



Briefing for Maracs

Repeat Cases

Definition of repeat (2018)

SafeLives defines a 'repeat' as ANY instance of abuse between the same victim and perpetrator(s), within 12 months of the last referral to Marac.

The individual act of abuse does not need to be 'criminal', violent or threatening but should be viewed within the context of a pattern of coercive and controlling behaviour.

Some events that might be considered a 'repeat' incident may include, but are not limited to:

- Unwanted direct or indirect contact from the perpetrator and/or their friends or family
- A breach of police or court bail conditions
- A breach of any civil court order between the victim and perpetrator
- Any dispute between the victim and perpetrator(s) including over child contact, property, divorce/separation proceedings, etc.
- These events could be disclosed to any service or agency including, but not exclusive to, health care practitioners (including mental health), domestic abuse specialists, police, substance misuse services, housing providers etc.

Purpose

This briefing seeks to provide context to the recent change in definition of a "Marac repeat". We also look to offer guidance on best practice to manage repeat cases in the Marac process so that outcomes for those victims and children referred for a multi-agency response are optimised.

Why have we changed the definition of repeat?

SafeLives' definition of Marac has not been reviewed since Maracs were implemented in 2007. It can be reasoned that the original definition did not clearly reflect how coercive control is used by perpetrators to continue to abuse victims, particularly post separation. It has been contended that the original definition, possibly because of the use of the words "incident" and "crime" only spoke to Police and was often overlooked as a threshold to refer to Marac by other practitioners.

In 2018, SafeLives was asked to review the definition of "repeat" in light of a [domestic homicide review](#) into the death of a woman who had been known to agencies, and who had previously been referred into the local Marac process:

The focus on a 'repeat' threshold as being at a specific point of time and which, if reported to the police, would constitute criminal behaviour, is potentially confusing.

The definition should be reviewed in light of the increasing recognition that professionals should consider the harm caused by coercion or control, the cumulative impact on a victim and that a repeated pattern of abuse can be more injurious and harmful than a single incident of violence.

Recommendation 15: SafeLives to review the definition of a 'MARAC repeat'

On consideration of the facts and circumstances in this case, and on reflection of the current domestic abuse landscape, we agreed to act upon this recommendation without delay.

We therefore undertook to create a definition which better reflected new legislation and, more specifically, which spoke to the risks and triggers of stalking, harassment and continued abuse and coercive control post separation, including breaches of orders and coercive control exerted through child contact.

From the DHR Chair and author: "As the chair, I am obviously delighted that the recommendation has been acted upon. My sense is that the new definition addresses the recommendation and, if the same set of circumstances occurred in the future, would likely trigger a re-referral to MARAC."

There is evidence in other DHRs that these have not been identified as repeat incidents of domestic abuse and have not triggered a repeat referral to the Marac process. For example, in a DHR published in 2015 ("DHR NB01") reviewing the death of a woman in 2012 we see:

"There was a failure to refer repeat incidents to MARAC, who did not therefore have the full information available to enable an effective understanding of the escalation of risk and to develop an appropriate risk management plan..."

"The Chair of the [Safety Partnership] raises with [SafeLives] the following national concerns: The need for [SafeLives] to revise the guidance on the definition of repeat incidents, to include incidents where bail conditions have been breached."

Why is it important to identify repeat cases?

There is no doubt that any definition or guidance is open to interpretation and may be influenced by local protocols and pressures. However, SafeLives look to create guidance and relevant resources that have **the safety of victims and children living with domestic abuse at their heart**.

While evidence from the effectiveness of Maracs tells us that around 60% of those victims who receive independent specialist support through the Marac process experience a cessation of abuse, that tells us that around 40% experience on going abuse from the perpetrator.

It is important that we continue to provide a multi-agency response to those victims for whom the Marac process, so far, has not been effective in reducing the risk of abuse or preventing further harm. We can only do that if we identify when that abuse is continuing and work collaboratively to reduce or eliminate that risk.

Why is it important to refer repeat cases back to Marac?

Marac is a systematic multi-agency response to victims assessed to be at high risk of serious harm or homicide.

If the process has not been effective or successful in reducing the risks (or the impact of those risks) that the perpetrator poses to the victim, then agencies will need to continue to work together to resolve challenges and barriers preventing effectiveness – see below.

The evidence from reviewing and quality assuring Maracs since 2009, including case audits together with learnings from DHRs, tells us that there are **four** common reasons why the Marac process has not been effective in reducing the risks of ongoing abuse for some victims or potentially preventing their homicide:

