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Improving Multi-Agency Risk Assessment and Interventions for Victims of Domestic Abuse: Analysis of Consultation Responses



EQUALITY, POVERTY AND SOCIAL SECURITY



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Executive Summary

This summary provides an overview of the analysis of the responses received to the Scottish Government's consultation on improving multi-agency risk assessment and interventions for victims of domestic abuse.

The consultation ran from 30 November 2018 to 2 March 2019, and sought views on how multi-agency risk assessment and working for victims of domestic abuse in Scotland could best be improved. In particular, it aimed to explore how best to ensure a more consistent approach locally and how local arrangements could be strengthened to support the objectives of [Equally Safe](#) – Scotland's strategy to prevent and eradicate violence against women and girls.

The consultation asked 7 questions, which respectively addressed:

1. training on domestic abuse and appropriate risk assessment tools
2. the best model of multi-agency working for ensuring effective and early interventions for victims of domestic abuse
3. the best model for professionals assessing risk in relation to domestic abuse
4. the key partners that should be involved in multi-agency working to support victims of domestic abuse
5. guidance required to support and embed effective multi-agency working for victims of domestic abuse
6. protocols needed to ensure effective information sharing between agencies
7. whether multi-agency arrangements for protecting victims of domestic abuse should be placed on a statutory footing.

The consultation received 69 responses. Of these, 51 were from organisations and 18 came from individuals. Half of the organisations who responded were either specialist domestic abuse organisations or Violence Against Women Partnerships.

There were a number of **overarching themes** which emerged within the responses across questions. These included:

- a need for improved funding and resourcing
- a balance to be struck between implementing national standards, processes and resources to ensure consistency, and allowing enough autonomy at local level for these to be adapted to the local context

- values, approaches or ideologies that should underpin this work, such as:
 - a gender-based understanding of domestic abuse
 - domestic abuse as caused by the perpetrator, not the victim
 - intersectionality
 - victim-centred approach
 - trauma-informed approach
 - risk-based approach
 - centrality of lived experience.

Comments on **training** addressed both what the outcomes of the training should be, and practicalities about its delivery (such as who the training should be for; what the training should look like; how and where it should be delivered; and how often it should take place). Many comments suggested that a key aim of training should be to promote improved understanding of domestic abuse, so that responses would be more informed. Also seen to be important were a shared understanding of a multi-agency working model and commitment to this model; nationally consistent support; and good knowledge and use of relevant tools. Responses were divided on whether the training should be for staff working in public services in general, or more specifically for those directly involved in multi-agency risk assessment and interventions for victims of domestic abuse, and their managers.

Responses addressing the best **model of multi-agency working** for ensuring effective and early interventions for victims of domestic abuse discussed key characteristics and important components that the model should have and examples of named models (including, but not limited to, MARAC and Safe and Together). Support for an overarching national framework and standards emerged again as a strong theme in responses to this question.

In terms of the best **risk assessment model** for professionals, respondents again commented on key characteristics and important components that the model should have and examples of named risk assessment tools and models. The merits of having a national model, the need for some flexibility, and the necessity of allowing for professional judgement were all discussed. The relative benefits and potential drawbacks of the SafeLives Dash Risk Identification Checklist were addressed within many responses.

An extensive number of **key partners** were suggested, including but not limited to healthcare, Police, social work, specialist domestic abuse services, housing, education, and substance abuse and addiction services. Responses proposed core partners that might always participate, but also that partners should be adapted to individual circumstance and local context.

Comments on **guidance** addressed the characteristics that it should have, the format it should take, and in particular, what content they thought it should cover.

Again, support for guidance being national but with some local flexibility was a strong theme. It was thought to be important that the guidance cover expectations and governance, aspects of partnership working, language, and communication, among other things.

Respondents to the consultation advocated for **information sharing protocols** which promote safety, consistency and lawfulness, minimise barriers to data sharing, and promote trust and confidence for victims and between partners. Responses to this question also addressed who responsibility for the protocols should lie with; key characteristics that the protocols should have; key content that the protocols should cover; and the principles that should govern what information is shared.

The final question in this consultation asked whether multi-agency arrangements for protecting victims of domestic abuse should be placed on a **statutory footing**. In total, 46 of the 69 responses were in favour of this (67%), 12 of the 69 responses were against the proposal (17%), and 11 declined to respond either way (16%).

Comments in response to this question outlined a number of reasons for both supporting and opposing the proposal to place these arrangements on a statutory footing, and some respondents also gave reasons for which they felt unable to answer definitively. Finally, there were also comments on which particular aspects of multi-agency arrangements for protecting victims of domestic abuse should be placed on a statutory footing.

Introduction

The Scottish Government published a [consultation paper](#), 'Improving Multi-Agency Risk Assessment and Interventions for Victims of Domestic Abuse: A Scottish Government Consultation', on 30 November 2018. The consultation ran until 2 March 2019.

The purpose of the consultation was to seek views on how multi-agency risk assessment and working for victims of domestic abuse in Scotland could best be improved. In particular, it aimed to explore how best to ensure a more consistent approach locally and how local arrangements could be strengthened to support the objectives of [Equally Safe](#) – Scotland's strategy to prevent and eradicate violence against women and girls.

Through this consultation, Scottish Government wanted to explore the following in relation to multi-agency risk assessment and working for victims of domestic abuse:

- Models of risk assessment
- Information sharing
- Safety planning
- Relevant partners
- Guidance
- Provision in statute for effective arrangements

The consultation elicited substantial insight into the benefits and drawbacks of existing arrangements, proposals for improvements, and arguments for and against placing multi-agency arrangements for protecting victims of domestic abuse on a statutory footing.

This report presents a summary of the consultation responses received. Reflecting the nature of the questions asked, the analysis is qualitative and focuses on setting out the range of points made by respondents.

Background to the consultation

Domestic abuse is a fundamental violation of human rights and no level of domestic abuse is acceptable. Domestic abuse can escalate into stalking, sexual assault and murder and we have a duty to take steps to protect those at the greatest risk of harm.

Multi-Agency Risk Assessment Conferences (MARACs) are regular, local meetings where information about domestic abuse victims at risk of the most serious levels of

harm (including murder) is shared between representatives from a range of local agencies to inform a coordinated action plan to increase the safety of the victim and their children.

The victim does not attend the meeting but is represented by an Independent Domestic Abuse Advocate (IDAA), who supports victims (through risk assessment, safety planning and institutional advocacy) and makes sure their views are heard, that agencies are held to account and that victims are kept informed after the meeting.

At the heart of a MARAC is the working assumption that no single agency or individual can see the complete picture of the life of a victim, but all may have insights that are crucial to their safety. MARAC, with its focus upon working collaboratively to ensure the safety of domestic abuse victims and their children, allows partners involved to share those insights and to develop robust and effective safety plans.

The 4 aims of MARAC are:

1. To safeguard victims (and their children)
2. To make links with other public protection arrangements in relation to children, perpetrators and vulnerable adults
3. To safeguard agency staff
4. To address the behaviour of the perpetrator.

There is no statutory obligation to hold MARACs. There are currently MARACs operating in 26 local authorities in Scotland with the remaining 6 in various stages of development.

The Scottish Government funds SafeLives to support the development of MARACs across Scotland and SafeLives independently collects and reports on Scottish MARAC data. To explore further the potential for developing a collaborative approach that underpins MARAC, in 2016 the Scottish Government provided funding to SafeLives to produce a baseline [report](#) detailing the position of MARAC in Scotland. In that report, SafeLives highlighted common challenges and successes of MARAC delivery across Scotland and made recommendations about what is required to improve practice. The baseline report was presented to key stakeholders at a roundtable in 2017, and generated discussion which demonstrated there is an appetite to gather further Scottish-specific evidence, and consideration of risk assessment models.

The Scottish Government's work on tackling domestic abuse more widely is underpinned by a legislative framework and guided by a number of strategic documents.

Equally Safe is Scotland's strategy to prevent and eradicate violence against women and girls. It was first published in 2014, updated in 2016, and is complemented by a Delivery Plan published in 2017. It was published jointly by Scottish Government and CoSLA, and has been developed in close collaboration with a number of stakeholders, many of whom have drawn on the voices and experiences of women and children impacted by gender based violence.

The strategy sets out a vision of a strong and flourishing Scotland where all individuals are equally safe and respected, and where women and girls live free from all forms of violence and abuse, as well as the attitudes that perpetuate it. It articulates a shared understanding of the causes, risk factors and scale of the problem. It highlights the need to prioritise prevention, and it sets out how we will develop the performance framework which allows us to know whether we are realising our ambitions. We are committed to working collaboratively with partners and achieve change by making best use of available resources and with a clear governance framework underpinning delivery. A Joint Strategic Board has been established to oversee progress and identify emerging issues, and a Joint Delivery Group has been established to drive progress and embed collaborative working nationally.

The United Nations' own definition of violence against women and girls has guided the development of policy in this area for many years; it recognises that this violence is both cause and consequence of gender inequality. Our definition, drawn from the UN definition, states that:

'Gender based violence is a function of gender inequality, and an abuse of male power and privilege. It takes the form of actions that result in physical, sexual and psychological harm or suffering to women and children, or affront to their human dignity, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. It is men who predominantly carry out such violence, and women who are predominantly the victims of such violence. By referring to violence as 'gender based' this definition highlights the need to understand violence within the context of women's and girls' subordinate status in society. Such violence cannot be understood, therefore, in isolation from the norms, social structure and gender roles within the community, which greatly influence women's vulnerability to violence.'

