

Protocol for joint working between Children's Social Care and Solace Advocacy and Support Service

These procedures have been developed to aid and facilitate joint-working between Solace Advocacy and Support Service (SASS) and Southwark Children's Social Care (CSC). Adherence to the procedures has been agreed by both services.

Please see the glossary in Appendix 1 for an explanation of the acronyms used throughout the document.

1. SASS

1.1 SASS is the Council's commissioned domestic abuse service and provides a free, independent and confidential advocacy and support service for victims of domestic abuse and all other forms of Violence against women, girls and vulnerable people (e.g. forced marriage, FGM and sexual violence), in Southwark. SASS is able to provide advocacy for a period of around 12 weeks, after which service users are encouraged to access follow-on services such as peer support groups, DV awareness, counselling, child therapy, etc., (see appendix 3 for full list of services).

1.2 SASS also operates a Sanctuary Scheme on behalf of the Council for victims of domestic abuse and hate crimes, who wish to stay in their own homes. The Sanctuary Scheme provides increased security for victims in their homes. This may include strengthened doors, locks, window frames and fire resistance measures. Access to the Sanctuary Scheme is via the services referral form, on receipt of which SASS will carry out a risk assessment of the victim's circumstances.

1.3 To make a referral to SASS for advocacy and support, the Sanctuary Scheme or any of the services that SASS provide please complete the referral form (appendix 4). It is important to be clear about the service for which the service user is being referred, by ticking the relevant boxes on the referral form.

1.4 Please note that it is important that the service-user is informed that SASS is a voluntary service; engagement with SASS cannot be enforced by a social worker. When a client has been allocated to a SASS worker, that worker will contact the referrer to confirm acceptance of the referral and introduce herself as the SASS point of contact for that client. SASS staff will also notify referrers when it has not been possible to establish contact with a service user.

1.5 SASS operates a waiting list system for clients assessed as medium and/or standard risk, (high risk clients are not placed on a waiting list); clients on the waiting list will be risk assessed, given safety advice and offered fortnightly check-ins while they wait to be allocated a caseworker. Social workers referring non-high risk clients who need to be supported immediately must specify this on the referral form (Appendix 4), and provide reasons for the need for urgency.

1.6 When referring to SASS, it is important to state if the client's children are on a CPP, as such cases will be expedited for support and services such as counselling and ARISE.

2. Rationale & referral pathway from SASS to Children's Services

2.1 Each service-user who engages with SASS will have a Safe Lives DASH risk assessment (appendix 5) conducted in order to establish the level of risk they currently face. Where appropriate, a supplementary risk assessment regarding children is also completed to highlight potential risks to the children in the household.

2.2 If the service-user answers 'yes' to 14 or more of the questions on the RIC then they are deemed to be at high risk of harm and as a result a referral will be made to MARAC. For cases that score less than 14, MARAC and CAF referrals can still be made based on the professional judgement of the SASS worker.

2.3 If a service-user at high risk has children then the SASS worker will check whether the family are known to CSC by logging on to read-only MOSAIC. If the family is already known to CSC, the SASS worker will liaise directly with the allocated Social worker.

2.4 If the service-user is not known to Children's Services then the SASS worker consult the MASH team regarding the case to decide whether it warrants a referral to MASH. The completed MASH referral form will be sent via e-mail to mash@southwark.gov.uk.

2.5 Please note that SASS may also send a MASH referral form to Children's Services for a child of a service-user who may not be deemed to be high-risk if concerns about the child have been raised through information disclosed.

All MASH referral forms submitted to CSC will:

- a) Be fully completed, with no sections left blank.
- b) Contain all details about the child and family as requested on the CAF
- c) Contain a clear rationale for the referral
- d) Clarify what is expected from Children's Social Care.

2.7 SOLACE also offers consultations to professionals in MASH and to clients.

3. Children's Services response to referral

3.1 The MASH referral will be received by a Social worker in MASH who will send an e-mail to the SASS worker acknowledging receipt of the referral within 3 working days.

3.2 Whilst with MASH, the referral will be researched and information will be gathered from other services. A decision will then be made as to whether any further action by Children's Service's is necessary.

3.3 Solace is a member of Southwark MASH and participates in risk assessment and information sharing as part of that group.

