



Sheffield Marac Report

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31st October 2023

About SafeLives



We are SafeLives, the UK-wide charity dedicated to ending domestic abuse, for everyone and for good.



We are independent, practical and evidence-led, with survivor voices at the heart of our thinking.



We work with organisations across the UK to transform the response to domestic abuse.

We want what you want for your best friend:



Action before someone is harmed or harms others

Harmful behaviour identified and stopped



Increased safety for everyone at risk



The ability for people to live the life they want after harm has happened

Ending domestic abuse

Terminology and Language

Women are more likely than men to experience repeat victimisation, be physically injured or killed as a result of domestic abuse and experience non-physical abuse, including emotional and financial abuse.

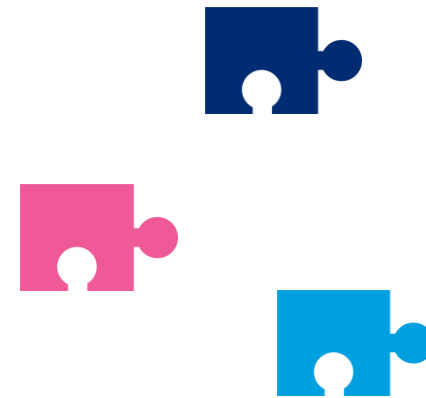
It is, therefore, sometimes necessary to use gendered language and reflect this in our understanding of the domestic abuse system and response. However, we acknowledge that there is not only one type of victim and that there will be individual needs as a result.

We will use the terms 'perpetrator' and 'person who harms' interchangeably throughout the report.

The primary focus of the Marac

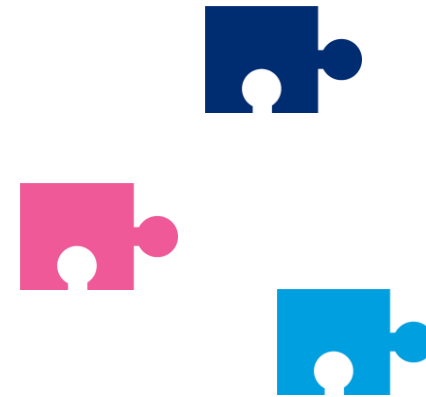
At the heart of a Marac is the working assumption that **no single agency or individual can see the complete picture of the life of a victim**, but all may have insights that are crucial to their safety.

A victim identified at high risk of serious harm or homicide needs a coordinated, multi-agency response with all agencies sharing relevant information to develop an action plan that is comprehensive, robust and addresses the risk to all parties.



The aims of the Marac process:

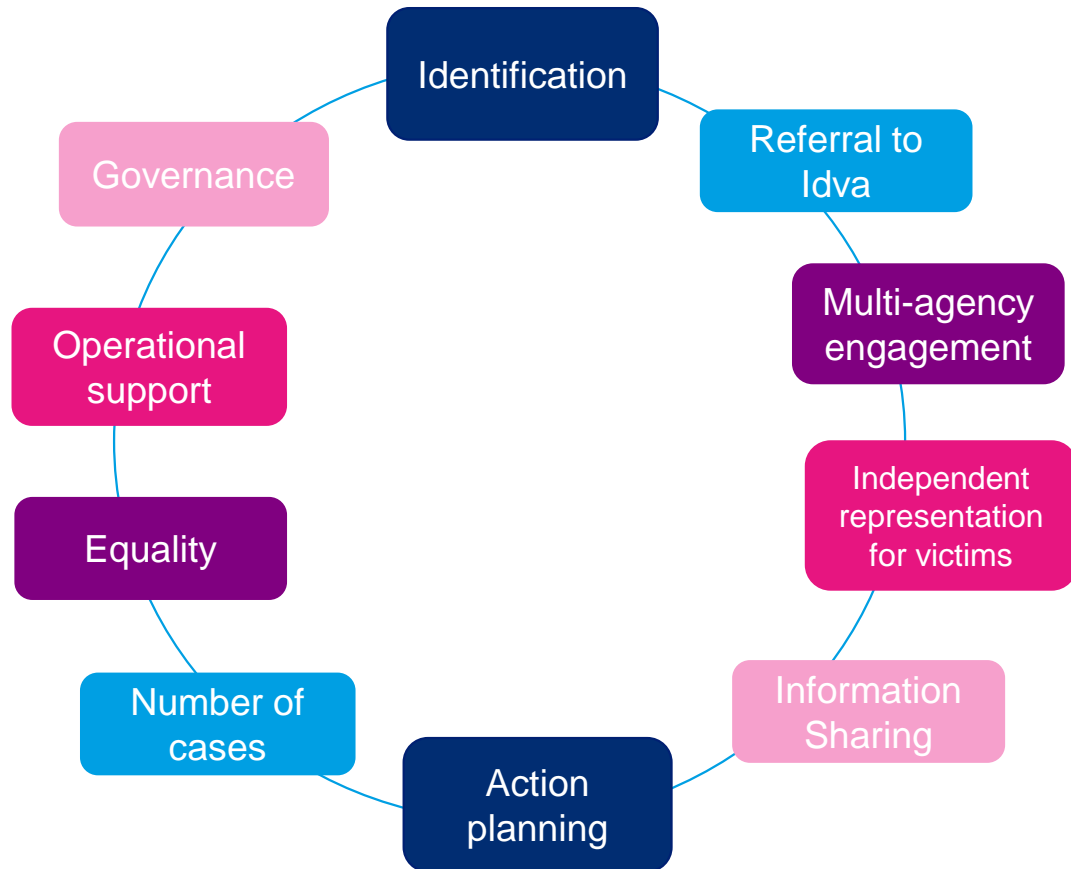
- Safeguard victims
- Address the behaviour of the perpetrator
- Make links with other public protection arrangements in relation to children, perpetrators and adults at risk
- Safeguard agency staff





Introduction

Scope of Review



Reviewed against the 10 principles of a Marac we conducted **3 Marac observations**. **Local Marac data for April 2021 – March 2022** reviewed against national data

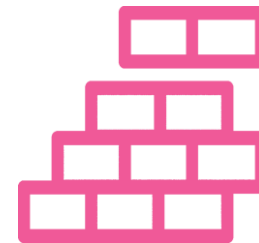
Review of **Marac Operation Protocol** and Information sharing protocol

Review of **Marac Operating Group Terms of Reference** and **strategic group observations**

15 professional discussions and 20 case audits

The 10 Principles of an Effective Marac

- Identification
- Referral to the Marac and Idva / Equivalent
- Multi-agency engagement
- Independent representation and support for victims
- Information sharing
- Action planning
- Number of cases
- Equality
- Operational support
- Governance



Overview of Marac in Sheffield



There is one Marac in Sheffield which serves the city. The Marac takes place three times a month, with additional meetings added, depending on volume. There is a strong commitment to the process especially from the domestic abuse partnership board and strong Marac governance is evident at all times.



There is consistent and solid coordination of the Marac, although this is under capacity at present. The Chairs alternate between police, local authority commissioners (when chair absences arise) and an independent Chair. There is good engagement from other agencies around the operational table the majority of the time, and we were impressed by the input of some of the non-core agencies.



