



Ending domestic abuse

What Difference is the Marac Process Making to the Lives of Children & Young People?

Making the Links and Measuring Outcomes in Local Safeguarding Children's Boards (LSCBs)

This template developed by SafeLives aims to help LSCBs link effectively with the Multi agency risk assessment conference (Marac) process and collate appropriate evidence to know how they are improving specific outcomes for children and young people who have been identified. This is aimed to assist LSCBs to coordinate the work of all partners in safeguarding children locally and monitor and challenge the effectiveness of Marac where necessary and appropriate to do so. This document outlines a number of outcomes that LSCB's should strive to achieve in order to effectively safeguard young people identified through the Marac;

- **All organisations with a role to safeguard children are represented at the Marac**
- **All children are identified and referred through appropriate safeguarding pathways**
- **A clear understanding of the cohort of children identified through Marac and their needs**
- **The Marac is performing in line with SafeLives recommendations and best practice**

In order to support the LSCB in achieving these outcomes, SafeLives has provided strategic questions for the LSCB to consider. These can be discussed as part of a Board meeting or sub group, sent as a questionnaire to LSCB members or delegates to a nominated individual to complete and present to the Board. In order to support the LSCB in answering these questions we have provided examples of best practice, evidence and guidance. The Guidance will also be useful in preparation for the Joint Targeted Area Inspection Deep Dive by Ofsted; HMIC; HMI Probation and CQC.

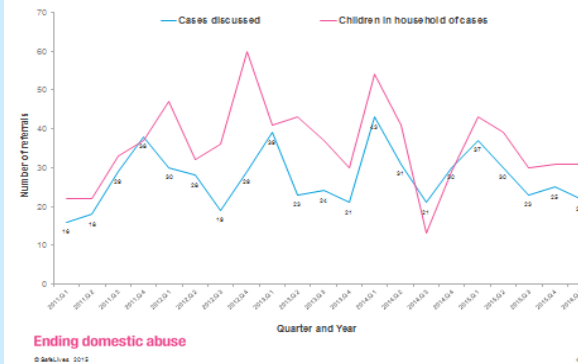
| Outcome | LSCB strategic questions | Evidence and guidance |
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| <p>All organisations with a role to safeguard children are represented at the Marac</p> | <p>Who are the people or service(s) involved in Marac to achieve this? <i>Think about all stakeholders, including the child/YP</i> <i>Is there a named officer responsible for leading? Know who this is and ensure they link directly with the LSCB</i></p> <p>Is there a clear escalation policy that links to the LSCB for organisations with a role for safeguarding children that do not regularly attend?</p> | <p>SafeLives recommend at a minimum there are nine core agencies that make up the Marac.</p> <p>Police; Idva, Housing; probation; children’s social care; adult social care; substance misuse services; Mental Health and health (primary and secondary) with links to education either through educational welfare/link worker or school nursing</p> <p>Additionally it is important wider agencies are engaged as necessary to adequately safeguard the victim and children. We recommend these are;</p> <p>education links either through educational welfare/link worker or school nursing Refuge Specialist agencies working with diverse communities Youth Offending Other organisations working with young people Early Years and Children’</p> |
| <p>All children are identified and referred through appropriate safeguarding pathways</p> | <p>Are the LSCB included in governance documents including information sharing?</p> <p>Is there a clear process for safeguarding young people that are identified through the Marac?</p> <p>Is safeguarding children included in Marac training and induction processes?</p> <p>Does LSCB training include Marac training opportunities?</p> | <p>Activities to achieve the outcome desired</p> <p>There must be locally: A clearly defined Marac Operating protocol with governance arrangements that link in to LSCB and other strategic partnerships Clearly defined Information Sharing Protocol signed by all relevant partners</p> <p>An effective Marac process which clearly identifies all high risk victims and children at risk, which is linked to a clear referral route accessible to all. The process should enable the sharing information; assesses risk appropriately, include all children in agreed action plan, track actions and measure outcomes for the child and whole family. (see “10 Principles for an effective Marac” against which Marac quality is measured)</p> |