When we talk about violence against women and girls, we refer to a continuum of violence which includes domestic abuse, rape and sexual assault, sexual harassment, commercial sexual exploitation (such as prostitution), and so called 'honour based' violence (such as Female Genital Mutilation and Forced Marriage).

The [Equally Safe Delivery Plan](#) sets out 118 actions over 2017-2021 to help to make the vision of Equally Safe a reality. These actions are set out under the four strategic priorities of Equally Safe.

The work to improve multi-agency risk assessment and working for victims of domestic abuse sits within priorities 3 and 4:

PRIORITY 3: Interventions are early and effective, preventing violence and maximising the safety and wellbeing of women, children and young people

Objectives

- » Justice responses are robust, swift, consistent and coordinated
- » Women, children and young people access relevant, effective and integrated services
- » Service providers competently identify violence against women and girls, and respond effectively to women, children and young people affected

PRIORITY 4: Men desist from all forms of violence against women and girls and perpetrators of such violence receive a robust and effective response

Objectives

- » Justice responses are robust, swift, consistent and coordinated
- » Men who carry out violence against women and girls are identified early and held to account by the criminal and civil justice system.
- » Relevant links are made between the experience of women, children and young people in the criminal and civil system

Helping services improve their knowledge of the signs of domestic abuse and of how to work together collaboratively will increase the early identification of victims and their safety. Greater awareness of good practice across services will also improve their collaboration and consistency of support offered to victims as well as holding perpetrators accountable for their actions.

Action 3.11 of the Delivery Plan relates directly to this consultation:

3.11 Consult on how to embed consistent and effective operation of multi-agency structures to support high risk victims of domestic abuse, including consideration of national guidance and the creation of a statutory underpinning

Notes on language

This consultation asked about multi-agency risk assessment and working for victims of domestic abuse. **MARACs** are one particular model of this type of arrangement. Many respondents referred specifically to MARACs within their responses, and there was a sense that for many respondents, MARACs are synonymous with multi-agency risk assessment and interventions for victims of domestic abuse. However, in line with the questions that were asked in this consultation, this report generally discusses ‘multi-agency working’ or ‘multi-agency response’ in these more general terms.

We understand that the term ‘**survivors**’ is often preferred for those who have experienced domestic abuse, and many respondents used this term in their responses. Many other respondents used the term ‘**victims**’, and this is the term we use here in line with the consultation paper and in order to illustrate the individual’s continued risk of harm from domestic abuse.

The terms ‘**practitioner**’, ‘**service provider**’ and ‘**frontline staff**’ are used interchangeably to refer to individuals working for either public or third sector organisations who interact directly with members of the public in the course of delivering services.

Respondents variously used the terms minority ethnic, ethnic minority, BME and BAME. For consistency, the term **minority ethnic** is used throughout this report.

Many responses to the consultation used **acronyms** without stating what these stood for. In these cases, the meaning of these acronyms had to be assumed. Many of these are commonly used and so we can be confident that their meaning has been understood as the respondent intended; in a few cases the meaning was slightly more ambiguous, but we have made best efforts to interpret the meaning correctly. Those that have been used within this report itself are listed in [Annex A](#).

Profile of Respondents

There were 69 responses to the consultation. 57 of these (83%) were submitted through the Scottish Government’s Citizen Space consultation page, and 12 were submitted by email.

Three-quarters of responses (51) were received from organisations; the remaining quarter (18 responses) were submitted by individuals. Half of the organisations who responded (26) were either specialist domestic abuse organisations or Violence Against Women Partnerships.¹

¹ Violence Against Women Partnerships (VAW Partnerships) are the multi-agency mechanism to deliver on *Equally Safe: Scotland’s strategy for preventing and eradicating violence against women and girls* at a local strategic level.

All of the organisations who responded and who were content for their names to be published are listed in [Annex B](#).

Of the 69 total respondents, 64 gave permission for their response to be published. These can be viewed on the [Consultation Hub website](#).

Overarching Themes

There were a number of common points and themes which emerged within the responses to many or all of the questions asked. These are set out below. In some cases, they are also further elaborated on in the analysis of responses to individual questions, where there is a specific aspect of the theme or point which is of particular relevance to that question.

1. Funding and resourcing

A number of responses highlighted a need for increased and/or more secure funding and resourcing for multi-agency risk assessments and working for victims of domestic abuse, as well as for the organisations that participate in it.

‘Funding and capacity seem to be the two main barriers to the successful running of MARACs and this needs to be addressed.’

– Scottish Borders Council

Responses noted that:

- resources are currently stretched
- there are concerns that increased work on multi-agency risk assessments and interventions could lead to less resources being available for other areas of organisations’ work
- secure funding can enable longer-term planning and job security
- financial resources should be available to directly support victims’ individual needs, such as housing
- Scottish Government should set out how this work is to be resourced
- adequate resources are especially important to ensure that a consistent standard is met across Scotland in multi-agency risk assessment and interventions for victims of domestic abuse
- a number of responses mentioned SafeLives’ cost-benefit analysis which suggested that resourcing multi-agency risk assessment and interventions for victims of domestic abuse would lead to public savings in the long term.

Some responses suggested that funding should be provided at national level.

Specific areas of this work noted as requiring funding included:

- data collection and analysis
- evaluation
- independent advocacy roles (highlighted as a priority)
- co-ordinator and administrator roles
- the Caledonian System

There was also a particular focus on the need for **training** to be funded and well-resourced. This was seen as important to ensure that it is available for everyone who it is decided should undertake it (see [Question 1: Training](#)). Resources were presented as important to ensure that training is practically available and accessible – for example, that it can be delivered in all regions of Scotland. Some responses proposed that training should be subsidised or funded centrally.

‘Previously IDAA training was funded centrally and this made it more accessible for statutory and voluntary organisations that are currently facing funding challenges.’

– Dumfries and Galloway Public Protection Committee

2. National-local balance

Several responses mentioned that there is a balance to be struck between implementing national standards, processes and resources to ensure consistency, and allowing enough autonomy at local level for these to be adapted to the local context. It was also noted that in many cases, standards, processes and resources have already been developed independently at local level in the absence of a national approach, and that this work should not be discarded.

Most of those who made this point suggested that producing national standards, processes and resources with the expectation that these would then be adapted to the local context would be the best way forward.

3. Supporting theory and values

Finally, many responses referenced values, approaches or ideologies that they felt should underpin multi-agency risk assessment and interventions for victims of domestic abuse. These are set out below.

Gender-based understanding of domestic abuse

Many responses stated that multi-agency risk assessment and interventions for victims of domestic abuse should be grounded in a gender-based understanding of

domestic abuse which sees it as a function of gender inequality. Some also supported making an understanding of the gendered nature and dynamics of domestic abuse a key aim of training, and underlined that this competence is also essential for effective risk assessment and interventions. One response suggested that domestic abuse perpetrated by family members other than intimate partners should also be within the scope of this work.

On the other hand, another response argued that a gender-based understanding of domestic violence is transphobic and anti-male, interpreting it as a denial of violence experienced by men or perpetrated by women, as well as a dismissal of individual responsibility for carrying out abuse.

Equally Safe definition of domestic abuse

A gender-based understanding of domestic abuse is central to the national Equally Safe strategy. Some responses explicitly recommended that this multi-agency working should be rooted in the Equally Safe strategy.

Domestic abuse as caused by the perpetrator, not the victim

Some responses highlighted that it was important for those involved in this multi-agency working around domestic abuse to understand that abuse is caused by the perpetrator, not the victim, and that it is the perpetrator who poses the risk. They also noted that victims should never be blamed for the abuse. One anonymous response argued that in light of this, 'solutions should focus on changes in perpetrators' behaviours rather than expecting victims to make all the changes'.

Intersectionality

Numerous responses mentioned that it is important to embed intersectionality within this work. Those with one or more of the following characteristics were specifically mentioned as being among those whose needs it is important to understand and meet:

- minority ethnicity
- disability, including those with learning difficulties
- LGBTI
- migrant status
- male
- children and young people
- class
- religion

Responses noted that those with these characteristics may have distinct experiences, such as 'honour based' abuse, specific barriers to disclosing and immigration status.

‘frontline staff across all public services and agencies that are involved in risk assessment and interventions for victims of domestic abuse would benefit from specific information on LGBT people’s experiences of domestic abuse, including barriers to reporting for LGBT survivors and how to deliver LGBT-inclusive support.’

– Stonewall Scotland

Victim-centred

The need to ensure that multi-agency risk assessment and response to domestic abuse is centred on, and led by, the needs of the victims that it aims to support, was another theme that emerged across responses. Some responses described a ‘holistic’, ‘empowering’ ‘dignified’ and ‘individually tailored’ approach, and noted that it should be based on victims being appropriately informed, and their voices heard, throughout the process. One response particularly emphasised a need for this work to take full account of family relationships and avoid responding to different family members in isolation.

Some responses framed this ‘person centred’ approach as being the alternative to one which is ‘service led’.

Based on risk and need

Similarly to arguing for a person-centred approach, many responses also proposed taking a risk- and needs-based approach to multi-agency risk assessment and response to domestic abuse. The Scottish Commission for Learning Disability also highlighted the importance of balancing risk with rights:

‘Historic exclusion, institutionalisation and a lack of accessible information has led to people with learning disabilities being shielded, overprotected and stopped from leading an adult life ... It is critical that when working with people with learning disabilities who have experienced domestic abuse, that the MARAC process does not serve to enable a ‘prison of protection’. Instead MARACs should exist to support and ensure safety when appropriate.’

– The Scottish Commission for Learning Disability

Informed by lived experience

Just as many responses argued for the importance of a person-centred response to domestic abuse, so too did others suggest that the approach taken in all areas of the work, including training, risk assessment and guidance, should be informed by the lived experience and perspectives of victims (including children). Some also proposed drawing on the experience of frontline service providers. Consultations were suggested as one way to realise this approach.