3.4 If there are serious safeguarding concerns which require immediate action then a Section 47 enquiry will be carried out which will involve a full investigation if there is reason to believe that a child may be at significant harm.

3.5 If further action is required that does not warrant immediate action then the case will be passed to the Assessment and Intervention team. The A&I manager will consider whether the threshold has been met for an initial assessment to be conducted, if so the case will be allocated to a social worker to carry out the assessment.

3.6 If the threshold for an initial assessment is not met but there is still an identified need for targeted early help, the case may be referred to the relevant Locality Team. The Locality teams are involved with MASH on a daily basis and are consulted on issues that might affect the child's education, either at nursery or school. If there is a child under five in the household not linked to Children's Services then the Early Help service can offer support to the parent. (See appendix 6 for contact details of the Locality teams).

3.7 It is good practice for all MASH referrals to have parental consent in accordance with the MASH Information Sharing Agreement. If the parent does not consent to referral but it is the view of the Solace worker that the children are at risk of significant harm, parental consent can be dispensed with by the MASH manager. If this is the case a statement outlining the rationale for over-riding parental consent must be included in the referral form for the MASH manager to consider. The statement should be in the form:

'I have considered the information I hold and I believe the child (ren) may be at risk of significant harm (Insert your reasons why you believe the child(ren) are at risk) I have read the Professional Guidelines for referral to MASH and the information sharing document and believe my concerns are enough to over ride the "No Consent".'

3.8 If there is a disagreement between Solace and the MASH manager about a case, the MASH conflict resolution protocol should be followed (Appendix 2).

4. Child Protection Conferences

4.1 If it is felt that a child is at risk of significant harm then, following an investigation, a Child Protection Conference may be arranged. At the conference information will be shared by all professionals involved and a decision will be taken as to whether the child needs to go on a protection plan. If this happens then the case will be allocated to a social worker from the Safeguarding and Family Support Team who will work longer-term with the family.

4.2 Although SASS generally provides an advocacy service for a period of around 12 weeks, if they are aware that the case will be going to CP conference then the case will be kept open beyond this period. This will enable the SASS worker to attend the conference if possible and provide valuable information regarding the service-user.

4.3 SASS workers will make every attempt to be at the conference and provide information that will inform the assessment of risk to children.

4.4 Social workers will make every attempt to give SASS workers as much notice as possible for CP conferences, to enable the SASS worker to prepare for the meeting; or for SASS to arrange attendance if the allocated worker is unavailable.

Conferences where the perpetrator is present

4.5 Prior to every child protection conference where there is domestic abuse there needs to be a discussion as to whether the alleged perpetrator should attend the conference and how the conference should be organised. This discussion should be led by the chair of the conference and include the allocated social worker and the allocated SASS worker. Where domestic abuse is a feature in a family it may be that the presence of the violent partner may intimidate or threaten a parent or indeed other members of the conference. The Child protection chair must make a decision prior to the conference as to whether:

- a) A violent partner should be excluded or
- b) The conference could be held in two parts to ensure that two parents do not have direct contact with each other.

4.6 SASS staff will attend child protection conferences, including those also being attended by the alleged perpetrator. Where the SASS worker has concerns about potential risks to her, she will discuss these with the social worker who is working with the family, or the Chair of the child protection conference prior to the meeting. They will agree on an arrangement to enable the SASS worker's safe attendance and participation in the CP conference.

Such arrangements will include, but are not limited to:

- a) Avoiding the use of the SASS worker's name in the CP conference, but using the service's name, SASS or Solace; this should also be the case for the minutes of the meeting and other documents connected to the CP conference that may be seen by the alleged perpetrator
- b) Where the service's address is to be recorded, to use the PO Box address instead of the actual SASS office address.
- c) The SASS worker will implement Solace Women's Aid risk assessment policy.
- d) If the risk from the alleged perpetrator's attendance at the CP conference is assessed as being high, then the SASS worker will make arrangements to meet with the chair separately, prior to the conference. The SASS worker will present information to the chair of SASS's involvement with the service-user, including professional judgements about the client's engagement with SASS and their level of awareness of their domestic abuse situation and the impact on their children. A report will also be provided by SASS which will be shared at the conference
- e) The client's safety will always be considered before, during and after the meeting.

