. A completed form becomes an active record that can be referred to in future for case management
- To offer a common tool to agencies that are part of the MARAC process and provide a shared understanding of risk in relation to domestic abuse, stalking and 'honour-based' violence
- To enable agencies to make defensible decisions based on the evidence from extensive research of cases, including domestic homicides and 'near misses' which underpins most recognised models of risk assessment

## How to use the form

Before completing the form for the first time it is recommended that you read the full practice guidance and FAQs.

These can be downloaded from: [http://www.safelives.org.uk/marac/RIC\\_for\\_Marac.html](http://www.safelives.org.uk/marac/RIC_for_Marac.html)

Risk is dynamic and can change very quickly. It is good practice to review the checklist after a new incident.

## Recommended referral criteria to MARAC

1. **Professional judgement:** if a professional has serious concerns about a Victim's situation, they should refer the case to MARAC. There will be occasions where the particular context of a case gives rise to serious concerns even if the victim has been unable to disclose the information that might highlight their risk more clearly. **This could reflect extreme levels of fear, cultural barriers to disclosure, immigration issues or language barriers, particularly in cases of 'honour-based' violence.** This judgement would be based on the professional's experience and/or the victim's perception of their risk even if they do not meet criteria 2 and/or 3 below
2. **'Visible High Risk':** the number of 'ticks' on this checklist. If you have ticked 14 or more 'yes' boxes the case would normally meet the MARAC referral criteria.
3. **Potential Escalation:** the number of police callouts to the Victim as a result of domestic violence in the past 12 months. This criterion can be used to identify cases where there is not a positive identification of a majority of the risk factors on the list, but where abuse appears to be escalating and where it is appropriate to assess the situation more fully by sharing information at MARAC. It is Suffolk's common practice to start with 6 or more police callouts in a 6 month period but this will be reviewed on a case by case basis.

Please pay particular attention to a practitioner's professional judgement in all cases. The results from a checklist are not a definitive assessment of risk. They should provide you with a structure to inform your judgement and act as prompts to further questioning, analysis and risk management whether via a MARAC or in another way.

**The responsibility for identifying your local referral threshold rests with your local MARAC.**

## What this form is not:

This form will provide valuable information about the risks that children are living with but it is not a full risk assessment for children. The presence of children increases the wider risks of domestic violence and step-children are particularly at risk. If risk towards children is highlighted you should consider what referral you need to make to obtain a full assessment of the children's situation.

<p>Please explain that the purpose of asking these questions is for the safety and protection of the individual concern.</p> <p>Tick the box if the factor is present. Please use the comment box at the end of the form to expand on any answer.</p> <p>It is assumed that your main source of information is the victim. If this is <u>not the case</u>, please indicate this in the right-hand column</p>	PLEASE TICK RELEVANT BOX			State source of information if not the Victim (eg Police Officer)
	YES	NO	DON'T KNOW	
<p>1. <b>Has the current incident resulted in injury?</b></p> <p>What was the injury?</p> <p>When did the injury occur?</p> <p>Was this reported to Police?</p>		X		
<p>2. <b>Are you very frightened?</b></p> <p>Comment: <b>Of what he might do if I mess up</b></p>	X			
<p>3. <b>What are you afraid of? Is it further injury or violence?</b></p> <p>Please give an indication of what you think your abuser might do and to whom, including children</p> <p>Comment: <b>He may hurt me, our son or himself</b></p>	X			
<p>4. <b>Do you feel isolated from family/friends?</b></p> <p>Does your abuser try to stop you from seeing friends / family / doctor or others?</p> <p>Comment: <b>I am not allowed to have friends or see my family alone</b></p>	X			
<p>5. <b>Are you feeling depressed or having suicidal thoughts?</b></p>	X			
<p>6. <b>Have you separated or tried to separate from your abuser within the past year?</b></p>		X		
<p>7. <b>Is there conflict over child contact?</b></p>		X		
<p>8. <b>Does your abuser constantly text, call, contact, follow, stalk or harass you?</b></p> <p>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</p> <p><b>When he at work he always makes me stay home- he calls the home phone several times a day to ensure I am at home</b></p>	X			
<p>9. <b>Are you pregnant or have you recently had a baby (within the last 18 months)?</b></p>		X		
<p>10. <b>Is the abuse happening more often?</b></p>	X			
<p>11. <b>Is the abuse getting worse?</b></p>	X			