Overview of Marac in Sheffield



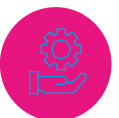
We observed many strengths throughout the process of this work as well as good practice; some areas for development can be addressed quickly. We are aware that volume at Marac is a current challenge, and by restructuring and streamlining the process this may be addressed. It is also positive that the themes we discovered were echoed in all parts of the process, thus demonstrating no anomalies.



The lack of consistent chairing created a meeting where the calibre of the content and structure was dependent on who was chairing, as opposed to it being led by the Marac team.



The commitment to the process was also clear at the workshop, where attendance and involvement was high. There was a strong sense of full engagement and dedication in moving the process forward and building on the practice already in place. This could be built on further by having a Marac team day once a year to review practice and enhance team culture.





Principle 1 Identification



1. Principle: Identification

Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

DARA Team highlighted as best practice

Appropriateness of referrals questioned at times

Stronger Quality Assurance Processes were needed

Differences of opinion can cause some conflict between DARA and Idva service



1. Principle: Identification

Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

Repeats

An alert/gatekeeping process is in place for repeats with the aim to reduce volume

There is some concern that by not reviewing all repeats, patterns of abuse and escalation are being missed

An audit process is in place for repeats, to review themes/practice



1. Principle: Identification

Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

There was a pathway from point of identification into the Marac which was clear and streamlined. This was observed in the case audits and from people we spoke to. It was also felt that partner agencies were aware of the process and this was emphasised by the use of the common risk assessment used across all agencies. The area uses similar forms which helps to make the process robust.

There is good number of non-partner agencies referring into the process but the majority of the cases in the meetings we observed were from police, although this could be a recording issue. It wasn't always clear as to the threshold and some cases were not appropriate. It wasn't always clear in regards to the identification of the primary perpetrator.

As the volume is high, correct identification is paramount and it may be that referral thresholds need revisiting.



1. Principle: Identification

Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

Summary of Key Strengths

- All partner agencies use a common risk assessment to assess victims and refer into the Marac process which provides a consistent approach to risk assessment.
- All cases referred in are heard and discussed to ensure victims and their families are supported, and onward referrals to risk appropriate meetings are made.
- There is a single agency quality assurance process by DARA which ensures appropriate referrals are heard which is best practice.
- High level of identification of diverse communities with a particular focus on HBV and the use of the Karma Nirvana risk assessment is excellent practice.
- Exceptional number of partner agency referrals at 33%.
- In addition to Idva referrals we would particularly highlight Housing referrals at nearly 4% and 'other' agencies at over 9%. This, alongside Housing's proactive performance at the meetings, was observed as being an example of best practice from a Housing agency at Marac.



1. Principle: Identification

Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

Summary of key areas for development

- Not all Marac cases are appropriate which suggests a potential lack of united understanding of risk thresholds.
- The threshold in which a case was referred in was not always made clear in the meetings.
- There were a high number of cases where perpetrators had already been given lengthy custodial sentences and were not being released for a considerable amount of time.
- Decisions on whether a victim was high risk were being made at the start of each case if consent had not been given.
- There was a good number of partner agencies referring in, but we would like to see more referrals from some partner agencies such as Adult social care and Substance misuse.



1. Principle: Identification

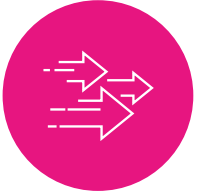
Professionals recognise domestic abuse, risk assess and identify high-risk cases based on the referral criteria for Marac

Recommendations

- Training/ review thresholds and confidence in thresholds
- Training for all agencies regarding the dynamics and typologies of domestic abuse
- Ensure referrals are captured at the source of the original referral in order for the data to truly reflect the spread of partner agency cases. For example, if CSC identify the victim but refer to Idva or Police who make the ongoing referral; this is captured.
- Ensure all representatives quality assure referrals as part of the representative role in order to increase appropriate referrals
- Ensure criteria for Marac are clear
- Remove consent decision and increase awareness training including thresholds, dynamics and typologies.



Principle 2 Referral to Idva and Marac



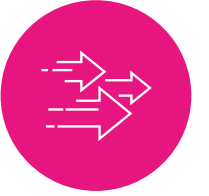
2. Principle: Referral to Marac and Idva

All victims who meet the Marac threshold are referred to Marac and the Idva

Overall, the process is clear and working well

Marac to Marac transfer is not working effectively

Cross boarder working is difficult as agencies can only access their own systems, and therefore don't always have access to relevant information

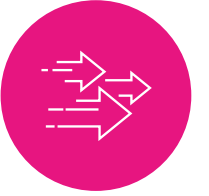


2. Principle: Referral to Marac and Idva

All victims who meet the Marac threshold are referred to Marac and the Idva

This felt like a streamlined process in the area in terms of clear structure, however there was discrepancy around this. The process was clear but the work with Idva appeared lacking and vague in the meeting, and this was not reflected in the Marac.

There was a robust timeline for Idva referrals but not for Marac referrals and this was of concern as the length of time from referral to Marac was significant, sometimes by three months. This was also reflected in the interviews. It wasn't always clear what multi-agency work was being carried out prior to the Marac. We observed pieces of good work by single agencies in the audits.

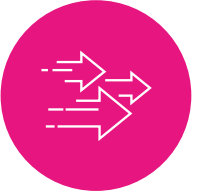


2. Principle: Referral to Marac and Idva

All victims who meet the Marac threshold are referred to Marac and the Idva

Summary of key areas of strength

- All victims are referred to the Idva and into the Marac process.
- We observed no screening or gatekeeping carried out on a multi-agency basis; however a repeat gateway process was raised in interviews.
- Pathways into the process are clear and streamlined.
- Referral to Idva is robust and within recommended timelines.

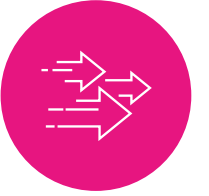


2. Principle: Referral to Marac and Idva

All victims who meet the Marac threshold are referred to Marac and the Idva

Summary of key areas for development

- Whether a victim had consented to the referral or not was mostly stated in the meeting which is positive, however, due to changes in GDPR 2018, it is important to also include whether the victim was made 'aware' of what Marac is and how it can support them.
- There were significant delays in cases being heard at Marac from the point of post referral on consistent basis which is concerning. We were informed work happened prior to this, which is positive, but it reduces the Marac's joint working principles, effectiveness and creativity; and this did not seem to make the meetings more consistently robust.
- There was a lack of confidence in thresholds which may affect the above issues.



