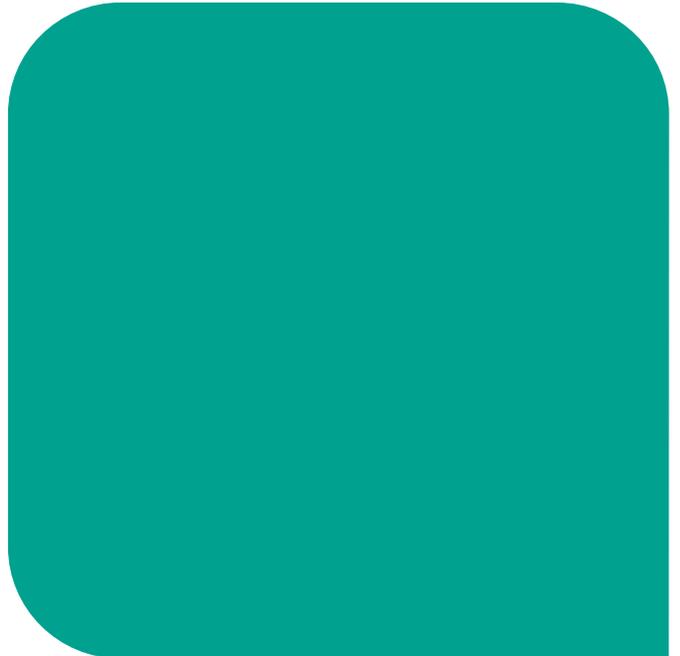




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# Protecting adults at risk: Good practice guide



## Referrals to other processes

In the course of adult safeguarding work, it will often be necessary to make referrals to other parts of the safeguarding or health and social care systems.

### Multi-agency risk assessment conference

Referrals to MARAC can be made in high-risk cases of domestic abuse, stalking and 'honour'-based violence. Practitioners should complete a CAADA-DASH RIC prior to referral.

Disclosures to MARAC should be consistent with the principles and rules contained within the common law, the Data Protection Act and the Human Rights Act. Information can be shared when it is necessary to prevent a crime or to protect the health and/or safety of the victim and/or the rights and freedoms of those who are victims of violence and/or their children. Information sharing must be proportionate to the level of risk of harm to a named individual or known household. It is good practice for the referring organisation to discuss referral to MARAC with the victim if it is safe to do so.

The recommended referral criteria for MARAC are:

- Professional judgement: if a professional has serious concerns about a victim's situation, they should refer the case to MARAC. There will be occasions where the particular context of the case gives rise to serious concerns even if the victim has been unable to disclose the information that might highlight their risk more clearly. This could reflect extreme levels of fear, cultural barriers to disclosure, immigration issues and/or language barriers – particularly in 'honour'-based violence. The judgement should be based on the professional's experience and/or the victim's perception of the risk even if they do not meet the criteria given below.
- Visible high risk: if 14 or more 'yes' boxes have been ticked in the RIC, the MARAC referral criteria would normally have been met.
- Potential escalation: the number of police callouts to the victim as a result of domestic violence in the last 12 months. This criterion can be used to identify cases where abuse appears to be escalating and where it is appropriate to assess the situation more fully by sharing information through MARAC. It is common practice to start with three or more callouts in the last 12 months but this will need to be judged on a case-by-case basis.

In a situation of domestic violence where children are also at risk, referral must be made to the relevant children and families social work team.

Refer to local MARAC procedures for a list of local representatives and referral details.

## Multi-agency public protection arrangements

MAPPA are a set of statutory arrangements to assess and manage the risk posed by certain sexual and violent offenders. MAPPA bring together the police, probation and prison services and MAPPA areas are coterminous with police force areas. (6)

Referral should be made to the MAPPA process if it appears to a senior manager in the relevant agency that:

- the likelihood of harm occurring is considered to be high or very high
- the level of harm, if this occurs, would be high and potentially life-threatening
- there is a substantial chance of a serious offence being committed
- the potential victim is known specifically or by type
- this cannot be managed alone by the referring agency
- this cannot be managed by normal liaison between two agencies
- there are no other procedures under which this would normally be managed. (7)

## Common Assessment Framework

The Common Assessment Framework (CAF) offers a basis for early identification of children's additional needs, sharing of this information between organisations and the coordination of service provision. Where it is considered that a child may have additional needs, with the consent of the child, young person or parents/carers, practitioners may undertake a CAF to assess these needs and to decide how best to support them. Referrals are typically made via a local area's CAF coordinator. The findings from the CAF may give rise to concerns about a child's safety and welfare. In these instances, a child protection referral may be appropriate. (7)

## Child protection

In investigating concerns about adult abuse, issues of possible child protection can also be discovered. If somebody believes or suspects that a child may be suffering, or is likely to suffer, significant harm, then this should always be referred to the local authority children's social care services. In addition to social care, the police and the National Society for the Prevention of Cruelty to Children (NSPCC) have powers to intervene in these circumstances. While professionals should seek, in general, to discuss any concerns with the child and family, and, where possible, seek their agreement to making referrals to local authority children's social care, this should only be done where such discussion and agreement-seeking will not place a child at increased risk of suffering significant harm. (7)

## Adult social care

If safeguarding work identifies ongoing social care needs, and the adult at risk is not currently known to a local social work team, then a referral should be made to the appropriate team, based on the person's needs.