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| | | <p>An effective induction process for all new Marac representatives to include an overview of “Working Together to Safeguard Children 2015” and safeguarding children at Marac (see national guidance here)</p> <p>A consistent high quality multi-agency training programme which seeks to raise awareness of domestic abuse; risk assessment; Marac and how it links with other safeguarding processes such as Initial Child Protection Conferences and MASH. This training must be available across all agencies to up skill practitioners embedding within the training lessons learned from Serious Case Reviews and Domestic Homicide Reviews</p> |
| <p>A clear understanding of the cohort of children identified through Marac and their needs</p> | <p>Context, forecasting and starting to tell the story behind the data - setting objectives/targets</p> <p>What are the needs of children and young people identified through the Marac?</p> <p>Are there any patterns or trends emerging and how does the LSCB learn about them?</p> <p><i>What factors are driving current performance but also forecast in the future (including local, policies, processes, use of resources)?</i></p> <p><i>What are the causes/forces at work?</i></p> <p><i>Do services available locally need to be adjusted to meet the needs of children identified through the Marac?</i></p> | <p>Research tells us “there is a major overlap between direct harm to children and domestic abuse: “In Plain Sights” SafeLives Insights research document tells us nearly two thirds of children exposed to domestic abuse were also directly harmed. Children are suffering multiple physical and mental health consequences as a result of exposure to domestic abuse and a quarter of the children exhibit abusive behaviours, mostly once their exposure to domestic abuse has ended. Only half of these children were previously known to children’s social care but 80% were known to at least one public agency. Children’s outcomes significantly improve across all key measures after support from specialist children’s services”</p> <p>NSPCC “How Safe are our children” 2016 tells us that 35% of case conferences identified domestic abuse as a factor and yet nationally only 3% of referrals to Marac are made by Children’s Social Care</p> <p>Working Together to Safeguard Children 2015:</p> <p>In addition to individual practitioners shaping support around the needs of individual children, local agencies need to have a clear understanding of the collective needs of children locally when commissioning effective services. As part of that process, the Director of Public Health should ensure that the needs of vulnerable children are a key part of the Joint Strategic Needs Assessment that is developed by the health and well-being board. The LSCB should use this assessment to help them understand the prevalence of</p> |

abuse and neglect in their area, which in turn will help shape services”.

- In analysis of Marac data the LSCBs can measure against such statistic and cross reference with local JSNAs to ensure that the Marac are discussing a volume that is indicative and reflects local need
- Analyse year on year trends using Marac data; for example:

Cases and associated children, Q1 2011- Q1 2016



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| <p>The Marac is performing in line with SafeLives recommendations and best practice</p> | <p>How do we know what good looks like? What does research/good practice tell us?</p> <p>Does the Marac comply with SafeLives recommendations in terms of safeguarding children?</p> <p>How is this information captured and if a concern, raised at the Board?</p> <p>How do the Marac Steering group and LSCB sub groups communicate?</p> <p>Do we have a Marac dataset that captures outcomes for children, how is this reported to the Board?</p> <p><i>Planning your reporting and audit/QA activity around this</i></p> | <ul style="list-style-type: none"> • Marac is hearing the recommended number of cases based upon 40 per 10,000 of the adult female population (indicating that agencies are identifying high risk domestic abuse early) • All victims assessed at high risk are being discussed at Marac (none are being screened out) • All families referred to Marac are known to Children’s Social Care (ability to cross reference in evidence gathering essential) • No cases are closed to children’s services before the information sharing process at Marac is completed • Children’s Social Care consistently attend Marac • Education and Early Years settings have strong links with Marac(preferably having consistent and effective representation at the meetings) • CSC; education and other child care settings are referring to Marac • Where appropriate and necessary Children’s Social Care take referrals directly from Marac meetings to reduce beaurocracy and time lapse • Where possible and appropriate (consider age) the child or young person’s voice is heard at Marac • Effective interventions based on good quality risk assessments of the whole family • All action plans created at Marac will have actions to address the behaviour of the perpetrator (whether in household or not) either through disruption; diversion; prosecution or management. • Repeat referrals to Marac are at the SafeLives recommended level of around 40% indicating positive identification and ongoing abuse is made known to CSC • High levels of professional confidence – especially when seeking the views of children and dealing with challenging parents (abusive and non-abusive) who may seek to minimise the impact of their behaviour on children’s emotional well being • Action plans from Marac clearly show actions to reduce risks and impact of domestic abuse on the children and young people of the family • Marac is consistently receiving referrals for victims aged 16 and 17 as per the Government Definition changed in 2013 to include |
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| | | <p>this age group</p> <ul style="list-style-type: none"> • The Marac is responding appropriately to victims who are children and the recommended guidance is being followed here • Safeguarding needs are identified at Marac for those young people under the age of 18 who are using harmful behaviour - whether in their intimate relationship or using violence and abuse against a parent, sibling or other family member see Home Office Guidance on APVA here <p>Statistics/performance measures/activity data</p> <p>How will we know how well the Marac is working to safeguard children and young people?</p> <p><i>Evidence: What evidence do we have already? (SafeLives data;</i></p> <p><i>What don't we have that we need?</i></p> <p><i>Is there any further information not available that we need?</i></p> <ul style="list-style-type: none"> • Number of cases heard at MARAC involving children • Sources of referrals to MARAC by agency • Number of referrals to Marac from CSC (% increase each quarter) • Number of domestic violence notifications from Police to Social Services • Number of DV notifications from Police to Social Services leading to a referral • Number of young people who are the using harmful behaviour in IPV • Number of young people who are the using harmful behaviour in context of family violence (APVA) • Number of children and young people involved in specialist domestic abuse services • Availability of specialist services for perpetrators and victims • Increasing numbers of referrals to Marac from agencies working with children (evidencing the whole family approach and risk assessment of parent as well as child) • Consistent provision of accurate Marac data to LSCB • Number of children subject to CPP where parent referred to |
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| | | <p>Marac</p> <ul style="list-style-type: none"> • Numbers of child victims referred 16 – 17 years • Number of agencies using the Young People's DASH Risk Assessment Checklist • Number of Young Peoples Violence Advisors (YPVA) commissioned locally • Postcode data to specific Marac referrals link to council corporate 'mapping' resource • Reduction in repeat domestic abuse call outs by Police • Childs voice: % of children who when their views are sought report an improvement in their family life • Maracs are linking closely with other multi agency arrangements such as CSE Panels; ICPCs; Strategy meetings; Mappa and there is clear evidence of information sharing where relevant |
| | | <p>Audits and quality assurance activity</p> <ul style="list-style-type: none"> • Marac Operating protocol is up to date and relevant and is reviewed every 2-3 years • Marac Governance Group review Marac processes annually to ensure effectiveness using SafeLives Marac Review process here • Multi agency themed audits or Scrutiny panels chaired by LSCB (SafeLives can support with this) • Single agency audits which focus upon referral process, quality of risk assessment and outcomes following intervention • DV notifications to CSC – understanding process/what it tells us/capacity and data protection issues • Community response – access to Domestic Violence Disclosure Scheme - Right to Know being considered as an action at Marac? • Actions around children and YP adequate? Audit completion of actions • Amount of referrals made from Marac to Early Help/ Children Centres V uptake |

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| | | <p>Voice – of the child, community, practitioners</p> <ul style="list-style-type: none"> • Child’s wishes and feelings evident in Marac where possible • Risk assessments – evidencing impact on child/young person and taking note of child’s developmental age; competence and ability to engage in support • Children accessing support around healthy relationships in schools • Where Operation Encompass in practice - key professional from school is linked with Marac process • YPVA report/outcome reporting |
| | | <p>Other: Evaluations, inspections</p> <ul style="list-style-type: none"> • Ofsted JTAI “Deep Dive” Children Living with domestic abuse • HMIC • SafeLives Review/Observations of Maracs |