2. Principle: Referral to Marac and Idva

All victims who meet the Marac threshold are referred to Marac and the Idva

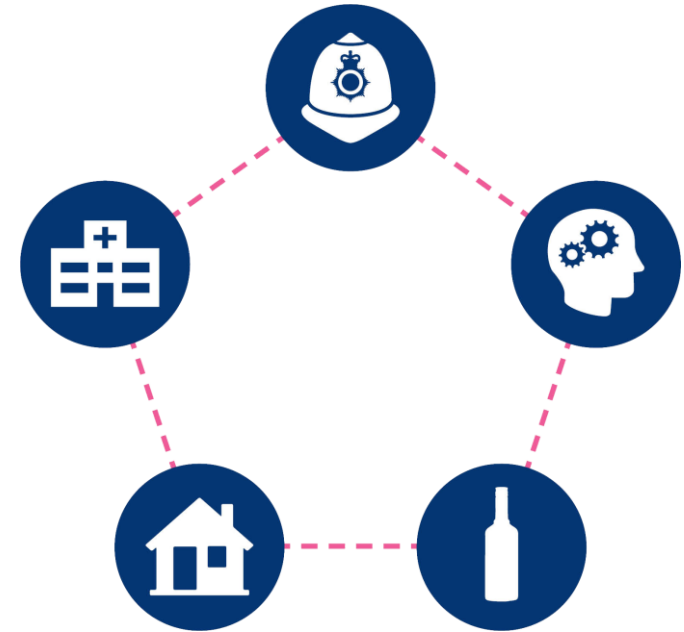
Recommendations

- Governance group to review the referral pathways to ensure that all agencies can refer directly to Marac
- Referral to Marac is timely. Review this by using best practice guidance in running an effective Marac and ensuring thresholds and quality assurance elements are carried out by representatives.
- The referring information should clearly state on systems and be verbalised in the Marac consistently as to whether consent has been given and how the victim has been made aware of the what the Marac can provide for them.
- As a result of the current delays, ensure that there is robust multi-agency teamwork being undertaken between the referral date and the Marac meeting and that this is accurately recorded in case notes

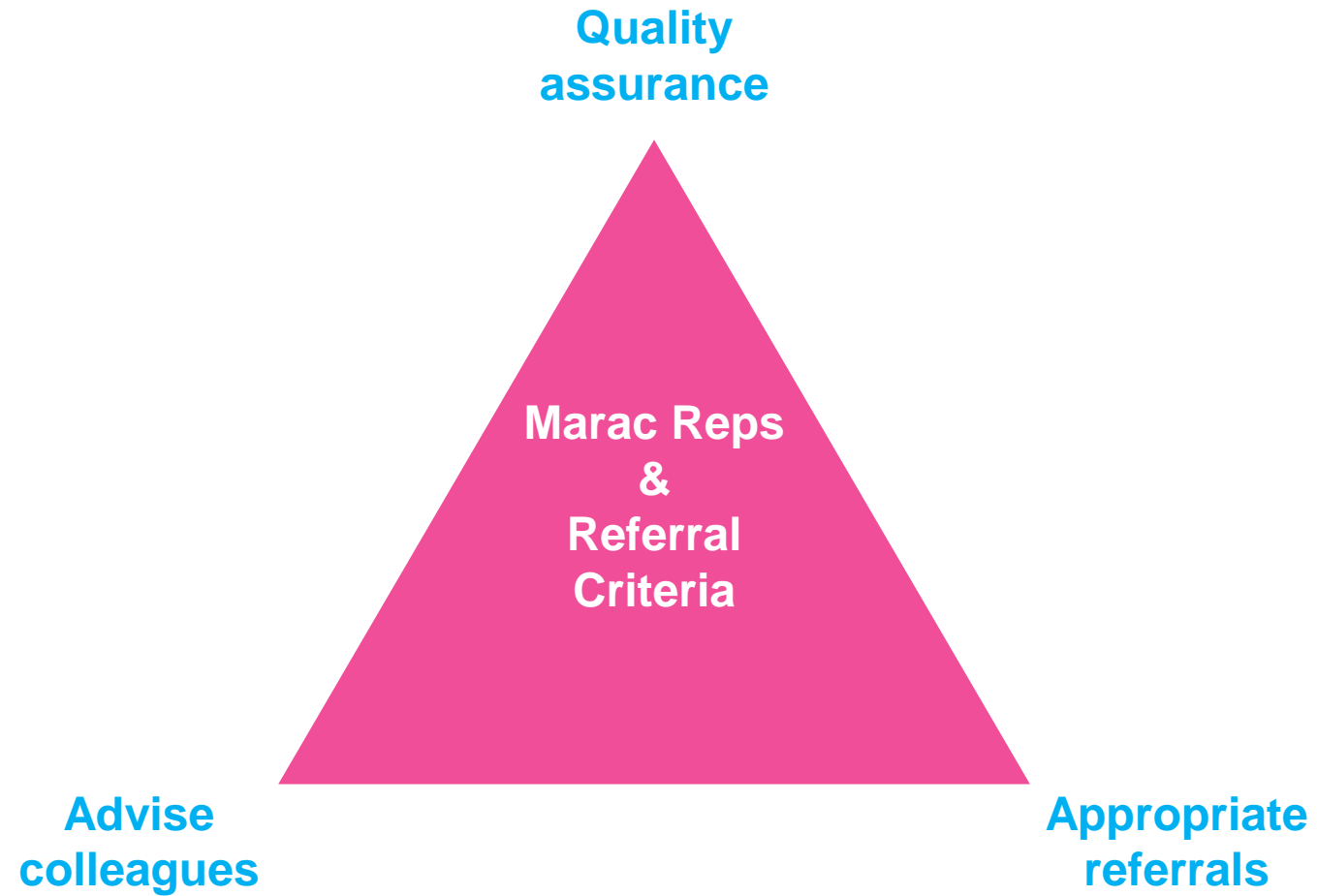
Representatives required for an effective Marac

1. Police
2. Idva
3. Probation
4. Children's Services
5. Mental Health
6. Primary Health
7. Substance Misuse Services
8. Housing
9. Adult Safeguarding

Also valuable: Education; specialist DV/minority support services; secondary health such as health visitor/ midwifery



The role of the Marac representative



Ending domestic abuse

Roles and skills of the Marac representative

	Role	Skills
Before	<ul style="list-style-type: none"> - Undergo Marac Rep Induction <ul style="list-style-type: none"> - Online Marac learning module - Reps Toolkit - Check that referrals are appropriate and completed correctly - Gather/collate up to date information about cases on Marac list - Review/chase outstanding actions from previous meetings 	<ul style="list-style-type: none"> - Organised - Knowledge of Marac thresholds - Communication skills and confidence to address quality issues with staff
During	<ul style="list-style-type: none"> - Present any referrals from agency - Provide relevant information for known cases - Provide expertise in field for all cases - Volunteer actions to address risks - Uploading professional standards. 	<ul style="list-style-type: none"> - Risk focused - Communication skills (succinct) - Confidence speaking in group setting - Expertise in field - Organisational awareness re: offering actions
After	<ul style="list-style-type: none"> - Feedback information and actions to case workers - Review/chase outstanding actions - Follow up with staff if there are issues with referrals 	<ul style="list-style-type: none"> - Organised - Diligent





Principle 3 Multi-agency engagement

3. Principle: Multi-agency engagement



Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac

Attendance and representation

Sheffield works well in engaging smaller organisations.

Many spoke of smaller By and For services and their lack of involvement in the process. It was mentioned that they attend if they've referred a case.

Some smaller services have now been given access to all agendas so that they can see if any of their cases are being heard – however sense that this isn't happening.

Some services don't appear to be present for HBA cases. One of the chairs suggested there should be a core member for HBA cases to provide specialist knowledge.

Reference to Karma Nirvana training and tools which may be a barrier to engagement?

Overall, it was felt Marac is well attended.

Some agencies don't stay for the full meeting – probation and drug/alcohol were highlighted. Mention that it's usually police, Idva and social care at the end.

Some agencies ask for changes to the agenda to allow all of their cases to be heard, meaning they can leave.

3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac



Attendance and representation

Many agencies rotate the Marac representative with some changing over at lunchtime.

Housing was noted to be good in terms of consistency.

Lack of some statutory information.

Still feels like an add onto many Marac representatives' jobs.