Trauma-informed

Some responses suggested that this multi-agency work should be trauma-informed. NHS Ayrshire and Arran noted that this is important because those who experience trauma often have poorer outcomes and face more barriers to accessing services. They went on to say:

'In addition, we know that trauma can affect people at any stage in their lives and that particular sections of the population (eg children) are more vulnerable to trauma. Therefore consideration needs to be given to the wider family unit, including children who may not have been physically harmed but have been impacted by domestic abuse. This includes consideration of training for key staff on the need to recognise the impact of this trauma on the development and behavior of children and young people and local pathways to ensure support for children and young people.'

– NHS Ayrshire and Arran

One response suggested linking in to the national [Transforming Psychological Trauma](#) framework, and another to the (then upcoming) [Scottish Psychological Trauma and Adversity Training Plan](#) which offers guidance on developing, commissioning and embedding high quality trauma training.

Outcomes-focused

Some responses advised taking an outcomes-based approach to this work.

Evidence-based

A number of responses also argued for the importance of rooting all work in the available evidence. The need for any risk assessment tools or processes to be evidence-based was particularly emphasised, and respondents felt that guidance should be informed by data.

Involvement of perpetrators or victims in a professional capacity

Some responses highlighted a need to consider what should happen in instances where individuals who are involved in multi-agency working for victims of domestic abuse are themselves perpetrating or experiencing domestic abuse in their private lives. This would need to be considered from both aspects – to ensure that this does not compromise the support being offered to other victims as part of the multi-agency working in which these people are involved, but also to make sure that individuals experiencing domestic abuse in their personal life are able to access the support that they need.

Note: A number of responses provided information about work that their organisations have carried out, or processes that they have developed. Unless this information was explicitly responding to the question at hand, it was not included in the analysis. However, the responses for which permission to publish was given are all publicly available on the **Consultation Hub website**.

Question 1: Training

The first question in this consultation asked:

How can we ensure training on domestic abuse and appropriate risk assessment tools for public bodies, agencies and services staff?

The responses broadly covered two main themes: what the outcomes of the training should be, and practicalities about its delivery. Comments on the practicalities of the training addressed:

- **Who** the training should be for;
- **What** the training should look like;
- **How** training should be delivered;
- **Where** it should be delivered;
- And **how often** it should take place.

1. Outcomes of the training

Better understanding of domestic abuse

Many comments suggested that a key aim of training should be to promote improved understanding of domestic abuse, so that responses would be more informed. Specifically, elements of domestic abuse that responses felt should be better understood include:

- its complexities and dynamics
- how to recognise it
- what the impacts are, not only on the victim but also the rest of the family
- what appropriate responses to domestic abuse might look like.

Comments also suggested that this should encourage a 'culture change' so that domestic abuse is accepted as everyone's concern.

Several responses suggested that it is particularly important for training to improve understanding of, and response to, **coercive control**. Some responses noted that it is important that coercive control is understood as well as physical abuse, and not automatically considered as less serious. Comments highlighted that training on coercive control should cover:

- the nature of coercive control as a pattern of abuse intended to control a partner or ex-partner
- the forms that coercive control can take
- the constricted choices that victims can consequently face
- the risks and harm that victims can face
- the importance of non-judgemental responses from services and professionals.

Shared understanding of a multi-agency working model

The importance of achieving a common understanding of the purpose and processes of the agreed-upon multi-agency working model was highlighted in responses. They suggested that training should promote this, including understanding of the role that different partners should play.

Commitment to this multi-agency working model

Responses also suggested that training should aim to build commitment to the agreed-on working model and its processes at strategic and management level, so that service providers participating in the work are supported by their managers and organisations.

Nationally consistent support

Several responses indicated that support for victims of domestic abuse being consistent across Scotland should be a key outcome of training.

Shared language

Some responses indicated that training should establish a common language around multi-agency response to domestic abuse, in particular for risk assessment.

Knowledge of legislation

Promoting good knowledge of legislation relating to domestic abuse was proposed by some responses as a useful part of training. It was also suggested that the training itself should be grounded in current legislation.

Knowledge of referral pathways

Some responses noted that training should equip service providers with the knowledge of where victims and their children can be referred to for support, and how to do so. It was mentioned that this aspect of training would need to be specific to different local areas.

Understanding and use of risk assessment tools

Covering risk assessment tools in training was proposed in numerous responses. Specifically, it was proposed that this should ensure that service providers:

- understand who should conduct risk assessments
- how to use risk assessment tools effectively
- are confident in using these tools
- can use the tools safely and sensitively.

Effective safety planning

Some responses articulated effective safety planning for victims as a key outcome of training.

Ability to engage with all family members

Some respondents noted that it is important for training to equip service providers to work safely and effectively with other members of a victim's family, including any children and the perpetrator. Responses specifically mentioned the Safe and Together model which could be included in training with the aim of supporting the children of domestic abuse victims.

Competent intersectional response

Responses highlighted the need for training to equip practitioners to effectively support all victims and to take account of their differing needs. The Scottish Commission for Learning Disability suggested that specific resources, such as Talking Mats, should be covered in training to ensure that service providers can effectively support victims with a learning disability.

Workplace policies

One response suggested that training should encourage workplaces to adopt policies to support employees who experience or perpetrate domestic abuse.

Support for professionals

Responses suggested that training should promote understanding of the impact that this work can have on those supporting victims, and understanding of how they themselves can be supported.

Understanding data protection

Several responses suggested that training should aim to ensure that practitioners have good knowledge of regulations and protocols around personal data, and be confident in appropriate and effective data handling and sharing.

2. Practicalities of training

As noted above, comments on the practicalities of delivering training fell into 5 main themes. These are addressed in turn below.

Who the training should be for

Staff working in all public services

A desire for the training to be aimed at staff in all public services came across strongly in the responses. This was linked to the argument that domestic abuse should be seen as everyone's concern, that early intervention should be prioritised, and that it is therefore important that anyone who may come into contact with those experiencing domestic abuse in the course of their work should be able to recognise the signs and respond appropriately (facilitated, for example, by training on routine enquiry).

Thoughts on exactly which organisations should be included in this group varied, but generally indicated any 'relevant' public and third sector agencies and services. Those mentioned specifically include housing, education, healthcare, local authorities, justice, social work and emergency services.

Some respondents suggested that **all** staff within these services should receive training, while others suggested that some staff, or a critical mass of staff be trained. There was an emphasis on training being directed at frontline staff, 'all those who come into contact with vulnerable people' or those who 'come into contact with women at risk', although it was also proposed that staff at all levels of an organisation should be trained.

Those directly involved in multi-agency risk assessment and interventions for victims of domestic abuse, and their managers

Some responses suggested that training should be delivered for those who conduct domestic abuse risk assessments and attend MARACs, including specific training for Independent Domestic Abuse Advocates. It was also proposed that their managers and other relevant decision makers should be included in the training, to promote organisational support for this work and for the staff who are directly involved in it.

Training should be mandatory

Numerous responses argued for training on multi-agency risk assessments and interventions for victims of domestic abuse to be mandatory for the target audience. There were suggestions that this should reflect the way in which training on Child and Adult Protection has been made mandatory. The Scottish Children's Reporter Administration proposed that:

'The Scottish Government could choose to list public bodies who should have a mandatory approach to domestic abuse awareness as well as more specific / tailored training packages and it would then be for those bodies to report on their implementation of the mandatory approach in an agreed way.'

– Scottish Children's Reporter Administration

What the training should look like

Tiered

The idea that training should be tiered, to accommodate different people's roles and level of involvement in interventions for domestic abuse, emerged in several responses. Some proposed that this should range from an introduction to domestic abuse for all frontline staff, to training for those involved directly with multi-agency risk assessments and interventions which addressed the tools, processes and skills involved.

Mentoring

A mentoring or supervision system was suggested, to enable staff in public and third sector organisations to obtain support and advice from domestic abuse specialists as required.

Comprehensive

One comment highlighted the requirement for a full programme of training, in order to ensure that it is comprehensive.

How the training should be developed and delivered

Developed with organisations

A number of comments suggested that training and training resources should be developed with organisations concerned with domestic abuse, including at a local level.

Support from within organisations involved

Responses noted the importance of organisations supporting the relevant staff to complete training. One response suggested organisations embed a strategic priority on learning around domestic abuse, while others proposed including it in continuing professional development or linking it to professional registrations. One response commented on the importance of training complying with procurement rules.

Led by specialists

Several responses proposed that training should be led and/or informed by organisations who work with victims of domestic abuse. Some (including some of the Women's Aid organisations who responded to the consultation) specifically suggested Women's Aid, while others recommended SafeLives (again, including the organisation themselves).

‘Train the trainer’ model

Some responses suggested that a ‘train the trainer’ model could be adopted, to improve capacity and cascade consistent training across Scotland.

In-person versus e-learning

Responses were divided on whether in-person or e-training would be preferable. It was noted that face-to-face training could offer the opportunity to meet staff from other organisations and to practice skills, while e-learning may be more easily accessible, especially for those in remote areas. Several responses proposed that e-learning should not replace in-person training, but that it could be a useful complement, and the benefits of mixed-media resources in promoting learning were mentioned.

National training hub

Some respondents proposed that a national training ‘hub’ or database is established, which is accessible to all stakeholders and offers training and resources.

Where the training should be delivered

National versus local level

Many responses proposed that a standardised national training programme and resources should be established, to ensure consistency. Some suggested that training should be delivered by a single agency or completed via a national platform, although other comments focused more on the development than the delivery of training being at national level.