4.8 Before making the decision to attend child protection conferences SASS must consider the following:

- Their ability to fulfill the role required
- Their project's capacity to provide personnel to the child protection conference
- The consequent disclosure to the perpetrator of their involvement
- Whether it is in the interests of their client for the engagement with SASS to be known.

4.10 If the SASS worker is unable to attend the conference, then a detailed analysis of the work done (within the remits of any confidentiality agreements) with the service-user will be provided. This analysis, along with the

professional judgment of the SASS worker will help the social worker assess the risk posed to the child and provide valuable insight into the case.

4.11 Whether in attendance or not, a detailed report should always be provided by SASS to be heard at the CP conference. The report should include:

- Details of work done
- Victim's response
- Rate of engagement
- Future risk considerations
- Any evidence that the service-user has an understanding of the impact of the DA on the child
- Recommendations for future work

'Voting' or 'scaling' at conferences

4.12 SafeLives are clear that they expect the IDVAs to vote at a child protection meeting if they are attending as a professional with information relating to the children. The exception to this would be where they are attending to support their client only. This would only be appropriate if they have no information relating to the safety of the children. As a Leading Lights accredited service, SASS' staff are expected to vote if they have information relating to the children.

5. Efficient practices to aid joint-working

5.1 If a case is to be closed by either SASS or Children's Social Care the allocated worker should contact the other via e-mail to inform them of the decision and the reasons behind this and discuss appropriate follow-on support for the service user, if required.

5.2 If the child's social worker has any issue with the SASS service, in the first instance they should contact the SASS manager (contact details in appendix 6). If further action is required they should contact the LBS contract manager (appendix 6).

5.3 If SASS would like to raise a concern regarding a particular social worker then the SASS manager should call the reception at Sumner House (appendix 6) to find out who the line manager of the social worker is so that the query can be taken forward.

5.4 If a case is not considered to meet the threshold for Children's Social care intervention and SASS disagree with this decision then the SASS manager will contact the MASH manager and refer to the conflict resolution protocol in Appendix 2.

5.5 It is the responsibility of the Child Protection chair and the Quality Assurance team to make sure that the SASS worker is invited to and has the details of any CP conferences. CP Chairs should also be made aware when SASS staff cannot attend a conference because the perpetrator will be present. The Chair will then arrange to meet with the SASS worker prior to the conference. It should be noted that due to tight statutory timescales, there is often limited

notice provided of a CP conference taking place. When there is limited time for the SASS/CP Chair meeting to take place prior to the conference, SASS will submit a report.

5.6 For an initial CP conference, the allocated SASS worker will be invited at least 5 days before the meeting. The SASS worker will respond to the child protection administrator within 2 days and reports should be submitted by the day before the conference.

5.7 The allocated SASS worker should normally have the dates of review conferences as these are set in the initial or previous review. If this is not the case they should be given at least 2 weeks notice and are expected to submit reports by the day before the conference.

There is an expectation that reports submitted will have been discussed in advance with the parent or carer.

Joint home visits

5.6 SASS workers are able to conduct joint home visits with social workers as long as the perpetrator is not going to be at the address. SASS workers will be involved in any assessment of risk posed by each home visit.

Appendix 1

GLOSSARY

SASS – Southwark Advocacy & Support Service

SDVPP – Solace Domestic Abuse Perpetrator Programme

CAADA – Coordinated action against domestic abuse

DASH – Domestic Abuse, Stalking & Honour- based violence

RIC – Risk Identification Checklist

MARAC – Multi-Agency Risk Assessment Conference

MASH – Multi-Agency Safeguarding Hub

CAF – Common Assessment Framework

CP – Child Protection

R & A – Referral & Assessment

CS – Children’s Services

Multi-Agency Safeguarding Hub (MASH)

Conflict Resolution

Protocol for resolution of professional disagreement between agencies in the Southwark Multi-Agency Safeguarding Hub (MASH)

The key principles for the resolution of conflict:

- Not to obscure the focus on the child, and thereby place that individual child at likely risk of harm;
- Resolve the difficulties promptly and openly;
- Make every effort to resolve the difficulty within the MASH team and at the level at which it occurred
- Identify any lack of clarity or omissions in multi agency policies, procedures and/or protocols, and, where relevant, seek a resolution through the development or amendment of them

