

Guidance for professionals

Identifying and Responding to HIGH RISK Domestic Violence and Abuse in Southampton

This guidance covers the steps to take to respond to Domestic Violence and Abuse (DVA). **It explains the new referral routes for HIGH RISK DVA in Southampton (effective from July 2016).** This is for professionals in any service that has direct contact with the public.

What is DVA?

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality (Home Office 2013).

DVA includes stalking, so-called Honour Based Violence and Forced Marriage.

What is 'High Risk' DVA?

'High Risk' indicates the victim is at risk of 'serious physical harm or death'. This risk must be current.

The level of risk is assessed using the SafeLives (DASH) Risk Assessment, with 15 or more (of 24) yes 'ticks' considered to be 'high risk'.

However, professional judgement or a victims own assessment of risk may escalate a DASH risk assessment level or identify 'significant harm' that should trigger an immediate 'high risk' response. 'Honour-based Violence' is **always** considered high risk DVA.

The New Multi-Agency MARAC&MASH Model (called the M4)

The M4 is building on information sharing and risk assessment already taking place in MASH to provide a multi-agency risk assessment for high risk DVA. It means MASH will expand to assess all High Risk DVA adults (with or without Children).

There is 'one front door' for High Risk DVA and children's safeguarding. All agencies within MASH will assess the risks and needs of victims and their children (if applicable) in one place.

MARAC: The existing multi-agency risk assessment meetings for adults experiencing high risk DVA will shift to monthly meetings. Only a small number of the most complex cases will need to go on to MARAC (after MASH)

If a MARAC is needed all professionals involved with the adult victim and their children will need to attend and take part.



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Steps to respond to HIGH RISK DVA



Be alert to the signs of DVA. If you have concerns that it is a 'live' issue happening in a family you are working with, try to speak to the adult survivor (victim) on their own and sensitively ask questions that may help you to identify the issues and risks. Explain duty of care to safeguard families.



Disclosure of DVA is often a very difficult experience and it may follow a long period of abuse. Always listen with respect and sensitivity. It is not uncommon for a victim of DVA not to recognise their experience as abusive. Listen carefully to identify the signs and indicators of abuse.



Reassure your client that confidential and trusted help is available and explain the benefits of seeking help to reduce risks of harm. Seek consent to proceed to a Risk Assessment and /or to make a referral. You must always inform your client that a high risk assessment could lead to a referral to MASH to protect their safety and that of any children. This will mean sharing relevant information about risks. However where the DVA is at highest risk level consent may be lawfully overridden for the safety of individuals. See guidance on Consent and Information Sharing.



Complete a risk assessment using the Safelives (DASH) risk assessment tool. The number of yes ticks can help you to do this, along with your own judgement and knowledge of your client and their circumstances. Call PIPPA for help with the risk assessment if you need it. In Southampton 15+ yes ticks is high risk. High risk means the survivor (victim) is at imminent risk of serious physical harm or death.



For High Risk DVA refer to MASH. A single referral to MASH will cover adults with or without children. The safety of adults and any children will be considered in MASH at the same time.



Safety plan with the adult survivor for the whole family, keep a record of all actions and discussions and ensure DVA consideration in wider family / individual work. Call PIPPA for advice if you need it.



For a small number of cases that have been through MASH a further multi-agency risk assessment is required. This is provided by a MARAC. MARAC is held monthly. A referral to MARAC will usually be where risks are escalating or different to those identified in MASH, the case is particularly complex or there is no engagement and concerns remain high.



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What about children and young people involved?

Children living with violence in the home are affected in different ways. They may be directly at risk of harm themselves or indirectly by witnessing parental DVA. Parental DVA is recognised as a child safeguarding issue. In Southampton there is a single front door (MASH) for high risk DVA (for adults) and also safeguarding children and young people. One referral to MASH covers both. Multi-agency services in the MASH will consider risks to the whole family and agree actions and responses together. Children's Social Workers as well as IDVA's (DVA specialists), police and other partners form part of the MASH team.

What about adults with additional needs?

Adults with additional care needs (previously called vulnerable adults) who are also experiencing high risk DVA will have their specific needs and risks addressed in MASH as part of a multi-agency risk assessment and/or the case will also be referred to the Adult Safeguarding Team. It is important to identify any additional needs you are aware of in the MASH referral form. A multi-agency strategy discussion (S.42 of the Care Act) where appropriate, will take place and involve MASH partners. In addition mental health and substance misuse experts will be part of the MASH multi-agency team to inform risk assessment and action.