<p><b>12. Does the abuser try to control everything you do and/or are they excessively jealous?</b></p> <p>For example: in terms of relationship, who you see, being 'policed' at home; telling you what to wear. Consider 'honour-based' violence (HBV) and specify behaviour</p> <p><b>I cannot do or say anything, I cannot go anywhere on my own even with my son. He always thinks I have another man.</b></p>	x			
<p><b>13. Has your abuser ever used weapons or objects to hurt you?</b></p> <p>Approximately when did this occur?</p> <p>Did this cause injury?</p> <p>Was this reported to Police?</p>		x		
<p><b>14. Has your abuser ever threatened to kill you or someone else and you believed them?</b></p> <p>If yes, tick who:</p> <p>You <input checked="" type="checkbox"/> x</p> <p>Children <input checked="" type="checkbox"/> x</p> <p>Other (please specify) <input checked="" type="checkbox"/> x</p> <p>Approximately when did this occur? Often- last time this week- he said if I leave him he will kill himself. He has previously threatened to kill me and Milo if I leave him</p>	x			
<p><b>15. Has your abuser ever attempted to strangle / choke / suffocate / drown you?</b></p> <p>Approximately when did this occur?</p>		x		
<p><b>16. Does your abuser do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else?</b></p> <p>If someone else, please specify who.</p>		x		
<p><b>17. Is there any other person who has threatened you or who you are afraid of?</b></p> <p>If yes, please specify whom, when and why. Consider extended family if HBV.</p>		x		
<p><b>18. Do you know if [name of abuser(s)] has hurt anyone else?</b></p> <p>Consider HBV. Please specify whom, including the children, siblings or elderly relatives:</p> <p>Children <input type="checkbox"/></p> <p>Another family member <input type="checkbox"/></p> <p>Someone from a previous relationship <input type="checkbox"/></p> <p>Other (please specify) <input type="checkbox"/></p>		x		
<p><b>19. Has your abuser ever mistreated an animal or the family pet?</b></p>		x		
<p><b>20. Are there any financial issues?</b></p> <p>For example, are you dependent on your abuser for money / have they recently lost their job / other financial issues?</p> <p>I don't know anything about the money- he will only give me money for food or things for Milo, this is limited.</p>	x			

<p><b>21. 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?</b></p> <p>If yes, please specify which and give relevant details if known.</p> <p>Drugs <input type="checkbox"/></p> <p>Alcohol <input checked="" type="checkbox"/></p> <p>Mental health <input type="checkbox"/></p>	x			
<p><b>22. Has your abuser ever threatened or attempted suicide?</b></p>	x			
<p><b>23. Has your abuser ever broken bail/an injunction and/or formal agreement for when they can see you and/or the children?</b></p> <p>You may wish to consider this in relation to an ex-partner of the perpetrator if relevant.</p> <p>Bail conditions <input type="checkbox"/></p> <p>Non Molestation/Occupation Order <input type="checkbox"/></p> <p>Child contact arrangements <input type="checkbox"/></p> <p>Forced Marriage Protection Order <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Approximately when did this occur?</p>		x		
<p><b>24. Do you know if [name of abuser(s)] has ever been in trouble with the police or has a criminal history?</b></p> <p>If yes, please specify:</p> <p>Domestic abuse <input type="checkbox"/></p> <p>Sexual violence <input type="checkbox"/></p> <p>Other violence <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p>			x	
<p><b>Total number of 'yes' responses</b></p>	12			

**For consideration by professional:**

<p><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. Are they willing to engage with your service? Describe.</b></p>	<p><b>The patient requires support- no additional needs</b>  <b>She is feeling depressed.</b></p>
<p><b>Consider abuser's occupation / interests. Could this give them unique access to weapons? Describe.</b></p>	<p>Husbands Occupation- Butcher access to sharp knives</p>
<p><b>What are the victim's greatest priorities to address their safety?</b></p>	<p><b>She wants to feel safe and have a normal life and for her husband to get the help he needs</b></p>
<p><b>Do you believe that there are reasonable grounds for referring this case to MARAC?</b></p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>

If yes, have you made a referral?		Yes	<input checked="" type="checkbox"/>
		No	<input type="checkbox"/>
Signed	J Bloggs	Date	18/05/17
Do you believe that there are risks facing the children in the family?		Yes	<input checked="" type="checkbox"/>
		No	<input type="checkbox"/>
If yes, please confirm if you have made a referral to safeguard the children?	Yes	Date referral made	18/05/17
Signed	J Bloggs	Date	
Name	Joe Bloggs		

**Practitioner's notes** – additional information to be added in conjunction with the questions asked in the DASH questionnaire

Victim is tired and drained and feels so trapped this is beginning to affect her Mental Health.  
 Concerns for the child and how this is affecting him.  
 Husband has threatened to kill himself several times if she leaves or does not comply.  
 Husband has previously threatened to kill the patient and the son.  
 Patient cannot work due to the abuse and is socially isolate. She does not have any friends and is not allowed to see her family without him- which doesn't happen very often.  
 Husband controls the finances.