When in the normal course of risk assessment and decision making in MASH any agency has a concern about a decision/practice/threshold of another agency then the following process is to be followed

The conflict resolution process:

Each stage should be taken progressively, and if issue remains unresolved you should move to next stage

- **First stage**– Meeting between the agency with the issue and the MASH team manager to resolve their differences by clarifying the nature of the disagreement in order to reach a common understanding, reviewing their respective standpoints and working towards a mutually acceptable solution, which safeguards and promotes the welfare of the child.
- **Second stage**– If a resolution isn't agreed at stage one the agency with the concern is to initiate a resolution meeting with all relevant partner agencies

At stage 1 and 2 the actions to resolve the issue should be conducted within 24 hours of the issue being raised. All issues should be logged, retained and updated by the MASH Team manager within the supervision record.

- **Third stage** – The MASH manager to invite the Quality Assurance Unit Duty CP Co-ordinator to a resolution meeting as an independent mediator. This should be held within 48hours from the point of which the request for a meeting is requested.
- **Fourth stage** – The MASH Manager to notify the concern to Head of Assessment

and Intervention Service and the relevant agency line manager.

If the concern remains thereafter, the Head of Assessment and Intervention will escalate to the Director of Children's Social Care

There will be fortnightly Management meetings within the MASH that will provide a forum for discussion of issues arising as part of the ongoing development of MASH and will identify further training and development needs

All professionals working within the MASH team are encouraged to seek clarity and professional direction from their agency lead as required. This process does not preclude this.

Solace Advocacy & Support Service (SASS) Southwark



Tel: 0207 593 1290

Email: southwark@solacewomensaid.org



Practical Support and Advocacy

Support for Children

Emotional Support and Recovery

Perpetrator Services

Awareness Raising

Staffing breakdown:

- 3 Full time IDVAs supporting high risk female and male survivors of domestic abuse
- 1 Full time ISVA supporting all risk levels female and male survivors of sexual violence/abuse
- 3 full time Caseworkers supporting medium & standard risk female and male survivors

Advocacy

Provision of emotional and practical support to meet the individual needs of our service users. Includes risk & needs assessments, support and safety planning, exploring options, tenancy retention, signposting, income maximisation, liaising with a wide range of agencies, refuge accommodation searches, support into education, employment or training, etc.

The advocacy service provides support for up to 12 weeks, after which clients are referred on to ongoing services such as counselling and group programmes.

The service operates a waiting list and while waiting to be allocated a worker, clients can access weekly support (see Women's Voices group below).

The service does not operate a waiting list for high risk clients.

The service provides support out of hours between 6pm to 9am weekdays and throughout weekends and public holidays.

Co-location:

Walworth Police Station: Mondays and Tuesdays every week.

MASH three days per week: Mondays, Wednesdays & Fridays every week.

Housing Solutions: Wednesdays every week

Support for Male Victims

- The advocacy team supports male victims of domestic abuse and male survivors are able to access counselling. At present, groups are not available for men, though this may change in the future.
- Male clients are referred to other specialist services for supplementary support.

Legal Services

- Qualified solicitors providing advice and representation on non-molestation orders, residency orders, occupation orders, child contact, etc.
- Legal staff will assess each client's eligibility for legal aid and advise accordingly. Those not eligible for Legal Aid will be signposted appropriately.

Sanctuary Service

- Support for those affected by domestic abuse, who wish to remain safely in their home.

- Security measures for victims of hate crimes, to enable them to remain in their homes safer.
- Increased security in the home through a range of measures including, secure rooms, increased fire resistance to doors, strengthened door frames, locks and windows, dedicated mobile phones linked directly to the police, etc.
- Comprehensive risk assessment carried out with service user to determine whether it is safe for them to remain in their home with the additional security measures, before any work is carried out.

Children's Therapeutic Support

- 12-week 1-1 play and arts based therapeutic intervention to children and young people
- Post domestic abuse and once the perpetrator is no longer in the home.
- Aims to raise parents/carers' awareness of the effects of domestic abuse on children.
- Provides a safe place to express feelings and build resilience.
- Mothers will attend the first assessment session, a middle session and an end session with their child.
- Each mother will also be encouraged to join a small therapeutic group running for the time length of the child's 1-1 work. This will meet every two weeks to help her understand and support her child in the difficulties they are dealing with.