‘Create a national body with a statutory remit for training, policy development and national implementation. Alternatively seek tender applications by existing organisations who would feel this would be within their capacity.’

– Individual

Other responses suggested that training should be developed and/or delivered at local level. They highlighted the benefit of easier physical access, being able to incorporate local circumstances and capitalise on resources which may already have been developed locally. Some responses highlighted the importance of training being accessible (and affordable) for those in rural and remote locations.

These views were not necessarily mutually exclusive – several responses came back to the idea of balancing national consistency with local context, and suggested tailoring national training programmes and resources for local delivery would be most appropriate. It was proposed that minimum standards be established.

Within Higher Education courses

Some responses suggested that training around domestic abuse should be integrated into Higher Education courses, such as teaching, healthcare, policing, social work and other professional qualifications.

Within organisations

Other responses recommended training be provided within organisations, for example during staff inductions. There were proposals for certain members of staff to be responsible for training others within their organisation.

How often training should take place

Of those responses that specifically addressed how often training should take place, some argued for the intended audience to receive training annually. Others suggested a rolling programme of training be established, but did not specify how often people should be expected to attend. Some responses suggested that training should not be a one-off, but that staff should receive regular refreshers.

Question 2: Multi-Agency Working Model

The second question in this consultation asked:

In your view, what is the best model of multi-agency working for ensuring effective and early interventions for victims of domestic abuse?

Responses to this question addressed 3 broad themes:

1. Key characteristics that the model should have
2. Key components that the model should have
3. Examples of named models

1. Key characteristics that the model should have

National

Support for a national framework and standards emerged again as a strong theme in responses to this question. This was seen as important to avoid a 'postcode lottery' and to ensure consistent support across Scotland. Some responses also noted that this is especially important in cases where someone experiencing domestic abuse moves from one area to another. It was noted that a national model should be effectively tailored to the Scottish context.

However, other responses disagreed that one model should be applied in all Local Authorities. For example, Dundee Violence Against Women Partnership suggested that:

'There is no one model of multi-agency working which is the most effective, rather it is a combination of models and partnership approaches. There is also an argument to be made for local areas developing the best model for themselves as it all depends on the existing arrangements locally.'

– Dundee Violence Against Women Partnership

Flexibility

Several responses emphasised a need for the working model to be flexible, in particular so that it can adapt to both local context and the diversity of needs that victims may have.

Part of a coordinated community response

Comments argued that the model of multi-agency working should be seen as part of a coordinated community response to domestic abuse, and not as a stand-alone mechanism for reducing fatalities in high-risk cases. Prevention work and programmes to enable behaviour change in perpetrators were suggested as important related aspects of this work.

Specialist domestic abuse services at the forefront

Some responses indicated that specialist domestic abuse services should be at the centre or forefront of multi-agency working, to ensure that their expertise and approach direct the work. Women's Aid were recommended, including by several Women's Aid organisations themselves. Some responses also referenced Violence Against Women Partnerships, as potential coordinators or key partners.

Commitment and accountability

Responses advocated for commitment to the model from the organisations and staff involved and for them to be held accountable to the processes, values and responsibilities set out. These were presented as integral to success.

Children and young people

Responses highlighted the significant long-term impacts that experiencing or witnessing domestic abuse can have on children and young people, and they suggested that the needs of children and young people should be carefully considered and integrated into the model of multi-agency working.

It was proposed that dedicated advocacy workers be provided for children and young people, and that they should be fully consulted and informed about the process.

'Children and Young People from the Edinburgh MARAC were consulted by Scottish Women's Aid as part of their response to this consultation. They said that they should be:

- **Informed about the purpose of the MARAC**
- **Informed about what information is being shared**
- **Spoken to in their own right before a MARAC to ensure such information is accurate**

Many said that, if they are not directly involved, then incorrect information about them or their family might influence decision-making. They were concerned about their personal information being shared without their permission or contribution. As one said: 'I feel it's important to listen to children, to understand our feelings and thoughts and what we need.'

– Edinburgh Women's Aid

Integration with other public protection fora

Responses suggested that multi-agency work to respond to domestic abuse should be aligned and integrated with other public protection fora, such as Child Protection, Adult Support and Protection, and MAPPA.

Support for professionals

The need for support for professionals involved in this work was highlighted.

2. Key components that the model should have

Routine enquiry

There was support within responses for establishing a practice of routine enquiry in services, to promote early intervention. Some specified that health and social care services would be especially pertinent sites for this.

Early intervention

Responses suggested that early intervention should be a priority. This could be facilitated by routine enquiry, as set out above, as well as by the Named Person role for children experiencing domestic abuse.² Resourcing, gaps between MARAC meetings and legal grounds for non-voluntary intervention were all mentioned as barriers to early intervention.

Referral pathways

Several responses highlighted a need for clarity on how to refer victims of domestic abuse to appropriate support. Some respondents felt that this should be standardised, whether at local or national level, while others emphasised flexibility. The use of data was suggested to identify referral gaps.

There was a concern among respondents that there should be a clear procedure for referring victims who may not be deemed 'high risk' enough for multi-agency interventions, to ensure that they nevertheless receive appropriate support. This was considered important to prevent 'lower risk' cases from escalating.

Corroboration

It was suggested that allegations of domestic abuse should be corroborated as part of this process.

² For more on the Named Person role, see: <https://www.gov.scot/policies/gifec/named-person/>

Independent Domestic Abuse Advocacy

Some responses said that IDAA should be a key element of the working model, ensuring that all victims have access to an Advocate to ensure that their voice is heard in the process.

Adequate time

Responses noted a need to ensure adequate time is dedicated to each case, both at multi-agency meetings and in terms of the period of support. Respondents advocated long-term support, which is not focused only on periods of particularly high risk, and suggested that this can help avoid repeat referrals and victims having to re-explain their experience to multiple different sources of support.

Engagement with all family members

There was support among respondents for a model which promoted safe engagement with all family members, including perpetrators and children. It was suggested that this could include providing support to children and other affected family members, and linking to services to promote behaviour change among perpetrators.

ViSOR

Extending the use of the Violent and Sex Offender Register to assist in this work was proposed as a way of improving information sharing.

Champions in key services

Some responses suggested that domestic abuse 'champions' in key services would help promote awareness and support multi-agency working.

Relationships education

Relationships and respect being taught throughout education was suggested as a component of this work.

Regular assessment

Responses suggested that regular review of the model would support improvement and evidence of impact.

3. Examples of named models

Most responses, especially those from organisations, offered suggestions of existing models which they felt should be implemented or adapted. A number of responses referenced more than one existing model. The models which were mentioned by respondents were:

MARAC

The MARAC model was held up in responses as an effective model for responding to cases of domestic abuse where the victim is deemed to be at serious risk of harm. The SafeLives MARAC model was specifically referred to. Aspects of the model which were cited as beneficial in responses include:

- Evidence-based
- Early intervention
- Information sharing
- Access to IDAA support for victims, so that victims' views are central
- Identifies, manages and reduces risk
- Coordinates interventions and support
- Engages with all family members
- Holds perpetrators to account
- Complements Child Protection, Adult Support and Protection, MATAC and MAPPA.

'The MARAC process, developed by SafeLives, is recognised nationally as best practice for addressing cases of domestic abuse that are categorised as visible high risk of serious harm or homicide ... The SafeLives MARAC model has been extensively evaluated and has a proven track record in reducing risk and increasing safety.'

– Glasgow Violence Against Women Partnership

Many responses supported MARACs as an effective model but one which still requires further development and improvement, both to the model but especially to ensure that it is implemented as designed. Several comments mentioned that currently, intervention is often not at an early stage.

Reference was made to the model's effectiveness being dependent on adequate funding, commitment from organisations involved and a wider system of multi-agency collaboration.

Safe and Together

Several responses recommended the Safe and Together approach to promote the safety of children and young people living with domestic abuse in partnership with the non-perpetrating parent. This was often proposed as a useful model to use in conjunction with MARAC.

Team Around You

The Team Around You model was recommended in some responses for its inclusion of the victim (and their children) in meetings, and because the longer meetings enable fuller assessment of a case.

Lead Professional

The Lead Professional model was recommended as useful for making one person responsible for coordination, information collection and risk assessment.

Domestic Abuse Local Action Groups

Domestic Abuse Local Action Groups, which have been tried out in Edinburgh.

Getting It Right For Every Child

This was recommended as an approach which should be integrated with MARAC.

HARK

This was recommended as an approach for GP services.

Caledonian Programme

The Caledonian Programme was recommended for use alongside MARAC.

MATAC

Some responses felt that Multi-Agency Tasking and Coordinating would be useful.

CEDAR

The Children Experiencing Domestic Abuse Recovery programme was recommended in some responses.

IRD

Interagency Referral Discussion was suggested as a model for conducting initial information sharing, risk assessment and planning ahead of a MARAC.

Respect

The Respect Programme was also recommended.

Claire's Law

The use of Claire's Law was proposed to inform individuals whose partner has a history of being abusive.

Question 3: Risk Assessment

The third question in this consultation asked:

In your view, what is the best model for professionals assessing risk in relation to domestic abuse?

Responses to this question broadly covered the same 3 themes that we saw with the previous question:

1. Key characteristics that the risk assessment model should have
2. Key components that the risk assessment model should have
3. Examples of named risk assessment tools and models

It was noted within the responses that the aims of the risk assessment should be established at the outset, since the kind of harm that assessment is aiming to prevent should direct the form that it takes.

This corresponds to a query that was also raised about the consultation more broadly – whether only interventions for those deemed to be at high risk from domestic abuse were within the scope of the consultation. Responses suggest that this was generally assumed to be the case, although as this report reflects, comments were also given about responses for those deemed to be at lower risk.