At times, agencies refer cases and don't attend to present but this is challenged by the chair.

CSC noted consistent representation from social workers but added that it isn't usually the social worker involved with family and therefore all information is based on case notes. Currently two CSC reps share the role but soon to be a third.

Police felt that Marac is the best attended multi agency forum in Sheffield.

Feeling that representatives are proactive and consider wider the picture.

3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac



Training

Feeling that there is a lack of regular Marac training.

Used to be a good 2-hour session led by Idva, but don't think that has continued.

Sense that agencies still don't fully understand the dynamics of domestic abuse.

Staff don't always know who their Marac representative is (highlighted particularly by social care).

Provision of training re perpetrators/ safe and together.



3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac

There is a consistent group of core agencies around the table. Different chairs affected the proceedings differently. The entire Marac team needs to display greater ownership. There were different levels of engagement in the process. Many elements of practice were happening for the first time in a case even though there may have been a delay in the case being heard at Marac. There seemed to be a lack of appropriate police present for high level actions when the independent chair was chairing.

A review of representation would be positive to reflect whether the right people were there. Some 'By and For' services seemed to be lacking in representation. There was some good practice observed. We would encourage all representatives being supported to deliver their role as a single point of contact and feel confident in carrying out the recommended function of a representative.



3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac

Summary of Key Strengths

- Most agencies have a dedicated Marac Representative who attends on a regular and consistent basis and all core agencies are engaged in the process.
- Positive multi-agency work highlighted during some cases.
- We were impressed by the commitment of a number of agencies in the meetings, and a number of them displayed knowledge, empathy and proactiveness.
- There was a clear structure in accessing a broad cover of information and systems across the Local Authority.
- Independent chair is a positive within the Marac structure.
- There were elements of good practice displayed by all chairs observed, and in particular, an empathy for the victims.



3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac

Summary of key areas for development

- Some Marac representatives are unclear about their roles.
- Some Marac representatives are unable to prepare fully for the Marac meeting.
- In some instances, partnership working does not take place before the Marac.
- There are too many chairs involved in the process including Local Authority commissioning roles, police and an independent professional. This impacted meetings differently and had too much impact on the quality of the meeting overall.
- Case by case representatives need to be inducted.
- Different levels of knowledge in Marac affected overall knowledge, skills and confidence.
- Representatives need to be given the time and space to develop the confidence to be single point of contacts for their organisation.



3. Principle: Multi-agency engagement

Agencies that can contribute to safeguarding high-risk victims, associated children and vulnerable adults attend the Marac

Recommendations

- The governance group to monitor attendance at the Marac and address with specific agencies to understand barriers and challenges to attendance.
- Ensure all representatives and chairs have received Marac training.
- Marac representatives to be supported by their agency to fulfil their role and come prepared to the meeting as otherwise it delays the process.
- Marac Representatives to provide information regarding their agency's remit, boundaries and thresholds. This can be recorded in the Marac operating protocol.
- Induction needs to be for those on a case-by-case basis.
- Representatives need to be skilled in action planning process and information sharing process and have basic DA awareness and understanding of typologies.
- Review provision of chairs to ensure there are two consistent chairs. We are aware this is being reviewed currently, in order for others not being required to step in due to unforeseen absences. There needs to be ownership by all of the meeting.



Principle 4 Victim representation at Marac – Voice of the victim

4. Principle: Independent representation for victims



All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

This was highlighted as an issue from some agencies. Example: Offer of three calls from Idva and the case being closed – lack of creativity

There is a real sense that the quality of engagement from the Idva service has reduced. Interviewees referred to Idva's lack of involvement with cases being a challenge.

Issue of cases being closed to Idva before heard at Marac. Idva explained that this was because work had been done before case heard (due to long waiting times) however some felt this wasn't appropriate and therefore asked that cases be held until case heard.

Examples of engagement being a phone call in June and nothing further until case heard in August.

Sense that level of engagement by Idva with victims needs to improve. Example of phone calls only being allowed from withheld numbers.

Feedback that 'Idva used to be the outstanding agency at Marac' and that this 'needs to be reviewed'

4. Principle: Independent representation for victims



All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

Trauma informed response process in place for managing cases whereby the victim/survivor doesn't want police involvement.

Trauma informed response process requires notification to police and social care to allow systems to be flagged.

Appears to be some tension between Idva and police about the trauma informed process and police recording. Police asking for more of a discussion about why the victim/survivor doesn't want police involvement and working out next steps together.

Reference to crimes only being reported at Marac, raising concerns relating to safeguarding response.

Feedback noted there were some cases that police weren't aware of due to trauma informed response.

4. Principle: Idva and voice of the victim



All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

IDAS cover the Sheffield Marac with alternate Idvas attending the forum. There were examples of good practice within the case audits and some effective action planning in the meeting. However, overall, we felt the Marac lacked a strong victim focus which affected the overall effectiveness of the Marac, thus leaving a substantial element of the meeting missing. Although we would expect this to be the Idva role, a good Marac will ensure all representatives adhere to this and hold this ethos and culture at the heart of the Marac especially if the Idva is not working with the victim. A lack of engagement between victim and Idvas compounded this.

There was ethos of silo working prior to Marac and after; this became apparent again in the workshop which was so positive as people felt able to be honest. Joint working can emphasise the victim's voice. The chair was more central to the process than the Idva which needs to be turned around.

There was an element of unconscious victim blaming due to organisational systems and cultures, and we expect the Idva to be the lead role model in ensuring this does not happen and is challenged; but the more aware a representative is around domestic abuse awareness, the more effective the Marac is around the victim's voice.

Victim blaming

Some of the most important aspects of a Marac is to:

- **uphold professional standards and**
- **challenge effectively and respectfully**

These skills become particularly important when **victim blaming language** or **narratives that focus responsibility for the abuse on the victim** are brought to Marac by any agency.

Victim blaming can **INCREASE RISK** as it focuses action planning and contextual safeguarding on the wrong person, thus making the Marac ineffective and less likely to achieve meaningful change or increase safety.



Victim blaming – challenging respectfully



- No one chooses to be abused, it is the perpetrator who chooses to abuse.
- We need to ensure our focus is on the perpetrator and stopping the abuse, rather than placing responsibility on the victim to escape or manage the abuse.
- Until we understand the context of the abuse and dynamic of control, we cannot reasonably judge any apparent 'choices' made by the victim.
- Many primary victims of CCB will use retaliatory violence or violent resistance, this does not indicate parity in the relationship, as there is still a power imbalance, it actually increases the risk to the victim.
- A victim feeling unable to engage with services, allowing abuser access to house and children may well be a risk management measure they are taking or a trauma response, this needs exploring.
- Language like '*the victim allows*', '*accepts*' or '*won't leave*', '*chooses to stay/return*' all enable the abuser to remain hidden, a more sophisticated approach to understanding the dynamics of abuse must be applied here in order to truly identify and mitigate the risks.



4. Principle: Independent representation for victims

All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

Summary of Key Strengths

- IDAS works with all risk levels and is a busy service. There are a number of Idvas on a rota system attending the Maracs. This is positive due to the regularity of the meeting.
- We saw some elements of good practice within the case audits.
- Majority of victims are offered support from the Idva.
- There were some examples of strong Idva work with the victim in the case audits
- Some representatives were very proactive of support and empathy when the Idva was not involved.
- There were some examples of victim's voice in meetings.