Counselling (1:1 and groups)

- Long term support through weekly sessions to help women recover from their experiences of domestic and sexual abuse/violence.
- 16 Individual counselling sessions that provide a space for women to explore the issues arising from their experiences of violence and abuse.
- Intensive support to lift women out of depression or reduce their levels of anxiety, so that they are able to re-engage in healthy relationships with new partners, return to work or re-establish relationships with members of their families.
- Solace run a programme of workshops and meetings facilitated by a counsellor where women discuss topics of interest to them in a supportive group environment. These groups run pan-London and clients can access whichever groups they can travel to. These include confidence-building, emotional health, expressing anger, anxiety and depression and other subjects chosen by the women in the group.

- Run in conjunction with the ASCENT pan-London consortium

WRAP (Women's Resilience and Awareness Project)

- WRAP (Women's Resilience and Awareness Programme) is a group work programme, with the aim of increasing resilience and awareness around domestic abuse. Clients can choose from a variety of services, including structured longer courses and other drop-in workshops.

Drop-in Groups:

- **Women's voices:** a weekly drop-in group every Tuesday (10.30am-12.30pm), run by other survivors which is a chance to meet other women who have experienced domestic abuse as well as talk about different issues. Clients can access this group straight away, even if they are on the waiting list.

Courses/workshops:

- **ARISE:** an 8 week domestic abuse awareness course designed to increase knowledge and confidence around domestic abuse and empower women to keep themselves safe.
- **Picking up the Pieces Programme:** a three-workshop session course supporting mothers to effectively safeguard their children and understand the role of Children's Social Care.
- **ABC (Assertiveness, Boundaries and Confidence) Programme:** a six-week course with a focus on building resilience. For women who have left the abusive relationship.
- **Pampering sessions:** monthly pampering sessions– choose from a manicure or a free makeover.

In addition:

- We also train clients to help us deliver training to professionals, and if a client has completed ARISE there is an opportunity to be trained in co-facilitation so that they can assist us in delivering the group awareness sessions.
- We run one-off workshops for service users on a variety of issues including Claire's Law (DVDS), International Women's Day celebrations and creative writing.
- Coming up later in the year we will be recruiting peer befrienders who will be 1-1 befrienders for women who have experienced domestic abuse.

SDVPP (Solace Domestic Violence Perpetrator Programme)

- Solace provides an in-house 26-week perpetrator programme, intervention delivered by a highly skilled and experienced practitioner.
- Sessions are aimed at perpetrators who wish to address their abusive behaviour.

Training and Development

- A half day domestic abuse awareness course open to staff and volunteers across Southwark
- A 3-day Domestic Abuse Champions Programme primarily available to all professionals within Southwark
- A 2-Day Domestic Abuse Community Champions Programme available to people living or working within Southwark. This is currently targeting local faith groups.
- IRIS (Identification and Referral to Improve Safety) is a general practice-based domestic violence and abuse (DVA) training support and referral programme for healthcare providers. Core areas of the programme are training and education, clinical enquiry, care pathways and an enhanced referral pathway to specialist domestic violence services. IRIS also provides information and signposting for male victims and for perpetrators. The IRIS Advocate Educator will deliver the IRIS training programme to GP surgeries across Southwark and carry a small caseload of referrals specifically from GP surgeries.

Appendix 4: Referral Process when referring to Solace Women's Aid

- We accept self referrals either by phone on 0207 593 1290 or email (southwark@solacewomensaid.org).
- We also accept referrals on behalf of clients from professionals and practitioners but they must obtain consent of the client first. Please use Solace referral form.
- Please complete the referral form fully.