1. Key characteristics that the risk assessment model should have

National

There was strong support for a single domestic abuse risk assessment approach and tool being used by service providers across Scotland, to promote consistency, collaboration and shared understanding. It was noted that this should include clear guidelines on thresholds – the point at which given actions should be taken. Some responses supported national use of an existing tool, while others suggested a new tool be developed. One suggestion was to connect a nationally endorsed approach to the provision of Scottish Government grants.

Flexible

However, as with comments on appropriate models of multi-agency working, a need for flexibility in terms of risk assessment models was also highlighted.

Some suggested that while some consistency of approach would be helpful, sector-specific risk assessment tools would be more appropriate and that it may be more helpful to endorse a number of different tools which could be selected from according to the context in which they are to be used. Some comments suggested

that different but related tools are currently being used successfully alongside one another by different organisations in the same area.

Allows for professional judgement

Responses highlighted a desire for the risk assessment model to allow for the use of professional judgement by those with understanding of domestic abuse, noting that this is key to effective assessment, and that any tools should be considered a useful guide. SafeLives noted that their own approach and training promotes the use of 'structured professional judgement'.

Identifies those at highest risk

It was suggested that the model should aim to identify those who are at highest risk from domestic abuse, both of homicide and other serious harm.

Duty of care

Some comments emphasised a need to underpin risk assessment with the principle of 'duty of care', or the duty to prevent harm. It was emphasised that this must include all harm, not only physical but also psychological and emotional.

Understanding of barriers to disclosure

Responses noted the need for risk assessment approaches to consider the barriers that victims face in speaking up about their abuse, such as fear of reprisal or doubt that they will be believed.

Regularly reviewed and updated

Comments suggested regular reviews and improvements be made to the risk assessment model and tools.

2. Key components that the risk assessment model should have

Continuous and responsive risk assessment

Comments highlighted a demand for risk assessment to be continuous and responsive to changes in the victim's circumstances and need, on the understanding that risk can change quickly.

Consideration of past abuse

Some responses noted that it is important that risk assessments include abuse that the perpetrator has committed in the past.

Consideration of abuse other than physical

There was a strong demand in responses for risk assessment to take full account of non-physical abuse, such as all aspects of coercive control including coercion of children, and the pattern of behaviour. Some responses indicated that non-physical abuse should in fact be given greater weight, since research has shown it to be a

more effective indicator of homicide and other harm. It was also emphasised, however, in understanding that non-physical abuse can be just as harmful as physical abuse, that risk assessments should also focus on preventing psychological and emotional harm as much as homicide or other physical harm. One response suggested the model should be underpinned by a 'psychological formulation approach.'

Consideration of animal abuse

The Scottish SPCA suggested that risk assessment should also assess for risk of harm to animals, as well as ensuring that any previous harm to animals which is identified is referred to appropriate animal welfare organisations.

Consideration of potential breaches of safety measures

It was suggested that risk assessment should encompass consideration of the likelihood and potential impact of any breaches to the safety measures that are put in place to promote victims' safety, and include mitigations.

Self-assessment

Responses noted that victims' self-assessment of risk has been found to be an important part of effective assessment of risk of harm, and that it would be useful to include this in the risk assessment model(s) used.

Separate risk assessments for children and young people

Several respondents proposed that there is a need for separate risk assessments for children and young people involved in cases of domestic abuse. Responses suggested that the risk faced by children and young people cannot be accurately gauged by a risk assessment focused on an adult who is considered the primary victim of the abuse.

Screening for perpetrators presenting as victims

Some responses suggested that risk assessment models should include screening for perpetrators who might be presenting as victims. The importance of information sharing between partners was highlighted in this respect.

Conducted away from perpetrators

The importance of not conducting risk assessments in close proximity to perpetrators was highlighted.

Corroboration of claims

It was suggested by some respondents that risk assessment should include investigation adequate to corroborate claims of domestic abuse, and that risk assessment should be based on more than one source. One response suggested that sometimes false or exaggerated accusations of domestic abuse can be made with the intention of restricting a parent's access to their children.

Conducted by staff in a range of public services

Some responses suggested that there should be staff in a range of public services who are trained to conduct risk assessments (and to make appropriate referrals). It was felt that this was important to facilitate early intervention. One comment suggested that a shorter version of the Dash Checklist be considered, in light of the fact that staff in public services are also required to conduct a range of other risk assessments.

Conducted by professionals who work with domestic abuse

Other responses suggested that risk assessments should be conducted by specialist domestic abuse workers, in the context of an ongoing relationship, based on research showing that disclosure can be more forthcoming and risk assessments more accurate in this case. It was proposed that perhaps initial risk assessments conducted within other service organisations could be followed up by another conducted by a specialist. Some Women's Aid organisations reflected their experiences of this, such as:

'... until the introduction of the GDPR advocacy workers at Perthshire Women's Aid were receiving the contact details of women who had been assessed as Medium Risk as well as those assessed as High Risk. The benefit of this was the women assessed by the police as Medium risk were offered support by a specialist domestic abuse worker who were then able to continue to make an assessment of risk which resulted in a number of them then being reassessed as high risk without any further escalation and appropriate support was able to be put in place.'

– Perthshire Women's Aid

Support and supervision for those conducting risk assessments

Some comments noted the importance of ensuring that both support and supervision is given to staff conducting these risk assessments. This was differently framed as important to ensure that risk assessments are conducted properly, and to ensure that staff wellbeing is monitored and upheld.

3. Examples of named risk assessment tools and models

Many responses to this question endorsed the use of a risk assessment tool. Others also mentioned models that the risk assessment should be based on. Many responses recommended more than one, and suggestion was made that an audit be conducted to find out which tools, and where, are currently in use across Scotland. A need for further research and review of existing tools to ensure their effectiveness was also put forward (with one suggestion that Scottish Women's Aid should lead on this).

One comment emphasised that risk indicators should not be confused with risk assessments, which are more comprehensive.

The named risk assessment tools and models mentioned in responses were:

SafeLives Dash Risk Identification Checklist

Overall, responses indicated strong support for the SafeLives Dash Risk Identification Checklist. Responses indicated that its benefits include:

- Specific to domestic abuse
- Risk-led
- Easy to use
- Useful for training new staff
- Evidence-based
- Captures a broad spectrum of abuse
- Captures additional intersectional risk factors, such as those faced by disabled, LGB or immigrant victims
- Facilitates discussion with victims
- Can be used by a variety of professionals
- Allows for use of professional judgement
- Enables identification of victims at high risk of homicide or serious harm
- Indicates appropriate actions and ensures that victims get help at the right time
- A common tool that can be used by partner organisations across the UK, to ensure standardisation and shared language
- Well-established
- Embedded in the criminal justice response to domestic abuse in Glasgow

‘The Safe Lives DASH risk check list is widely accepted and understood and has been developed over a period of time. The consideration of professional judgement is rightly [an] important element in the risk assessment ensuring that the score in relation to the clients answers is not the only criteria used.’

– Perth & Kinross Violence Against Women Partnership

Responses also highlighted some potential drawbacks with the tool, such as:

- It may not take adequate account of the risk posed by coercive control, which some research has shown to be a significant risk indicator
- It does not properly take historical abuse into account

- It does not account for additional risks faced by those with protected characteristics, including minority ethnic women, or those with additional support needs
- It could better enable consideration of children
- It could usefully facilitate the inclusion of greater detail, by requiring expanded rather than yes/no answers
- It is more effectively used in the context of an established relationship with a support or advocacy worker, where disclosure may be more likely
- Experience is required to ensure that victims feel safe when responding
- Results are affected by whether or not professionals completing the checklist employ their professional judgement
- Relies on adequate training and understanding of domestic abuse
- Self-assessment may not be appropriately weighted

There was also mention of other non-specified tools produced by SafeLives.

Domestic Abuse Questionnaire

Responses indicated that the Police currently use the Domestic Abuse Questionnaire, which includes 3 more questions than the Dash Checklist. It was noted that being based on the Dash facilitates partnership working with organisations that use the Dash, but some responses were concerned that the additional 3 questions could lead to inconsistency. Police Scotland themselves commented that:

‘Police Scotland continue to support use of the DAQ but would welcome further discussion on the balance of their 27 questions compared to the 24 identical ones used by other areas ... The domestic abuse reporting template that Police Scotland utilises in agreement with the Crown Office and Procurator Fiscal Service (COPFS) which seeks to improve the criminal justice response to domestic abuse also includes the indication of risk as a result of DAQ. The template is regarded as good practice by Police Scotland and COPFS and deviation from use of the DAQ would impact on that practice.’

– Police Scotland

College of Policing tool

Some responses mentioned a new tool piloted by the College of Policing in 2018, which included a greater focus on coercive control and was initially found to be more effective than the Dash Checklist in certain respects.

Spousal Assault Risk Assessment Guide

The Spousal Assault Risk Assessment Guide (SARA) was mentioned as a tool used for perpetrators of domestic abuse, including within criminal justice settings.

Specialist Risk Assessment Reports

Relationships Scotland highlighted Specialist Risk Assessment Reports as an effective means of assessing risk of harm to children as well as adult victims. They noted that these draw on multiple sources of information, including the victim, and recommend wider use and evaluation of these reports.

Safe and Together

A number of responses to this question highlighted the Safe and Together approach, with mention of questions used in Safe and Together assessment, and many suggested that this be integrated with the Dash Checklist. Safe and Together aims to promote the safety of children and young people living with domestic abuse in partnership with the non-perpetrating parent.