4. Principle: Independent representation for victims

All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

Summary of key areas for development

- Victim blaming language is used verbally and in records. (most of this was in the use of systems and cultural organisational language).
- Low number of cases had engaged with Idva at the Marac.
- Victim voice was missing in most of what we observed, and this was sometimes exacerbated with increased discussion of children and perpetrator.
- The victim was consistently not at the centre of the meeting. This is exacerbated by the structure of the meeting.
- Too much reliance on the criminal justice avenue was observed.



4. Principle: Independent representation for victims

All high-risk victims are offered the support of an Idva; their views and needs are represented at Marac

Recommendations

- When the victim declines the support offered, where possible, partners could ask why and find out what risks the victim sees in working with agencies.
- The governance group to review the current processes to ensure victim voice is central to the Marac process.
- Partner agencies to be proactive with gathering best contact methods and times as well as explaining the role of the Idva to support engagement.
- Review lack of engagement.
- Restructure the meeting to enable Idva to take centre stage.
- Challenge victim blaming and encourage positive role modelling and the use of non victim blaming language.
- If gap between referral and case heard at Marac is reason for lack of Idva input in the Marac, this needs to be stated in the meetings.
- Idva service needs to be more proactive and central to the meeting and the action plan.

Role of the Marac Chair

Setting and upholding professional standards at Marac

Upholding confidentiality and appropriate information sharing

Maintaining a focus on risk

Supporting the role of the Idva

Facilitating the meeting

Challenging effectively and respectfully

Ending domestic abuse

Suggested Case Structure

- Referring agency presents the case succinctly (includes whether consent given & criteria on which threshold is met).
- Idva presents up to date situation including voice of the victim; stating their views, wishes and what they are afraid of.
- Ask each agency in turn to share risk focussed and proportionate information starting with police or Idva if they have not shared already.
- Chair summarises the risks identified and potential impact, with the expertise of other agencies.
- Agencies volunteer actions to reduce the risk with achievable timeframes for completion, in accordance with the risk.
- Chair or Marac Coordinator summarises actions.
- All agree that all risks identified have an action which, when completed will reduce the risks.

Suggested Case Structure for Repeat Cases

Each agency can be expected to have reviewed the minutes of previous meetings

- **Referring Agency presents the case succinctly**
(includes the repeat incidence of abuse that has been)
- **Idva presents up to date situation including voice of the victim;** stating their views, wishes and what they are afraid of
- **Chair revisits the previous action plan;** asks each agency in turn to confirm current status of actions agreed & to share any new risk focused and proportionate information since the last meeting
- **Chair summarises the current risks identified**
- **Agencies volunteer actions** to reduce the risk with achievable timeframes for completion, in accordance with the risk
- **Chair or Marac Coordinator summarises new action plan**



Principle 5 Information sharing



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Preparation

Those interviewed raised that agencies often come unprepared for the meeting and are researching from screens during each case.

Some spoke of research forms to support information gathering ahead of the meeting. Someone mentioned a checklist that the Idva used to have which was really useful.

Children's Social care spoke of having a Marac form to support them in gathering information but did add that they're often chasing their tails when trying to get information from fieldwork teams. Takes approx. full day to prepare and research for 30 cases.

Sometime attendance can impact on preparedness if the representative has been asked to attend last minute.

Lack of preparation means Marac sometimes loses some of its effectiveness.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Information shared succinctly

Some agencies are over-prepared and bring all information relating to case rather than focusing on most recent.

Reference made to smaller organisations who particularly want to have in depth discussions about cases.

Some conflict with DHR recommendation about covering history and chairs feeling unclear on how to do this whilst focusing on current risk in 10 mins.

Some agencies struggled to share information from Marac with staff and vice versa.

It's a really good information sharing forum with lots of different agencies involved. It helps when sharing information to create actions immediately from meeting to inform assessments.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

The Information sharing process was inconsistent overall with some examples of good practice peppered throughout. Overall, it lacked effectiveness and prolonged the meeting. This was also Chair dependent too.

Effective information sharing needs to be instilled due to the volume. For case-by-case people who attended, it appeared there was no prior knowledge about expectations. Without structure this process can become less clear and can encourage representatives to lose focus and become too discursive.

The HBV Marac was well attended but is also affected by structure and content. It could be a lot shorter if run in line with effective chairing guidance. This is especially pertinent for Sheffield due to the high volume so it is important to instil any changes which could enhance capacity. It was also noted that the agency with the expertise in the area was not present in any of the meetings we observed.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Summary of Key Strengths

- In the minutes we saw good examples of recorded information and actions.
- There were examples of good succinct information sharing in our observations by some agencies.
- Some agencies were prepared with effective research information.
- Some Chairs managed the information sharing process more effectively than others.
- Some representatives were more efficient at risk identification.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Summary of key areas for development

- The information sharing and risk identification was consistent throughout the meetings observed. However, it was too focused on an information sharing process at the expense of action planning.
- Different levels of good information sharing, and risk identification were observed. It was too long at times and lacked clarity and robustness. This was also Chair dependent.
- Some information was too historic.
- It lacked a risk focus at times and too much discussion prolonged the meeting.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Summary of key areas for development

- Not all risk factors are highlighted as areas to address within the action plan.
- Information is shared which is not pertinent to the risk.
- Representatives tend to have cameras off.
- Where cameras are on, some representatives are not in a confidential space meaning others may hear the discussions, and/or are completing work not related to the Marac.
- Some representatives were not prepared which lengthened the meeting.
- Risks were lost due to the structure of the meetings.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Recommendations

- Research should focus on the 'here and now' current information, with historic information brought if pertinent. Referrer should include brief historic information if this forms reason for 'escalation' threshold.
- Review the structure of the meeting to ensure that-
 - The referring agency presents the case
 - The Idva shares their information
 - Each representative shares their information
 - The Chair (or Idva) sums up the information in turn
 - An action plan is then created by representatives offering actions and bespoke timings to address the risks identified
 - The case is concluded with the Chair or Coordinator clearly summarising the actions and the bespoke timings.
 - The virtual Marac guidance to be used.



5. Principle: Information sharing

Marac representatives share relevant, proportionate, and risk-focused information

Recommendations

- Please refer to the Effective Chairing Guidance for further information - [Effective chairing - guidance for Maracs | Safelives](#)
- Structure to be provided to the Chair in order to summarise risk factors and vulnerabilities, and information to inform action planning to ensure consistency across all Maracs
- Consider refreshers on the purpose and process of the Marac and the types of information to bring (as identified in the Information-sharing Protocol) and the actions to offer¹
- The governance group to support Marac to implement the recommendations with the virtual marac guidance to ensure representative are able to engage and increase wellbeing during the meeting [Virtual-Marac-Covid-guidance March-22.pdf \(safelives.org.uk\)](#)
- Support representatives to share only pertinent current information and to come prepared to the meeting.



Principle 6 Action planning

6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour



This was a big area of focus with many interviewees feeling that action planning isn't effective or SMART.

Some felt that the time delay on cases being heard meant that many actions were already complete before the meeting which was contributing to lack of actions from the meeting itself.

Actions can depend on who the chair is with some chairs having a bias towards actions for certain agencies.

Lots of police actions are for the OIC and don't always get updated.

Actions are rarely volunteered and often fall to the chair to assign.