Referral Form – Solace Advocacy & Support Service (SASS) Southwark

Please password protect this document and call SASS with the password (tel. 020 593 1290)

Email completed form to: southwark@solacewomensaid.org

Date of referral:

Please indicate which service you would like to refer to (Tick ALL services required by the client)			
Advocacy & Support	<input type="checkbox"/>	ARISE (DVA Awareness Programme)	<input type="checkbox"/>
Advocacy & Support for Male Victims	<input type="checkbox"/>	Peer Support Group (Women's Voices)	<input type="checkbox"/>
Legal Services (Family Law only)	<input type="checkbox"/>	SDVPP (Solace DV Perpetrator Programme)	<input type="checkbox"/>
Sanctuary Scheme	<input type="checkbox"/>	WRAP (Women's Resilience & Awareness Project)	<input type="checkbox"/>
Counselling	<input type="checkbox"/>	Children's Therapeutic Service	<input type="checkbox"/>

Please enter your name and contact details	
Referrer's name	<input type="text"/>
Agency (inc. department/team)	<input type="text"/>
Contact number	<input type="text"/>
Contact email address	<input type="text"/>

Which type of agency are you referring from?			
Another DV Service	<input type="checkbox"/>	School/nursery/children's centre	<input type="checkbox"/>
Southwark Council (not children's social care)	<input type="checkbox"/>	Housing Association	<input type="checkbox"/>
Children's Social Care (CSC)	<input type="checkbox"/>	Substance misuse service	<input type="checkbox"/>
Adult Social Care	<input type="checkbox"/>	Mental Health Service	<input type="checkbox"/>
Police	<input type="checkbox"/>	GP Practice	<input type="checkbox"/>
Merlin	<input type="checkbox"/>	Health (non GP)	<input type="checkbox"/>
Probation	<input type="checkbox"/>	Advice service (non-Council)	<input type="checkbox"/>
MARAC	<input type="checkbox"/>	Victim Support	<input type="checkbox"/>
		Religious Organisation	<input type="checkbox"/>
		Other voluntary/community group.	<input type="checkbox"/>
		Please specify:	<input type="text"/>
		Any other organisation	<input type="checkbox"/>
		Please specify:	<input type="text"/>

How did you find out about our service?			
SWA website	<input type="checkbox"/>	School/college	<input type="checkbox"/>
Southwark Council website	<input type="checkbox"/>	Housing provider/officer	<input type="checkbox"/>
Flyer/poster	<input type="checkbox"/>	Millwall webpage	<input type="checkbox"/>
Police	<input type="checkbox"/>	Word of mouth	<input type="checkbox"/>
Social worker	<input type="checkbox"/>	NDVH (National DV Helpline)	<input type="checkbox"/>
		TV/Radio	<input type="checkbox"/>
		Used service previously	<input type="checkbox"/>
		MARAC	<input type="checkbox"/>
		Other, please specify:	<input type="text"/>

Client Details		
First name	<input type="text"/>	
Last name/surname	<input type="text"/>	
Other/previous names	<input type="text"/>	
Date of Birth	<input type="text"/>	
Ethnicity	<input type="text"/>	
Nationality	<input type="text"/>	
Gender	Female / Male/Transgender	
Is the client's gender different to the gender they were born with?	Yes / No / Don't Know	
Client's sexual orientation	Bisexual	
	Gay woman / Lesbian	
	Gay man	
	Heterosexual / Straight	
	Other	
	Prefer not to say / unknown	
Contact Method	Details	Safe to use?
Telephone	<input type="text"/>	Call - Yes / No

		Text - Yes / No Voicemail - Yes / No
Email address		Yes / No
Address		Yes / No
Borough where client is currently resident		
Is the client living with the perpetrator?		

Additional client details				
Is the client currently in refuge accommodation				
Which type of client are you referring?	Victim / Perpetrator			
Is the client a victim/witness in a criminal case?				
Has the client consented to referral being made?				
If client is under 18, has parent/carer consent been obtained?				
Is the client currently in refuge accommodation?				
Has the client used our service before?	Yes / No / Not sure			
Is the client currently pregnant?	Yes / No / Not sure If yes, what is the due date?			
Primary/first language				
Other languages spoken				
Does the client have a faith or religion?				
No religion /Agnostic /Atheist		Jewish		
Catholic		Muslim		
Christian (all non-Catholic Christian denomination)		Sikh		
Buddhist		Other		
Hindu		Prefer not to say / Unknown		
Jehovah's Witness				
What is the client's current relationship status?				
Civil Partnership		In a relationship (not cohabiting)		
Married		Widowed		
Divorced		Single		
Separated		Prefer not to say / Unknown		
Co-habiting but not married				
Please tell us more about any support needs the client may have:				
	YES	NO	Not Sure	Details
Any disability?				
Recourse to public funds?				
Support needs around alcohol use?				
Support needs around the use of drugs?				
Support needs around mental health?				
BSL/Interpreter required?				Please state which language:
Does the clients have any accessibility requirements?				
Does the client have a history of violence towards others?				
Any other useful/important information about the client's support needs, including any known risks associated with working with this client?				