Question 4: Key Partners

The fourth question in this consultation asked:

In your view, who are the key partners that should be involved in multi-agency working to support victims of domestic abuse?

While there was an extensive number of organisations or services that were mentioned as key partners within the responses to the consultation, there were some that were mentioned particularly frequently. The following were recommended by a majority of those who responded to the consultation:

- **Healthcare** (in broad terms, or with reference to specific health professionals)
- **Police**
- **Social work** (in general, or specifically either Children and Families Social Work, Adult Social Work, or Criminal Justice Social Work)
- **Specialist domestic abuse services**
- **Housing** (in broad terms, or with reference to homelessness services or Registered Social Landlords)
- **Education**
- **Substance abuse and addiction services**

The following organisations and services were also recommended by respondents as partners that should be key within multi-agency working:

- Independent Domestic Abuse Advocates, Multi-Agency Independent Advocacy, or equivalent
- Fire and Rescue
- Adult Support and Protection
- Children's Support and Protection
- Children's Advocacy
- Legal services (including Crown Office and Procurator Fiscal Service, criminal justice, courts, solicitors, Specialist Court Services, Judiciary and Sheriffs)
- LGBT, disability and minority ethnic organisations
- Scottish Prison Service
- Prison healthcare services
- Victim peer groups or support services

- Offender support
- Sexual assault and sexual abuse organisations
- Equalities organisations
- Family or parenting support
- Welfare Rights officers
- Young Person workers
- Caledonian System women and children's workers (or equivalent from other services working with perpetrators)
- Community safety
- Public protection
- Advice and information services
- Throughcare (it was not clear if this referred to support for those leaving care, or for those leaving prison)
- Animal welfare agencies and veterinarians
- Named organisations including: Barnardos, Rape Crisis, Women's Aid, Domestic Abuse Service, Engender, Zero Tolerance, ASSIST, CEDAR, Victim Support, Fearless, Vibrant Communities. Some responses named local organisations that they felt should be involved in their areas, such as Fife Cares (home security), Gingerbread, Citizens Advice and Rights Fife, Fife Law Centre, Fife Rape and Sexual Assault Centre and Kingdom Abuse Survivor's Project for Fife, and The Daisy Project, Wheatley Group, NHS GG&C Special Needs in Pregnancy Service, NHS GG&C Archway/Sandyford Services and the Navigator Project in Glasgow.

It was also proposed that the victim themselves be considered a key partner, and one response suggested that the victim's employer be involved.

Responses made specific comments pertaining to some of those that they considered should be key partners:

Independent Domestic Abuse Advocates or equivalent

A number of responses emphasised the importance of having a trained independent advocate to support the victim and ensure that their views are heard in multi-agency working. It was also suggested that they should be able to respond to high-risk referrals within 48 hours, and that there should be a national standard for IDAAs.

Social work

It was suggested that Adult, Children and Families, and Criminal Justice social work should all have separate representatives within multi-agency working. The presence and information sharing from social work partners were noted as people

of particular importance in cases where children and young people are involved. ASSIST noted that they have found the absence of Children and Families or Criminal Justice social work from meetings to have considerably hindered the ability to construct a 'wide ranging safety plan'.

Specialist domestic abuse services

Several responses indicated that they felt domestic abuse services should be key partners in multi-agency working. Women's Aid was specifically recommended, and it was suggested that the Police should make referrals to Women's Aid in the same way that they do to Victim Support Scotland and Rape Crisis Scotland. One response, however, argued that the domestic abuse organisations involved as key partners should be ones that represent both men and women.

Healthcare

Primary care was noted as a particularly important partner as GPs may be a key referrer. One response suggested that maternity services should be mandatory in the case of victims who are pregnant. Multiple healthcare professionals were often listed and it was suggested that there should usually be more than one healthcare partner involved, since it is a broad area. Some respondents, however, felt that there should be one 'lead' representative from the relevant Health and Social Care Partnership or Board who is responsible for attending meetings and coordinating with other key staff.

Individual areas and roles within healthcare that were specifically mentioned include:

- Health visitors
- Midwives
- Obstetricians
- Special Needs in Pregnancy Service
- Psychiatrists
- (Community) psychiatric nurses
- Mental health services
- Community nursing
- Accident and Emergency
- Sexual and reproductive health
- Health personnel from secondary care environments
- Acute care

One respondent noted that clear communication between different practitioners is key to ensuring that the relevant information is shared and appropriate input is provided.

Education

One response suggested that both head teachers and a representative from directorate level should be involved.

Children's advocates

Several responses proposed that children and young people involved in cases of domestic abuse should be provided with a dedicated advocacy worker to support them and ensure their views are heard within the process.

The victim

It was suggested that the victim should have the option of being directly involved in multi-agency working and attending meetings themselves, if they choose, and that in many cases they are the best person to advocate in their own interest. The Scottish Commission for Learning Disability proposed that Scottish Government undertake further consultation with professionals and people who have experienced domestic abuse to find out if there is support for this, and in particular the potential impacts for people with disabilities.

Legal professionals

With regards to legal professionals' involvement in multi-agency working, it was variously suggested that civil and criminal agencies must work effectively together; that legal representatives should be available to provide advice, perhaps in the same way that criminal defendants have the right to legal counsel; that courts should tackle the issue of bails being broken; and that some legal professionals may be involved in more of an observation role.

Family or parenting support

Family or parenting support services were noted as being of particular importance to parents with learning disabilities.

LGBT, disability and minority ethnic organisations

Services for victims with these protected characteristics were noted as being of importance to ensure that this multi-agency working is inclusive. It was suggested that a simplified referral mechanism might make it easier for practitioners to ensure victims receive access to the right support.

'Where there are cultural issues, a victim may prefer these supports coming from agencies or professionals who have a particular awareness of the cultural context, similarly victims from sexual minorities may prefer supports coming from dedicated agencies or professionals.'

– Individual

Other comments

In addition to suggestions for specific partners who should be involved in multi-agency working to support victims of domestic abuse, responses also offered more general comments on the nature of who should be involved and what their participation should look like.

Partners adapted to individual circumstance

Several responses suggested that the partner organisations involved should vary on a case-by-case basis. Many of the services and organisations mentioned above may not be relevant for all victims, while sometimes specialist organisations might be able to offer support tailored to aspects of the victim's identity, needs or experience. Some responses proposed that any relevant organisations that are working with the victim or their family should be invited to participate, although the level of their involvement may vary. It was also suggested that there could be a 'core' group of partners, which is complemented by others as required.

Present at the request of the victim

Some respondents felt that the organisations involved in any given case should be there at the victim's request.

Partners adapted to local context

Other comments suggested that local circumstances and the organisations working in different areas should also be a factor in determining the partners involved. In particular, it was also noted that there may be service gaps in more rural or remote areas and that specific consideration should therefore be given to how the partners involved in multi-agency working in these areas can best ensure effective responses for victims of domestic abuse.

Partners dictated by SafeLives best practice

Some respondents suggested that the 9 core agencies recommended by SafeLives should always be included:

- Local Police
- IDAA (or equivalent specialist practitioner working with victims to the same high standards)
- Criminal Justice Social Work
- Children and Families Social Work
- Education
- Health (including the physical and mental health of adults and children)
- Substance Misuse Services
- Housing (including homeless services)
- Adult Support and Protection

Children and young people

Several respondents advocated for children and young people to be more visible within multi-agency working for victims of domestic abuse, and for attention to be given to including partners who would be best placed to support them. Suggestions here included:

- Child health professionals, including psychologists and community nursing. It was suggested that community nursing or health visitors may be more likely than other health professionals to have access to some children experiencing domestic abuse
- Education staff, who may in particular be able to offer a safer location for victims and their children to access support
- Social work

Consistent and satisfactory participation

There was a strong feeling among responses that organisations involved in multi-agency working should attend and participate consistently, to ensure effective support and interventions for victims. This should include having the time to dedicate to training and research. Organisational and managerial support was thought to be key for this. Responses also highlighted the need for all partners to take a collaborative approach to the work.

Seniority of representatives

Some responses suggested that representatives from partner organisations should be of sufficient seniority to be able to commit resources and prioritise actions agreed in the course of the work.

Single or multiple representatives

One comment proposed that each partner organisation should appoint one primary representative, with a deputy to stand in as required. However another suggested that the representative should be determined on a case-by-case basis, depending on who has knowledge or experience of that particular case.

Balance between comprehensiveness and manageability

One respondent highlighted that it is important to strike the right balance between inviting everyone who could usefully contribute to a given case, and ensuring that the size and length of any meetings is kept manageable.

Leadership

Some respondents made suggestions regarding who they felt should lead the multi-agency working. Proposals were variously made for specialist domestic abuse organisations such as Women's Aid, social work, and the Police (in the more

serious cases) to take the lead. One respondent suggested that the coordinator should be the one to invite other partners as appropriate.

Administration

It was noted that there is an administrative workload associated with organising this multi-agency work and communicating with all partners, and that sufficient infrastructure should be in place to accommodate this.

Question 5: Guidance

The fifth question in this consultation asked:

In your view, what guidance is required to support and embed effective multi-agency working for victims of domestic abuse?

Responses to this question addressed three main aspects of the guidance they felt was required: the characteristics that it should have, the format it should take, and in particular, what content they thought it should cover.

1. Characteristics

National

As with many other aspects of multi-agency working for victims of domestic abuse, responses showed strong support for any guidance to be produced at a national level, to promote consistency across Scotland, which is currently missing.

It was suggested that this could usefully take a similar tone to other national protection guidance:

'...national domestic abuse guidance similar in tone to the National Child Protection Guidance or the Code of Practice for Adult Protection would help. Equally Safe is very helpful document, but does not seem to carry the weight that guidance about other protection issues does.'