Some agencies are resistant to having actions and it was noted it was more like joint case supervision than risk led action planning.

6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour



It was noted that the Marac admin is very good at supporting suggested actions.

Actions are rarely updated although it was noted that social care and housing were much improved at reporting back once actions have been completed.

Noted that lack of updated actions impacts on research summary for repeat cases.

Rarely see actions for some agencies.

There can be a general apathy towards Marac which was contributing to lack of updates for actions.

6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour



Some people noted the difficulty in getting agencies to take referrals from the Marac, meaning that separate processes have to be followed after the meeting leading to delay.

Someone spoke of another daily risk management meeting where high-risk cases are considered. This doesn't prevent cases going to Marac and it complements Marac but can mean that actions are complete, and risk reduced by the time it gets to Marac (due to time delay).

Immediate safety planning policies in place once they become aware of high-risk case.



6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour

To some degree it is common for Maracs to have primarily an information sharing function and it is good to reflect and review practice as action plans are often too short and not risk focused or lack clarity due to the structure of the meeting. The result can be a lack of actions or action plans are too generic.

It is important to pull apart the information and address each risk with an action if possible. We have attached our chairs guidance but the guidance is important for all. The action planning process can be taken a stage further by each risk being read out separately and an action given; thus ensuring all risks have actions and are as detailed as possible. It is also a way of monitoring performance and ensuring representatives are supported and have confidence in their role.



6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour

Summary of Key Strengths

- Some examples of good actions in the meetings.
- Some offering of actions by agencies in case audits and meetings observations.
- Examples of good action planning prior to Marac.

Summary of key areas for development

- Not all risks are identified, action plans are not specific to the victim's needs and overall, there was a lack of SMART action planning.
- Agencies overall were not consistently offering their own actions with bespoke timings according to risk.
- There is a lack of management around those using harmful behaviours.
- Research needs to be risk focused which will help with action planning.
- Chairs were tasking actions in all meetings and at times were central to this with each case.
- Some representatives appeared more confident than others in action planning.



6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour

Recommendations

- Each action should be SMART - **S**pecific, **M**easurable, **A**chievable, **R**ealistic, and **T**imely, with bespoke timings for each action.
- Consider actions that give the victim space to make decisions.
- Agencies, as part of their preparation for the Marac, should not only gather the information, but consider what actions they might take and what multi-agency actions might be needed to address the safety needs of the victim and children.
- Agencies to compile/update information sheets for partner agencies about their remit and the type of actions that they could offer at a Marac, with examples. This would help to manage expectations of what other agencies can do and would remind agencies of the range of actions they themselves might undertake. A resource for this would be SafeLives' "[Guidance for Maracs – managing cases with complex needs](#)" and "[Guidance for Maracs – Older People at Marac](#)".

6. Principle: Action planning

Multi-agency action plans address the risk to the victim, safeguard children and adults at risk, and manage perpetrator behaviour

Recommendations

- Training to be provided regarding the management of those using harmful behaviours and what other actions could be offered and by which agencies;
- Update the Marac Operating Protocol (MOP) to include examples of what each agency can offer in terms of actions
- During the recommended annual team review day (as per slide 10) take the opportunity to reflect on action planning
- During the Marac meeting, break actions down, focusing on each risk individually and agreeing a respective mitigating action
- Re-structure the Marac meeting (in line with the recommendation for principle 5), which will assist with the information sharing and action planning process.



Principle 7 Volume

7. Principle: Number of cases

The Marac hears the recommended volume of cases



Volume

Main issue raised by most people is the volume of cases. Usually 30 cases per Marac, never drops below 28.

This is resulting in waiting times of between 8-10 weeks for cases to be heard. Cases kept open by Idva until heard at Marac.

Professionals' meetings in place to risk manage and action plan whilst waiting for Marac, meaning that by the time the case is heard at Marac everything has been done.

Introduced gatekeeping process for repeat cases with the aim of reducing volume but this hasn't worked.

7. Principle: Number of cases

The Marac hears the recommended volume of cases



Frequency

Used to hold three Maracs every four weeks but having to add extra meetings in to manage volume/reduce waiting time.

Meetings lasting all day (9am to 6pm)

7. Principle: Number of cases

The Marac hears the recommended volume of cases



Impact on professionals

Rushing through cases to manage volume whilst also being conscious of professional concerns and the desire to discuss cases in more detail.

Concern regarding the effectiveness of professionals having to spend all day considering cases. Many spoke of being exhausted. Often agencies leave before the end.

Concern regarding impact on professionals going home after full day of Marac.

The chair will try to put cases with children together so that they can leave before the end of the meeting.



7. Principle: Number of cases

The Marac hears the recommended volume of cases

The number of cases at the Sheffield Marac have been consistently high over previous years, and this is to be commended overall. This is reflected in the commitment and dedication of the partnership board. However, this can be streamlined to a certain degree. The backlog of cases and delay is concerning but working through recommendations should assist with this.



7. Principle: Number of cases

The Marac hears the recommended volume of cases

Summary of Key Strengths

- Sheffield is hearing above the recommended number of cases by around 200 victims and their families.

Summary of key areas for development

- The repeat rate at 28% is in line with the recommended of 27-40, however this is significantly low considering the number of cases overall. This may have a direct link with SafeLives not having access to the data due to the process in the area which consists of the police identified repeat cases being removed from the meeting unless they relate to high-risk incidents, but we were informed that agencies are given the information and can request they are heard at the Marac.



7. Principle: Number of cases

The Marac hears the recommended volume of cases

Recommendations

- Restructure the Marac in order to streamline the process which may impact the volume.
- A review of the MOP to ensure consistency in line with recommended guidance.
- All repeat Marac cases to be heard as per the MOP and recommended guidance.
- The governance groups to review the current format and frequency of the Marac to ensures sustainability.

The National & Regional Picture

National figures (July 2022 to June 2023)	Sheffield	South Yorkshire	Most Similar Forces (MSF)	Yorkshire & Humber	National
Number of Maracs sending in Data	1	4	51	18	273
Number of cases discussed	1,125	3,356	22,839	13,497	108,775
Change in No. of Cases since last year	0%	1.7%	-0.9%	0.2%	-10%
Cases per 10,000 of adult female population	49	60	56	61	45
Number of children in Household associated with cases discussed	1,905	4,590	31,406	18,059	138,340
% Marac repeats	28%	30%	32%	33%	32%
% Non-police referrals into Marac	33%	26%	31%	25%	36%



Principle 8 Equality



8. Principle: Equality

The Marac addresses the unique needs of victims with protected characteristics

The Sheffield Marac is exceptional around this principle, and we would use Sheffield as an example of good practice.



8. Principle: Equality

The Marac addresses the unique needs of victims with protected characteristics

Summary of Key Strengths

- The high rate of identification of Black, Asian and racially minoritised victims is 19.2% which is above most similar forces, South Yorks police as a whole and above the national average.
- The rate of LGBT+ victims at 3.3% victims is above most similar forces, South Yorks police and the national average
- The rate of cases with a disability is above most similar forces, South Yorks police and the national average.
- Male victims are at the right rate we would expect to see, especially with a high volume.

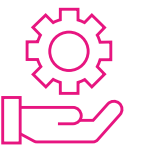
Summary of key areas for development

- Counter allegations cases were observed where it was not clear as to the rationale of identification. In addition, there appeared to be cases where both were determined as victim and perpetrator.