Please provide children's details				
Name	DOB & Age	Ethnicity	Relationship to client	With whom do children reside?

Disabilities (please specify)				
Known to Children's Social Care? (please specify)				

Please provide alleged perpetrator details				
Name	DOB & Age	Gender	Ethnicity	Relationship to client
Address if different to client's (state area/borough as a minimum)				
Previously lived with client?				
Length of relationship with client?				

Reason for referral; please state the reason that you're making this referral:
Basic history:
Most recent incident:
What are the client's priorities in terms of the support required?:

Types of abuse experienced by client; (please tick all that apply)			
CPV (Child to Parent)		Harassment / Stalking	
Coercive control / controlling behaviour		HBV (Honour-Based Violence)	
Emotional/psychological abuse		Physical Abuse	
FGM (Female Genital Mutilation)		Sexual Violence/Abuse	
Financial Abuse		Trafficking	
Forced Marriage		Safety at Home	
Gang Violence		Verbal	
Other type of abuse (please specify)		Sexual Exploitation	

Please provide details of client's next of kin/someone who can be contacted in case of emergency			
Name	Relationship	Phone No. /Address	Safe to contact?

OFFICE USE ONLY ; Referral Outcome	
Referral accepted?	Yes / No If yes, state to whom allocated:
If not accepted, please state reason from the list below	
Unable to contact client	
Client declined support	
No space/capacity to support	
Ineligible for support (age)	
Ineligible for support (borough)	
Ineligible for support (service description)	
Unable to meet support needs around language	
Unable to meet support needs around large family	
Unable to meet support needs around disability	
Unable to meet support needs around NRPF	

Unable to meet support needs around drug and alcohol	
Previous convictions for violent/sexual offences/arson	
Other (please specify)	
Client referred onwards to:	
Refuge	
Another specialist VAWG service	
NDVH	
Non-VAWG organisation/service	
Other (specify)	

Supplementary Child Risk Assessment				
Please complete this section of the form in all cases where domestic abuse has been disclosed and where there are children in the household	Yes (Y)	No (N)	Don't Know (DK)	Source of info if not the victim eg. police officer
1. Has the child/children directly intervened in any incidents of domestic abuse and/or been physically injured in the course of any incidents of domestic abuse?				
Comments:				
2. Has (...) made any threats or attempts to abduct the children?				
Comments:				
3. Are there any emerging concerns about the impact the abuse is having on the children? (consider factors such as poor school attendance, bed wetting, signs of significant distress)				
Comments:				
4. Are there any additional factors related to the child/ children that would increase their level of vulnerability to the abuse? (e.g. child/ children has a disability, child/ children are not the perpetrators')				
Comments:				
5. Is any member of the household at risk of forced marriage or honour based violence?				
Comments:				
6. Professionals – Do you have any concern as a professional about minimisation of the abuse by parent(s) and/or lack of parental engagement with support services?				
Comments:				

SAFELIFES-DASH Risk Identification Checklist for use by IDVAs and other non-police agencies¹ for MARAC case identification when domestic abuse, 'honour'- based violence and/or stalking are disclosed

<p>Please explain that the purpose of asking these questions is for the safety and protection of the individual concerned. Tick the box if the factor is present <input checked="" type="checkbox"/>. Please use the comment box at the end of the form to expand on any answer. It is assumed that your main source of information is the victim. If this is <u>not the case</u> please indicate in the right hand column</p>	Yes (tick)	No	Don't Know	State source of info if not the victim e.g. police officer
1. Has the current incident resulted in injury? (Please state what and whether this is the first injury.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are you very frightened? Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. What are you afraid of? Is it further injury or violence? (Please give an indication of what you think (name of abuser(s)...) might do and to whom, including children). Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Do you feel isolated from family/friends i.e. does (name of abuser(s)) try to stop you from seeing friends/family/doctor or others? Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are you feeling depressed or having suicidal thoughts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Have you separated or tried to separate from (name of abuser(s)....) within the past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is there conflict over child contact?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Does (.....) constantly text, call, contact, follow, stalk or harass you? (Please expand to identify what and whether you believe that this is done deliberately to intimidate you? Consider the context and behaviour of what is being done.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Are you pregnant or have you recently had a baby (within the last 18 months)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Is the abuse happening more often?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Is the abuse getting worse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Does (.....) try to control everything you do and/or are they excessively jealous? (In terms of relationships, who you see, being 'policed at home', telling you what to wear for example. Consider 'honour'-based violence and specify behaviour.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