– Shetland Domestic Abuse Partnership

It was also proposed that the Domestic Abuse (Scotland) Act 2018 could provide a useful foundation for national guidance, and that guidance should be endorsed by Scottish Government. Some responses underlined that it was important for guidance to be specific to the Scottish context.

Local

As in responses to other questions, the need for local flexibility in guidance was also highlighted. Some respondents thought that local guidance should complement national guidance, while others referred only to the need for guidance at a local level. It was suggested that guidance should be embedded in relevant local strategies.

Statutory

Some respondents suggested that guidance should be statutory. They mentioned other national, multi-agency guidance that is statutory, including that on forced marriage, MAPPA, child protection and adult support and protection, and it was

suggested that this gives the guidance a greater weight and status which it would be helpful for multi-agency guidance for domestic abuse to also benefit from. (One respondent also felt that existing guidance for forced marriage and FGM could provide a useful template on which to model guidance for response to domestic abuse.)

Visible and accessible

Some respondents noted that it was important that guidance should be both visible and accessible for users. It was suggested that it could be promoted through training to ensure that those who need it are made aware of it.

Tailored

It was proposed that tailored guidance should be produced, appropriate to the different organisations who might use it as well as to the various roles that staff might have in relation to this multi-agency work.

Prescriptive

Some respondents felt that the guidance should be prescriptive about setting standards for multi-agency working for victims of domestic abuse, or in terms of quality assurance. This could include timescales, use of tools, safety planning and review.

Development

Some responses noted that guidance should be developed in partnership with relevant bodies and agencies, as well as with people with experience of domestic abuse.

Regularly reviewed

Responses suggested that it is important for the guidance to be regularly reviewed and kept up-to-date. One respondent felt that a particularly important aspect of this should be assessing the intersectional multi-agency response, in terms of the support offered to minority ethnic, disabled and LGBTI victims, as well as to male victims.

2. Format

In terms of the format of the guidance, some respondents felt that a portal or website with online materials would be a helpful way to disseminate it.

The development of Scottish 'toolkits' was also proposed, reflecting that this is an approach that has been taken in England and Wales. SafeLives noted that they create guidance documents in response to requests from Scottish MARACs and practitioners and recently developed a Scottish MARAC toolkit, although also noted that:

‘To date we have not had capacity within the MDP [Marac Development Programme] to develop a range of Scottish Marac Toolkits similar to those which support professionals in England and Wales but this is something which we believe would be beneficial to Marac professionals across Scotland, ensuring they know the unique contribution which their agency can make in increasing the safety of victims at high risk of serious harm or murder.’

– SafeLives

3. Content

Expectations and governance

Clarity on Scottish Government expectations

Some respondents felt that it would be helpful for the guidance to set out Scottish Government’s views on the implementation and resourcing of multi-agency working for victims of domestic abuse, and its expectations in terms of Local Authorities and organisations involved. It was also suggested that the guidance could usefully clarify the commitment to MARAC within the Equally Safe Delivery Plan.

Governance and reporting requirements

It was suggested that further information on the responsibilities of MARAC steering groups, including any reporting and record keeping requirements, would be useful to cover in guidance.

Partnership working

General operation and Operating Protocols

Responses requested guidance on the overall operation of multi-agency working for victims of domestic abuse, including:

- Processes, including identification, referral, risk assessment, safety planning and ongoing support
- Contacts
- Resources

Some respondents recommended that all local areas produce a detailed and regularly updated Operating Protocol, based on national guidelines, to set out how multi-agency working will operate in that area, and to which all partners should be signatories.

Roles and responsibilities of partners

There was a strong demand within responses for guidance on how agencies should work together and what they should be responsible for achieving, both individually and as a whole. It was specifically requested that guidance cover the respective roles and responsibilities of statutory and non-statutory bodies. One respondent suggested induction and information packs be provided for representatives.

Coordination

Some responses requested specific guidance on the role of MARAC coordinators. This included a suggestion that they should be responsible for data collection and the submission of this data for evaluation purposes. There was also mention of the roles of chairs and 'care coordinators' – it was not clear if these are distinct from the role of MARAC coordinator.

Management within partner organisations

It was suggested that specific guidance should be provided for decision makers within partner organisations, as well as the line managers of the staff directly participating in the multi-agency work, to ensure that their own responsibilities are clear.

Partnership working in rural and remote areas

It was noted that face-to-face partnership working can have additional challenges in rural and remote areas, such as the additional distances, time and costs involved, and that guidance could usefully help address this.

Language

Terms of reference

Respondents suggested that it would be helpful for the guidance to set out clear, Scottish-specific terms of reference, including definitions of domestic abuse, 'high risk' and what constitutes advocacy work. It was noted that these should be consistent with both Equally Safe and the Safe and Together approach.

Communication

Communication with victims and their children

Respondents proposed that the guidance should cover effective communication with victims and their children. It was noted that the objective should be to ensure that information about multi-agency interventions is presented in a way that is easy to understand and retain, even in periods of stress. Respondents suggested that this could help reduce risk, increase engagement, reduce attrition and empower victims, children and young people.

Improving visibility and understanding of MARACs

Some responses suggested that it would be helpful to offer guidance on increasing the visibility of MARACs in order to improve referral rates, as well as to promote information on what to expect when attending one.

Further discussion of areas addressed in other questions

Training

It was suggested that training be covered in the guidance, including minimum standards and regularity of training. One respondent proposed reviving and updating the National Training Strategy.

Risk assessment

Several responses supported the guidance addressing risk assessment, including the effective use of any risk assessment tools for all victims and any evidence requirements.

Information sharing

Responses suggested that it would be useful for guidance to cover information sharing in the context of multi-agency working for victims of domestic abuse. This could include information on how and when to share information appropriately, Information Sharing Protocols, and specific guidance on complying with GDPR. One response suggested that it would be useful for each agency to produce guidance on their role in information sharing. The Information Commissioner's Office (ICO) suggested that guidance needed to address who the controllers of personal data collected as part of this work should be:

'The Scottish Government should consider whether the agencies involved in the sharing and processing of personal data as part of a multi-agency assessment and intervention are joint controllers under the GDPR. This would be the case where the partners have joint responsibility for determining the purpose of and means of personal data processing as part of the multi-agency assessment or intervention.'

– Information Commissioner's Office

They highlighted the importance of transparent arrangements, agreeing responsibility and following codes of practice, and recommended nominating one partner to take the lead in the case of joint control.

Other areas

Other areas that respondents suggested could usefully be covered in guidance included:

Data collection, auditing and evaluation

Guidance was requested on monitoring, auditing and evaluation of multi-agency working, including the collection of necessary data, to ensure that resources are being used effectively. It was proposed that consistent local data should be collected to monitor outcomes and that local coordinators should produce annual reports. One respondent wanted to ensure that geographical comparison was possible. SafeLives noted that they currently receive data from 22 Scottish MARACs every quarter, and that this can be used to highlight where improvements might be needed. For example, data currently shows that referral rates are lower than for the rest of the UK and that victims with certain minority characteristics appear to be underrepresented (a trend also seen at UK level).

Safety/action plans

It was also suggested that guidance be offered on action planning, to promote creative, specific and time-bound actions which address the risks identified. It was further proposed that this should also cover online safety.

Person-centred and intersectional approaches

Some responses requested guidance on taking a person-centred and intersectional approach to multi-agency working.

Public health education

One response suggested that public health education be covered in the guidance.

Links to other Public Protection arrangements

Some respondents suggested that guidance should promote links between multi-agency working for victims of domestic abuse, and other public protection arrangements such as Child Protection and Adult Support and Protection. One comment proposed taking advantage of current revision of the Child Protection guidance to promote a joined-up approach. Another raised concern about comparisons being drawn between MARAC and MAPPA.

Legislation

A request was made for guidance to cover new legislation.

Good practice

Some respondents requested examples of good practice within the guidance.

Question 6: Information Sharing Protocols

The sixth question in this consultation asked:

What protocols need to be put in place to ensure effective information sharing between agencies?

Responses to this question addressed a number of areas, each of which will be addressed in turn:

1. What the **outcomes** of the information sharing protocols should be
2. Who **responsibility** for the protocols should lie with
3. Key **characteristics** that the protocols should have
4. Key **content** that the protocols should cover
5. **Principles** that should govern what information is shared
6. Other comments

1. What the outcomes of the information sharing protocols should be

Many respondents made proposals for what they felt that the outcomes of the Information Sharing Protocols (ISPs) should be. One comment suggested that these should be explicitly stated within the Protocols themselves.

Trust and confidence for victims

Several respondents felt that improving the trust and confidence that victims have in the multi-agency response to domestic abuse should be a key outcome of the ISPs. Some respondents noted that this is currently a significant concern for victims involved in the process, and may contribute to higher attrition rates. In particular, it was thought that victims should understand how their information is being shared, feel that they have control over this, and be assured that their information is being shared safely and in line with the principles outlined below (point 5).

‘Any information sharing must be done in a way which protects the dignity of women and children who are seen as being at high-risk through someone else’s behaviour and who already have little control over their own lives and have no say in whether their information is discussed within these forums. Through our participation in multi-agency forums we have experience of information which is not relevant being shared, off these forums being used

to challenge the veracity of what women are reporting because of agencies previous experiences with women.'

– Fife Women's Aid

Trust and confidence between partners

Equally, many respondents felt that ISPs should also increase mutual trust and confidence between partners involved in the multi-agency work. An ISP could help assure them that information is being shared safely, in a consistent manner and in line with General Data Protection Regulations (GDPR), and that it will be used for the purpose intended. One respondent suggested that it is important for staff to feel that any decisions to share information will be fully supported by their organisation.

