

Marac Guidance

Managing and addressing high volume

A small number of Maracs are managing very high caseloads of over 40 cases per monthly meeting, or have annual volumes that significantly exceed SafeLives' projected amount - some by as much as 25%

This checklist aims to highlight some of the challenges and risks associated with high volume. It also explores how high volume Maracs and Marac representatives can be supported locally to ensure an effective response to victims and their children, and to acknowledge and manage these issues.

1. Are cases high risk? Do they meet the Marac threshold?

Monitor the appropriateness of cases over 2-3 Marac meetings. *NB For a simple monitoring form please contact the Knowledge Hub for support by sending an email to: KnowledgeHub@safelives.org.uk*

How many cases are not at current high risk (of serious harm or homicide)?



Which criteria was used to refer these cases?



Which agency referred them?



Is the proportion of inappropriate cases significant? Are the majority referred from one agency and/or under one criteria?

Consider:

- Training for agencies regularly referring cases that do not meet the threshold.
- Internal quality assurance of own agency referrals by Marac representatives.
- Whether local practices are impacting on volume.
- Reviewing local care pathways. Are these clear and followed by frontline professionals?
- Implementing a multi-agency action plan with the support of the Marac steering group, and tracking the impact of any new measures.
- Using Marac data to evidence risks and issues.

2. Does the local structure support an effective Marac process?

Having established that the majority of cases are appropriate, Maracs should ensure that the local arrangement facilitates an effective process.

Are the right agencies consistently attending and effectively representing their agency at Marac?



Is the current caseload manageable, including pre and post Marac work?



Has the frequency of meetings been increased or can the Marac be split based on district or police division?



Has this been piloted? What impact or issues were identified?

Consider:

- Implementing alternative meeting cycles for a pilot period to reduce the number of referrals to each Marac and ensure the process remains effective and sustainable.
- Monitoring and evidencing to agencies, representatives and victims any benefits (eg pre and post Marac work becomes swifter and more manageable) and barriers (eg representatives are already attending multiple Maracs) to this.
- Risks of maintaining current structures (impact on representatives, outcomes for victims).
- Ensuring responsibility is clear and rests with an appropriate strategic body.
- Using Marac and Idva data/evidence to demonstrate Marac outcomes on victim safety.

3. Are all cases being managed effectively?

The Marac increases the safety of victims and children and addresses perpetrators' behaviour.

Is your Marac process streamlined?



Are all cases managed effectively and consistently throughout the meeting?



Is the Chair inducted and supported to facilitate risk-focused meetings that generate effective, multi-agency action plans to address the identified risks?



Does the Idva service contact all victims prior to Marac and effectively represent their views and wishes at the meeting?

Consider:

- Reviewing the Marac administration process to ensure it follows guidelines, minimising resources and demands on agencies.
- Routinely monitoring meetings to ensure all cases receive a consistent response.
- Holding scrutiny panels to review process, practice and consistency, and addressing or embedding any learning to ensure positive outcomes for all victims and their children.
- Support for representatives to ensure effective contribution (e.g. induction, training, protected time to research and implement actions).
- Whether consistent, effective support is available to all high risk victims and uncompromised by caseload/Marac volume.

4. Is the Marac supported?

Support and governance of the Marac is effective and responsibility is clear and appropriate.

Is the Idva service sustainable with capacity to support all high risk victims?



Does the Marac have sufficient administrative capacity?



Does the Marac have effective support with clear lines of strategic responsibility?

Consider:

- Mainstreaming funding for Idva and Marac administration to reflect the recommended level.
- Taking steps to ensure any remaining risks or concerns associated with your high volume Marac are monitored and addressed.
- Ensuring responsibility to support your Marac sits with appropriate groups and strategic leads with clear lines of responsibility. This should not rest solely with the Marac or representatives.

SafeLives and the Knowledge Hub can work with you to:

- Provide support to address recommendations identified in your HMIC report in relation to Marac and Idva.
- Support your Marac operationally and strategically to implement guidance within this checklist.
- Share best practice and provide links with other high volume Maracs, and share learning from different agencies, including health.
- Highlight the challenges for representatives of high volume Maracs at a strategic level.
- Support your Marac to implement Self Assessment and local Marac action plans to identify and embed good practice and areas for development, and support sustainability.
- Provide strategic and commissioning guidance and support.
- Provide updates on the latest Marac data and research.

SafeLives also offers free resources, workshops and tailored training to Marac Chairs, Co-ordinators and Representatives. Find out more and register for updates at

www.safelives.org.uk