¹ Note: This checklist is consistent with the ACPO endorsed risk assessment model DASH 2009 for the police service.

Tick box if factor is present. Please use the comment box at the end of the form to expand on any answer.	Yes (tick)	No	Don't Know	State source of info if not the victim
13. Has (.....) ever used weapons or objects to hurt you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Has (.....) ever threatened to kill you or someone else and you believed them? (If yes, tick who.) You <input type="checkbox"/> Children <input type="checkbox"/> Other (please specify) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Has (.....) ever attempted to strangle/choke/suffocate/drown you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Does (.....) do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else? (If someone else, specify who.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Is there any other person who has threatened you or who you are afraid of? (If yes, please specify whom and why. Consider extended family if HBV.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Do you know if (.....) has hurt anyone else? (Please specify whom including the children, siblings or elderly relatives. Consider HBV.) Children <input type="checkbox"/> Another family member <input type="checkbox"/> Someone from a previous relationship <input type="checkbox"/> Other (please specify) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Has (.....) ever mistreated an animal or the family pet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Are there any financial issues? For example, are you dependent on (.....) for money/have they recently lost their job/other financial issues?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Has (.....) had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life? (If yes, please specify which and give relevant details if known.) Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> Mental Health <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Has (.....) ever threatened or attempted suicide?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Has (.....) ever broken bail/an injunction and/or formal agreement for when they can see you and/or the children? (You may wish to consider this in relation to an ex-partner of the perpetrator if relevant.) Bail conditions <input type="checkbox"/> Non Molestation/Occupation Order <input type="checkbox"/> Child Contact arrangements <input type="checkbox"/> Forced Marriage Protection Order <input type="checkbox"/> Other <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Do you know if (.....) has ever been in trouble with the police or has a criminal history? (If yes, please specify.) DV <input type="checkbox"/> Sexual violence <input type="checkbox"/> Other violence <input type="checkbox"/> Other <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total 'yes' responses				

For consideration by professional: Is there any other relevant information (from victim or professional) which may increase risk levels? Consider victim's situation in relation to disability, substance misuse, mental health issues, cultural/language barriers, 'honour'- based systems, geographic isolation and minimisation. Are they willing to engage with your service? Describe:

Consider abuser's occupation/interests - could this give them unique access to weapons? Describe:

What are the victim's greatest priorities to address their safety?

Do you believe that there are reasonable grounds for referring this case to MARAC? Yes / No

If yes, have you made a referral? Yes/No

Signed:

Date:

Do you believe that there are risks facing the children in the family? Yes / No

If yes, please confirm if you have made a referral to safeguard the children: Yes / No

Date referral made

Signed:

Date:

Name:

Practitioner's Notes

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Appendix 6

Contacts

- Sharon Ogden – LBS Domestic Abuse Contract Manager
Sharon.Ogdenz@southwark.gov.uk
0207 525 7246 / 07939 041596
- Amy Glover - SASS Service Manager
a.glover@solacewomensaid.org
0207 593 1291 / 07903 950 787
- SASS Duty Line – 0207 593 1290
- Dermot Kelly – MASH Manager
Dermot.kelly@southwark.gov.uk
0207 525 7246 / 07939 041 596
- Sumner House Reception -
- MASH duty line - 0207 525 1921

Early Help Locality Managers

- Surma Shah
Surma.shah@southwark.gov.uk
0207 525 2650
- Hanna Hancock
Johanna.hancock@southwark.gov.uk
0207 525 2650
- Emma Pearl
Emma.pearl@southwark.gov.uk
0207 525 2723
- Sharon Hemley
Sharon.hemley@southwark.gov.uk
- Gill Roberts
Gill.roberts@southwark.gov.uk
0207 525 2692