What if your client is an alleged DVA perpetrator?

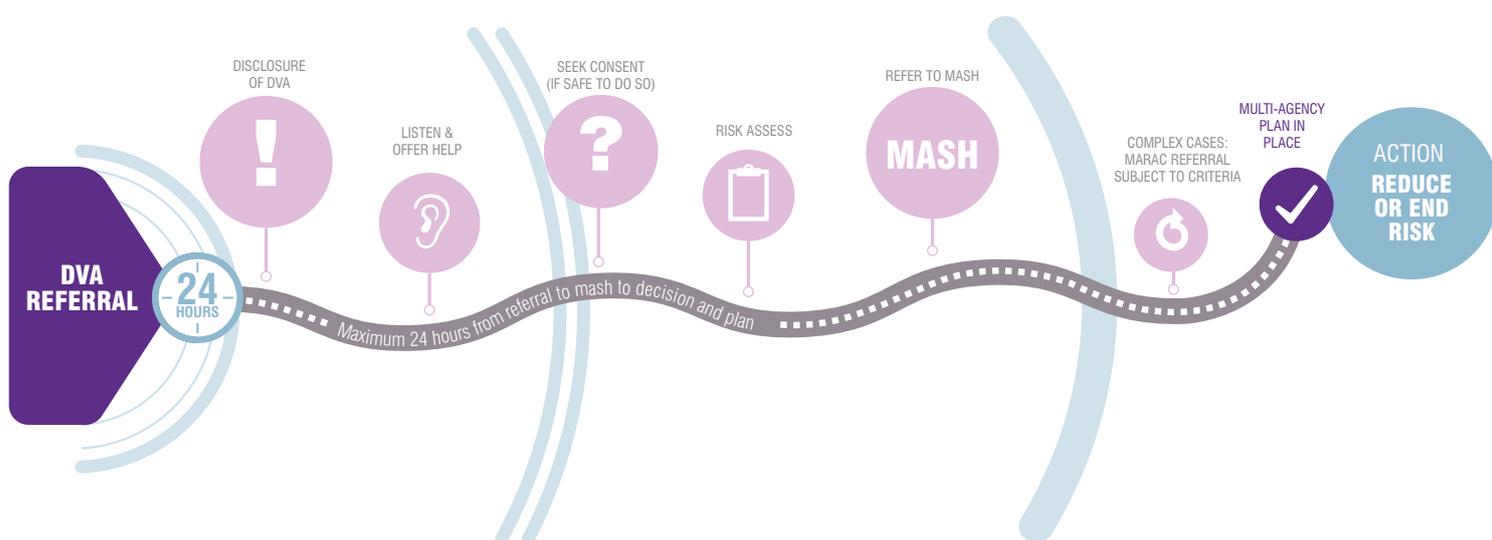
If your client discloses DVA abusive behaviour or you suspect DVA abuse you should call Hampton Trust or make contact on line (see contacts page).

The Trust are local experts in DVA working with perpetrators. They offer a range of advice and interventions to challenge and change behaviour. Under the DA-PP programme you can nominate your client to a needs led intervention for perpetrators (even those demonstrating high levels of resistance). But nominations must be based on his/her consent and individuals will be subject to an assessment of suitability. Call the Trust for advice.

You could also check to see if they are known to Probation (NPS or CRC). Call PIPPA for advice on this.

If the abuse is putting a victim and/or their family at immediate risk of harm call the Police and/or follow this High Risk DVA process.

DVA Referral Routes Diagram



MASH

What is MASH?

A multi-agency safeguarding hub. In MASH representatives from a range of agencies and expertise share information to assess and respond to risks. In Southampton the MASH is for safeguarding children and young people and for high risk DVA.

When do I refer?

Refer high risk DVA adult victims to MASH if you have identified DVA at highest risk levels (either by completing DASH risk assessment or by your professional judgement). High risk DVA means your client is at imminent risk of serious physical harm or death. Referrals should be immediate upon disclosure, risk assessment or reported incident. MASH decisions for DVA will be made within 24hours of this referral.

What if it has already been referred to MASH and there is a repeat incident?

You should make a referral to MASH even if it is an 'open case' if a second or subsequent high risk incident occurs.

How do I refer?

Complete the High Risk DVA referral form to MASH. Available on PIPPA and LSCB/LSAB websites (under MASH). Usually if possible you would also complete a DASH Risk Assessment form. Call PIPPA for help and advice.