Diversity Data

National figures (July 2022 to June 2023)	Sheffield	South Yorkshire	MSF	Yorkshire & Humber	National	SafeLives Expected
% Black, Asian & racially minoritised victims	21.1%	11.1%	12.6%	13.9%	16.1%	Local BME population
Local Black, Asian & racially minoritised victims	19.2%	11.9%	13.9%	13.1%	16.9%	-
% LGBT victims	3.3%	1.8%	1.8%	1.4%	1.6%	2.5% - 5.8%
% Victims with Disability	26.0%	23.7%	12.9%	11.8%	10.0%	*19%+
% Male Victims	8.2%	7.3%	7.6%	7.2%	6.5%	5% - 10%



9. Principle: Equality

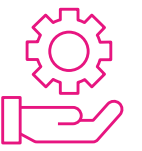
The Marac addresses the unique needs of victims with protected characteristics

Recommendations

- Consideration to include specialist by and for services within the Marac meeting and governance group to increase knowledge for staff, identification and support for victims
- Training to be provided regarding domestic abuse and those with protected characteristics including identification and intersectionality.
- The Governance Group to seek support from agencies such as Karma Nirvana, Galop, Stay Safe East and Southall Black Sisters regarding services and support for those from Black, Asian and Racially Minoritised communities, LGBT+ communities and disabled victims



Principle 9 Operational support



9. Principle: Operational support

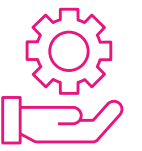
There is sufficient support and resources to support effective functioning of the Marac

There isn't enough admin resource for the volume (0.8FTE).

Impacting on timeliness and quality of minutes.

Frequency leaves no free time for admin to do minutes and update actions.

Due to waiting time there could be lots of additional incidences so admin prepares all relevant information to brief the chair.



9. Principle: Operational support

There is sufficient support and resources to support effective functioning of the Marac

At least four different chairs including police, LA and independent chair.

No one felt that this created a problem but did reflect that it did mean a lack of consistency at times. Some found this to be positive, stating that each chair brought a different experience, but others felt this led to some confusion regarding interpretation of actions.

Overarching comment was as long as they're experienced and trained that it wasn't a problem.

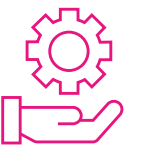
Noted that police chairs can change frequently so independent chair appeared to be doing more.



9. Principle: Operational support

There is sufficient support and resources to ensure effective functioning of the Marac

The operational support has positive elements to it and committed staff, and whilst it is under resourced and lacks capacity, streamlining the Marac will have a positive effect.



9. Principle: Operational support

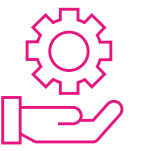
There is sufficient support and resources to support effective functioning of the Marac

Summary of Key Strengths

- The Coordinator creates a team feeling in the meetings and is very proactive in welcoming people and fostering a team energy.
- The Coordinator displays a lot of proactiveness around the meeting with good knowledge.
- The Coordinator is the thread between many of the different aspects of the process.

Summary of key areas for development

- There is very little resilience within the operational support.
- The administration process appeared too complicated at times and a coordinator role and admin capacity may be beneficial in the long run.
- The current format of the minutes and action plans is unclear as to when the discussions took place with no clear timescales for completion of actions.



9. Principle: Operational support

There is sufficient support and resources to support effective functioning of the Marac.

Recommendations

- Ensure operational support processes are reviewed and agreed by all Marac representatives and the Governance group
- Identify opportunities to increase the level of co-ordination support which is currently under the recommended capacity
- Review the current format of the minutes and actions plan to ensure clarity of discussion, who will complete actions and timescales



Principle 10 Governance



10. Principle: Governance

There is effective strategic support and leadership of the Marac and Idva response, and agencies work together effectively.

The dedication of the governance board is exceptional. There is a strong ethos of reflection; thus, reviewing and making changes in practice to the operational Marac should ensure the area will build on the strong structure already in place.



10. Principle: Governance

There is effective strategic support and leadership of the Marac and Idva response, and agencies work together effectively

Summary of Key Strengths

- The Sheffield Marac has good governance which follows good practice. Observation of the governance group/ partnership board highlighted the forum as best practice.
- Commitment to reviewing Marac performance and data.

Summary of key areas for development

- Marac operating and information sharing protocols need to be updated and reviewed.
- By and for organisations need to be reviewed in terms of their engagement in the process.
- Needs to be a stronger cohesion between governance and operational function of the Marac which can be solved by reflective team days.



10. Principle: Governance

There is effective strategic support and leadership of the Marac and Idva response, and agencies work together effectively

Recommendations

- Ensure all Marac representatives should be of manager level (not including the Idva) and of an appropriate seniority. Membership for the governance group should be of Director level, one above the Marac representative, with strategic oversight.
- The governance group to review training recommendations and create plan for implementation.
- A review of the MOP (Marac Operating Protocol) following the Marac review to ensure it is compliant with changes to legislation.
- Ensure that the referral pathway is clearly detailed within the MOP.
- Ensure that all involved in the process feel they are part of a multi-agency team with shared values and goals.
- The governance group to review recommendations within this report ensuring agreement and sign off. All agencies connected to the Marac should be aware of agreed actions to be implemented.



Case audit themes and reflections

Themes



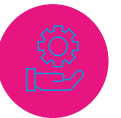
- It was not always clear what threshold cases were referred in on.
- Consistent recording of consent or awareness of Marac referral and how victims were told how Marac can support them.



- Some good examples of police making decisions to raise the risk to high when other officers had identified as medium risk.



- Action plans were short with on average, three to six actions. They were not bespoke and had no timings. There were many actions which were to 'support', 'research', 'review' or 'consider' thus too generic.



- There were frequent delays between the risk identification and the case being heard at Marac.
- Some good examples of information sharing were recorded.
- The referral process is clear.

Themes



- Voice of the victim was missing in the recorded information. There appeared to be a high number of victims who had not consented, and it was not always clear as the detail of the work prior or during the Marac.



- There were some cases which were not appropriate and some of these involved cases where the perpetrator had a custodial sentence.



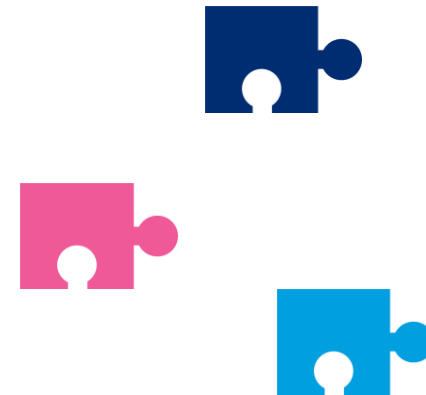
- Many of the actions were information given to the victim or perpetrator to engage in services.
- There were a good mix of partner agencies referring in – such as police, Early Help/Shelter/ Adult Social Care/ Teaching hospital/ Housing.



- There were some examples of counter allegation cases where a concerted proactive intervention to identify the victim was not clear; although in one it was recorded that someone was going to use the toolkit to ascertain which was the perpetrator.
- Karma Nirvana (KN) risk assessments and delegation of specialist KN officers was good practice.