Reason	Marac not effective because	Possible Solutions
No support in place for the victim	The victim has not been engaged into the process from the point of, or soon after, identification with independent specialist domestic abuse support (Idva/Idaa). Understanding from the victim what risks they face, how they manage their own safety, what they need to feel and be safe and having a true insight into the perpetrator's behaviour from them is fundamental to the effectiveness of the Marac process in safeguarding victims and children by the original or subsequent action plan.	<ul style="list-style-type: none"> • Referrals must be made to the Idva/Idaa as soon after the domestic abuse has been identified to improve chances of engaging them into support and through the Marac process • Idvas/Idaas (and other practitioners) must be flexible, tenacious and creative in their efforts to engage victims of abuse, working with other agencies where appropriate to do so • If there is no engagement prior to the Marac meeting the action plan should include creative ways to build trust and engage the victim in to the process and to access support this may include actions to work together
Perpetrators behaviour has not been addressed	The perpetrator presents the risks to the identified victims. An action plan that does not address the perpetrators behaviour through management, disruption, diversion or proactive prosecution will mean they will continue to abuse.	<ul style="list-style-type: none"> • Information and expertise around the perpetrator must be researched and shared to inform the risk assessment • The action plan must address the risks identified and include ways to manage their behaviour through support, disruption, diversion and/or prosecution (see 'Addressing Perpetrators' guidance).
Risks are not accurately identified	The voice of the victim is absent. Core agencies for an effective Marac were not all engaged and collaborating with the process or attended the Marac meeting so not were able to share information and expertise to inform the risk assessment and so take relevant actions to reduce risks identified.	<ul style="list-style-type: none"> • The Idva/Idaa should work to engage the victim of domestic abuse into support and into the process to coordinate the multi-agency response to them at the earliest opportunity so that their voice is heard and informs an accurate risk assessment • All nine agencies for an effective Marac must engage and actively share information and expertise throughout the process, attending the Marac meeting to optimise information sharing and to volunteer actions that they can implement to help reduce risks identified
The victim and/ or perpetrator have complex needs	That impact on risk and vulnerability but are not being met by relevant services who could be working collaboratively to address all the needs of the individual (See SafeLives' Guidance).	<ul style="list-style-type: none"> • Agencies working with all parties (victims and perpetrators) work collaboratively throughout the process to understand, identify and address the complex needs of individuals – seeing the whole person and not just a single or a combination of issues. • If this is not happening when complex needs are identified at the Marac meeting the action plan must reflect the risks and triggers these complex needs may present and a multi-agency safety plan created to address needs and reduce risks. Where it is deemed that the Marac meeting does not have time to create a full action plan a professionals meeting should be called by a lead professional (e.g. Idva/Idaa/police)

A standard action from a Marac meeting is for all agencies to “flag and tag” files and provide a mechanism for practitioners to identify when a person accessing their service has been a party to the Marac process in the last 12 months.

This identifier will inform the practitioner that a victim has been assessed to be at high risk of serious harm or homicide and they can consider whether there are indicators that the abuse is ongoing and/or possibly escalating.

The practitioner can consider whether the definition of “repeat” has been met and make the referral back into the Marac process where they will have the opportunity to further engage with support from an Idva/Idaa or other domestic abuse specialist.

The case will be listed as a repeat to be discussed at the next meeting, but agencies will be proactively collaborating to identify ongoing risks and work to reduce those risks – often coordinated by the Idva/Idaa, the referring agency or police or whomever may be engaged with the victim or perpetrator.

How can repeat cases be managed effectively at the Marac meeting?

All agencies should prepare for the Marac meeting when they have received the agenda by reviewing previous minutes and action plans, ensuring they have completed actions or have clear reasons for actions that are incomplete.

The re-referring agency will present the case, identifying how the case meets the repeat threshold and sharing what they have done since they identified the ongoing abuse in terms of reducing the risks.

The Chair can consider previous action plans and seek to satisfy themselves and partners that actions were completed.

After new information and expertise is shared (no need to repeat information shared at previous meetings) partners can work to identify how the action plan can be enhanced to reduce current risks with consideration to those common gaps, as identified above or other reasons identified for the ongoing abuse.

Consider whether a professionals’ meeting would provide solutions to the challenges, particularly around complex needs, and who should call and lead that meeting.

We recommend that the Marac Coordinator is involved in administering that meeting in line with Marac operating protocols.

Consider if it may be safe, appropriate and necessary to hold a joint or professionals meeting with the victim or perpetrator present. Decisions should be made on a case by case basis and by all relevant agencies with the safety of all at the heart of every decision made.

Strategic overview of Repeat Cases

We recommend that Marac Governance look to monitor the volume and the management of repeat cases. The aim should be to **get it right first time**.

What we know

- Risks are reduced when the victim is engaged in independent support and with the Marac process where their voice is heard
- Risks are reduced when perpetrators behaviour is managed effectively and they are prevented from continuing to cause harm
- Risks can only be reduced if we can identify them accurately.
- Risk assessment is most accurate when all relevant agencies/practitioners share information that is necessary, relevant and proportionate to risk AND they use their expertise and specialism to determine how that information may influence risks and triggers.

Through **regular auditing and monitoring of repeat cases** in the Marac process, perhaps with a focus on those parties who are regularly referred back to Marac following a repeat incident, governance groups can identify gaps in practice or procedures.

Strategic groups and partnership boards should be satisfied that agencies are working collaboratively to share information and expertise at the earliest opportunity to accurately assess risk and with any interventions and action plans being led by that level of risk.

For those assessed to meet the Marac threshold there must be confidence that Marac process will be effective in reducing the risk of serious harm and prevent homicide.

Useful guidance and resources for those involved in Marac:

- **10 Principles of an effective Marac**
- **Toolkit for managing High Volume of cases at Marac**
- **Managing cases with Complex Needs**
- **Addressing the Behaviour of Perpetrators at Marac**
- **Safeguarding Children at Marac**
- **Guidance for 16 and 17-year olds at Marac**

For further information, guidance and resources: www.safelives.org.uk

For queries please contact info@safelives.org.uk