What will happen to my referral?

Inside the secure environment of MASH, partner agencies will share what relevant and proportionate information they have to identify DVA risks to the whole family. A multi-agency discussion will follow. This will be within 24 hours of a referral or sooner if the risks for children are significant. Based on the combined risk identification and assessment, outcome decisions and actions will be made and recorded. Relevant agencies will receive and act on agreed actions.

How is my client involved?

The victim or survivor will usually be contacted by a DVA specialist immediately upon receiving referral to MASH. The survivor will also be referred to an IDVA (Independent Domestic Violence Advocate) and/or other lead professionals for support. The survivor will be informed of the actions agreed in MASH (usually by an IDVA). The referrer should also be notified of the MASH decision.



MARAC

What is MARAC?

MARAC is a multi-agency risk assessment conference or meeting that is held monthly to discuss highest risk DVA cases, to identify risks and agree actions. From July 2016 MARAC referrals in Southampton must meet the following criteria and have already been assessed by MASH. This is now a follow-up meeting to the initial risk assessment where a case is more complex or additional information is required.

When do I refer?

After a MASH High Risk Referral, if the MARAC criteria is met (see below). Referrals must usually be within a month of a MASH decision. Any professional can make a referral to MARAC or it may be referred directly from MASH.

The Criteria for a referral to MARAC is;

- There is a high risk DA assessment (DASH or AD232R)
- The case has already been referred and assessed at MASH.
- No other multi-agency conference or meeting is able to address the DA risk factors in this case e.g. child protection conference
- One of the following applies;
 - There is non-engagement with the adult victim (but high levels of concern remain)
 - Persistent repeat incidents of DA suggest agreed multi-agency actions are not working, for example this may be an 'entrenched' case, or risk levels are raised by the nature, severity or frequency of repeat incidents.
 - After victim contact the MASH risk assessment and outcome decisions require review, for example the risks presented at MASH differ to those identified after contact with the victim.
 - The case involves a priority serial perpetrator.
 - There are particularly high levels of need and complexity which warrant further risk review / discussion.
 - Professional discretion applies.

How do I refer?

MARAC meetings will be held monthly. Contact the MARAC Co-ordinator to make a referral. Contact **023 8053 3291**. Complete the MARAC referral form (provided by the co-ordinator or available on PIPPA website).

What will happen to my referral?

Partner agencies will be asked to update risk information on the survivor and family as appropriate and relevant. The MASH information will also be shared in this confidential meeting. Partners will identify and assess risks and agree actions. As there are a much smaller number of cases (than MASH) more time will be given to analyse and respond to the circumstances presented by the case.

Actions will be recorded and shared with relevant partner services. You and other professionals working with your client may be invited to attend the meeting to share information and expertise, and to help inform an effective action plan.

How is my Client involved?

Usually a MARAC referral will follow a MASH and IDVA referral so your client will be advised of the MARAC by the lead professional working with them. The survivor's views and concerns will usually be represented at the MARAC meeting by their lead support worker e.g. IDVA. Your client will not be invited to the MARAC. The agreed actions will be fed-back to your client by the Lead Professional as agreed at MARAC.



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Key contacts

MASH

Telephone: **023 8083 2300**
Fax: **023 8083 2968**
Secure email: **mash.secure@southampton.gcsx.gov.uk**

MASH referral forms on:

LSCB, LSAB (under MASH) and PIPPA website. <http://southamptonlscb.co.uk/mash-multi-agency-safeguarding-hub/>

PIPPA

Telephone: **023 8091 7917**
Fax: **023 8083 4541**
Secure email: **pippa@southampton.gcsx.gov.uk**

Pippa referral forms on:

http://www.pippasouthampton.org/Workers_Zone.php

Adult Safeguarding Single Point of Contact

Telephone: **023 8083 3003**

Referral forms on:

<https://www.southampton.gov.uk/health-social-care/contact-social-care/report-abuse-or-concerns-about-an-adult.aspx>

Hampton Trust

Telephone: **023 8000 9898**

Referral forms on:

<https://www.hamptontrust.org.uk/our-programmes/dapp/how-get-place/>

MARAC Co-ordinator

Telephone: **023 8047 9250**
Email: **southampton.mash.admin@hampshire.pnn.police.uk**

MARAC referral form:

Available from the MARAC Co-ordinator or PIPPA website.



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