Themes

- Terminology was not always victim focused and appeared to frequently include non-physical abuse being identified. Language such as 'failure' and 'refused' was peppered throughout.
- Mada is a clear process which appears to benefit the overall Marac process.
- Some medium risk cases appeared to be high risk and not always identified as such.
- Risks and potential for actions seemed to be missed at times.
- Escalation was identified in some cases by partner agencies which is positive.



Themes

- The use of by and for services appeared to be missing at times.
- Some lack of clarity over child conflict issues which were not explored as domestic abuse issues.
- Some police information was too long.
- Case where children were with the perpetrator where it wasn't clear as to why this was.
- We witnessed action for all agencies to be mindful of 'violent resistance' potentially happening.
- Discharge plans were not actioned in detail.



Themes

- Some cases had thresholds lowered because the victim was not frightened.
- Some medium cases appeared to be repeat cases in the case audits but were not recorded as such.
- Referral actions were present in the cases, which included agencies who were round the table or a partner agency.





Summary of Recommendations

Summary of Safe Lives Recommendations

1.	Training/ review thresholds and confidence in thresholds
2.	Training for all agencies regarding the dynamics and typologies of Domestic Abuse
3.	Ensure referrals are captured at source in order to identify the original referring agency
4.	Ensure all representatives quality assure referrals as part of the role in order to increase appropriate referrals
5.	Ensure criteria for Marac are clear
6.	Remove consent decision and increase awareness training including thresholds, dynamics and typologies
7.	Governance groups to review the referral pathways to ensure that all agencies can refer directly to Marac
8.	Referral to Marac is timely. Review this by using best practice guidance in running an effective Marac, and ensuring thresholds and quality assurance elements are out carried by representatives
9.	The referring information should clearly state on systems and be verbalised in the Marac consistently as to whether consent has been given and how the victim has been made aware
10.	As a result of the current delays, ensure that there is robust multi-agency teamwork being undertaken between the referral date and the Marac meeting and that this is accurately recorded in case notes
11.	The governance group to monitor attendance at the Marac and address with specific agencies to understand barriers and challenges to attendance
12.	Ensure all representatives and chairs have received Marac training
13.	Marac representatives to be supported by their agency to fulfil their role and come prepared to the meeting as it delays the process

Summary of Safe Lives Recommendations

14.	Marac Representatives to provide information regarding their agency's remit, boundaries and thresholds. This can be recorded in the Marac operating protocol
15.	Induction needs to take place for those who attend on case-by-case basis
16.	Representatives need to be skilled in action planning process and information sharing process and have basic domestic abuse awareness and typologies
17.	Review provision of Chairs to ensure there are two consistently
18.	Needs to be ownership by all of the meeting
19.	When the victim declines the support offered, where possible, partners could ask why and find out what risks the victim sees in working with agencies
20.	The governance group to review the current processes to ensure victim voice is central to the Marac process
21.	Partner agencies to be proactive with gathering best contact methods and times as well as explaining the role of the Idva to support engagement
22.	Review lack of engagement
23.	Restructure the meeting to ensure Idva is central.
24.	All to challenge victim blaming, encourage positive role modelling and the use of non victim blaming language
25.	If gap between referral and case heard at Marac is reason for lack of Idva input in the Marac, this needs to be stated in the meetings
26.	Idva service needs to be more proactive and central to the meeting and the action plan

Summary of Safe Lives Recommendations

27	Research should focus on the 'here and now' current information
28.	<ul style="list-style-type: none">• Review the structure of the meeting ensuring that-<ul style="list-style-type: none">➤ The referring agency presents the case➤ The Idva shares their information➤ Each representative shares their information➤ The Chair (or Idva) sums up the information in turn➤ An action plan is then created by representatives offering actions and bespoke timings to address the risks identified➤ The case is concluded with the Chair or Coordinator clearly summarising the actions and the bespoke timings➤ The virtual Marac guidance to be used
29.	Please refer to the Effective Chairing Guidance for further information - Effective chairing - guidance for Maracs Safelives
30	Structure to be provided to the Chair in order to summarise Risk factors and vulnerabilities, and information to inform action planning to ensure consistency across all Maracs
31	Consider refreshers on the purpose and process of the Marac and the types of information to bring (as identified in the Information-sharing Protocol) and the actions to offer ¹
32	The governance group to support Marac to implement the recommendations with the virtual marac guidance to ensure representative are able to engage and increase wellbeing during the meeting Virtual-Marac-Covid-guidance March-22.pdf (safelives.org.uk)
33	Support representatives to share only pertinent current information and to come prepared to the meeting

Summary of Safe Lives Recommendations

34	Each action should be SMART - S pecific, M easurable, A chievable, R ealistic, and T imely, with bespoke timings for each action
35	Consider actions that give the victim space to make decisions
36	Agencies, as part of their preparation for the Marac, should not only gather the information, but consider what actions they might take and what multi-agency actions might be needed to address the safety needs of the victim and children
37.	Agencies to compile/update information sheets for partner agencies about their remit and the type of actions that they could offer at a Marac, with examples. This would help to manage expectations of what other agencies can do and would remind agencies of the range of actions they themselves might undertake. A resource for this would be SafeLives' "Guidance for Maracs – managing cases with complex needs" and "Guidance for Maracs – Older People at Marac".
38	Training to be provided regarding the management of those using harmful behaviours and what other actions could be offered and by which agencies
39	Update the Marac Operating Protocol (MOP) to include examples of what each agency can offer in terms of actions
40	During the recommended annual team review day (as per slide 10) take the opportunity to reflect on action planning
41	During the Marac meeting, break actions down, focusing on each risk individually and agreeing a respective mitigating action
42	Re-structure the Marac meeting (in line with the recommendation for principle 5), which will assist with the information sharing and action planning process.
43	Restructure the Marac in order to streamline the process, which may impact the volume.

Summary of Safe Lives Recommendations

44.	A review of the MOP to ensure consistency in line with recommended guidance
45	All repeat marac cases to be heard as per the MOP and recommended guidance
46	The governance groups to review the current format and frequency of the Marac to ensure sustainability
47.	Consideration to include specialist by and for services within the Marac meeting and governance group to increase knowledge for staff, identification and support for victims
48	Training to be provided regarding domestic abuse and those with protected characteristics including identification and intersectionality
49	The Governance Group to seek support from agencies such as Karma Nirvana, Galop, Stay Safe East and Southall Black Sisters regarding services and support for those from Black, Asian and Racially Minoritised communities, LGBT+ communities and disabled victims
50	Ensure operational support processes are reviewed and agreed by all Marac representatives and the Governance group
51.	Identify opportunities to increase the level of co-ordination support which is currently under the recommended capacity

Summary of Safe Lives Recommendations

52.	Review the current format of the minutes and actions plan to ensure clarity of discussion, who will complete actions and timescales ¹
53.	Ensure all Marac representatives should be of manager level (not including the Idva) are of an appropriate seniority. Membership for the governance group should be of Director level, with strategic oversight
54.	The governance group to review training recommendations and create plan for implementation
55.	A review of the MOP following the Marac review to ensure it is compliant with changes to legislation
56.	Ensure that the referral pathway is clearly detailed within the MOP
57.	Ensure that all involved in the process feel they are part of a multi agency team with shared values and goals
58.	The governance group to review recommendations within this report ensuring agreement and sign off. All agencies connected to the Marac should be aware of agreed actions to be implemented