Safety

Responses highlighted a need to ensure that information sharing promotes victim safety. Ensuring that information is shared in the first place when the victim's safety could be compromised by not doing so, and ensuring that information sharing does not put the victim at increased risk, were both considered important.

Consistency

Respondents highlighted a need for consistency in information sharing across Scotland, noting that inconsistency could lead to increased risk, particularly in the case of perpetrators moving between different areas.

Minimised barriers

A key outcome of ISPs should be reduced barriers to information sharing, according to responses. In particular, it was noted that there are ongoing difficulties with information sharing between third sector partners and the Police (or other statutory organisations).

Lawfulness

Respondents were keen that ISPs help ensure that information sharing is always conducted in a lawful manner. Partners should be clear about the lawful basis on which information is shared in each instance.

2. Who responsibility for the protocols should lie with

It was suggested that responsibility for Information Sharing Protocols should lie with the steering or governance groups overseeing this multi-agency work.

3. Key characteristics that the protocols should have

National

Several responses endorsed the production of national Information Sharing Protocols, to promote consistent information sharing throughout Scotland.

Local

While the benefits of national protocols were highlighted, other responses also suggested that ISPs should be local, or that both national and local protocols are required. The Information Commissioner's Office recommended that Scottish Government produce a 'high-level national data sharing protocol', informed by a Data Protection Impact Assessment, which could 'provide a framework for more detailed local data sharing arrangements'.

Up-to-date

Respondents suggested that ISPs should be regularly reviewed and updated.

Signed up to by all partners

Several respondents suggested that ISPs should be signed off, perhaps annually, by all partners involved in the multi-agency work. One comment proposed that they should be supported by the head of each organisation.

Aligned with service protocols

One response proposed ensuring that ISPs are aligned with service protocols.

Human rights compliant

It was also proposed that ISPs should be compliant with human rights.

4. Key content that the protocols should cover

Consent

Respondents suggested that the protocols should cover how to obtain consent to share personal information, as well as appropriate procedures for when an individual has not consented to their data being shared. Indeed, it was also proposed that there may be some instances in which it may in fact put the victim at greater risk to seek consent. One respondent, however, felt that personal data should only be shared when written consent has been given.

Source of information

Some respondents suggested that the source of any information that is shared, handled or stored should be recorded.

Storage

Responses recommended that ISPs address the safe storage of information, including secure IT and email systems.

Sharing both within and outside meetings

Several responses suggested that ISPs should set out how information can be safely shared both within and outside of multi-agency meetings. It was felt that there are significant benefits of being able to share information outside or ahead of meetings – either to take more immediate action to protect high-risk victims' safety, or to intervene before a case reaches the risk threshold for full multi-agency intervention.

Sharing between statutory and third sector organisations

As noted above, respondents highlighted existing issues with sharing information between statutory/public and third sector organisations, and suggested that protocols should address this. The ICO noted that whether a given agency is a public body or a third or private sector body might impact on the lawful basis or the lawfulness of certain types of data sharing.

Roles of all partners

Respondents advised that ISPs set out the role that all multi-agency partners should play in information sharing. It was suggested that Police, healthcare staff, social services and specialist domestic abuse workers should all conduct relevant background checks on the individuals involved. One response suggested that not only should all partners be signatories to the ISP, but that they should also sign a confidentiality agreement at each meeting they attend. It was noted that the ISPs should also set out the procedure for partners to withdraw.

Complaints and breaches

It was proposed that ISPs should address what to do in the event of complaints or breaches related to information sharing.

GDPR

Many respondents felt that it would be helpful for ISPs to set out specific guidelines on compliance with the General Data Protection Regulations, particularly to allay concerns around the rights of perpetrators and to ensure that GDPR does not create barriers to effective information sharing.³

Links to Adult and Child Protection procedures

It was suggested that ISPs for multi-agency working in response to domestic abuse should link to protocols established for Child and Adult Protection procedures.

³ The response to this consultation submitted by the Information Commissioner's Office included extensive guidance on GDPR compliance for MARACs. The full response can be accessed [here](#).

Disclosure of LGBT identity

Responses suggested that ISPs include specific guidelines around disclosure of LGBT identity. It was noted that while in some cases it may be relevant and necessary to share information pertaining to a victim's sexual orientation or gender identity, this should as far as possible be done with the victim's full understanding and consent.

LGBT Youth Scotland specifically highlighted legal obligations around disclosure of transgender identities:

'Professionals are often unaware of the duty placed on them under the Gender Recognition Act 2004 not to disclose the transgender identity of service users without explicit consent, and most are not aware that to do so can constitute a criminal act. It is therefore essential that this information is included in any guidance produced. In addition, it should be made clear that outing an LGBT person without consent is bad practice, and could be discriminatory under the Equality Act 2010.'

– LGBT Youth Scotland

However, Stonewall Scotland added that:

'While this offence [under Section 22 of the Gender Recognition Act 2004] does not apply where the disclosure is for the purpose of preventing or investigating crime, there is uncertainty as to whether this would extend to safeguarding issues, such as protecting individuals at risk of harm from domestic abuse. Guidance should make practitioners should be aware of this legislation and their responsibilities under it.'

– Stonewall Scotland

Prioritising victim protection over perpetrator confidentiality

Several responses suggested that ISPs should address concerns about sharing perpetrator's personal information without their consent, and the legal basis on which this might be done in order to promote the safety of the victim.

Documentation

It was suggested that ISPs also cover the use of any particular documentation required as a part of the information sharing process.

5. Principles that should govern what information is shared

Duty to prevent harm

As with risk assessments, it was suggested that ISPs should be grounded in a duty to prevent harm.

Focused on risk

Relatedly, responses proposed that all information shared should be focused on risk.

Relevance

Several respondents argued that it is important that only information which is relevant for safeguarding victims of domestic abuse be shared – but equally, that **all** information deemed relevant be shared to help ensure that the response is as effective as possible.

Proportionate

Equally, respondents also felt that it was important that the information shared be proportionate:

‘Proportionate information sharing is the key to a successful MARAC, facilitating effective safety planning while protecting the rights of the individual.’

– Scottish Borders Council

Robust governance

It was additionally suggested that the information shared as part of multi-agency working in this area should be robustly governed.

6. Other comments

Importance of ISPs

Several respondents emphasised the how important they felt it was that ISPs are established, and how useful they thought they would be in facilitating successful multi-agency working in this area. One response highlighted a previous example of a domestic abuse case in which missed opportunities for information sharing were found to have contributed to a homicide.

Central reporting system

Some respondents suggested that a central, national database or reporting system to facilitate information sharing between agencies be established. One response

suggested that relevant information from multi-agency risk assessment conferences be recorded on NHS systems so that it is available to staff working with that person.

Data Protection Impact Assessment

It was recommended that Scottish Government conduct a Data Protection Impact Assessment on any future policy proposals relating to multi-agency working for victims of domestic abuse, and that relevant agencies also conduct these on local arrangements.

Consultation with ICO

The Information Commissioner's Office recommended that:

'If the Scottish Government produces any statutory guidance relating to the sharing of personal data within the MARAC scheme, it must consult the ICO during the development of that guidance. All guidance relating to data-sharing should ultimately be made compliant with the forthcoming ICO Code of Practice on Data Sharing.'

– Information Commissioner's Office

Question 7: Statutory Footing

The seventh and final question in this consultation asked:

Do you think that multi-agency arrangements for protecting victims of domestic abuse should be placed on a statutory footing?

In total, 46 of the 69 responses to this consultation were in favour of placing multi-agency arrangements for protecting victims of domestic abuse on a statutory footing (67%). 12 of the 69 responses were against this proposal (17%), and 11 declined to respond either way (16%).

All the responses that declined to answer came from organisations. Organisations represented 83% of those that were against the proposal, and 65% of those who were in favour. 9 of the 10 organisations which opposed the proposal were either a Women's Aid or a Violence Against Women Partnership. However, there were also several of each of these types of organisation who were in favour of the proposal.

Comments in response to this question outlined a number of reasons for both supporting and opposing the proposal to place these arrangements on a statutory footing. Some respondents also gave reasons for which they felt unable to answer definitively. These various points are discussed below.

Finally, some respondents also gave comments on which particular aspects of multi-agency arrangements for protecting victims of domestic abuse they thought should be placed on a statutory footing. These comments are summarised at the end of this section.

1. Reasons given in opposition to placing arrangements on a statutory footing

Lack of evidence

Some respondents felt that there was insufficient evidence to support placing these arrangements on a statutory footing. For example, it was suggested that the evidence on the effectiveness of risk assessment tools is quite new and inconclusive. One respondent also highlighted UK research which has found that specialist domestic abuse services and IDAAs rather than MARACs tend to have the most impact in promoting victims' safety. It was also argued that there is no evidence that placing these arrangements on a statutory footing would address existing problems with the process.

Wrong time

It was also suggested that it is not currently the right time to place these arrangements on a statutory footing, since new legislation around domestic abuse is still being put into practice and agencies are responding to these changes.

May jeopardise collaborative working

A number of Women's Aid organisations raised concerns that placing these arrangements on a statutory footing may result in statutory agencies taking the lead in this work, therefore side-lining the contributions of third sector organisations (including those specialising in support for victims of domestic abuse) and jeopardising current collaborative partnership working.

Increased pressure on resources

There was some concern that placing these arrangements on a statutory footing might be challenging without allocation of sufficient additional resources.

Two-tier response

Some respondents were concerned that placing these arrangements on a statutory footing would lead to an increase in referrals and, subsequently, resources being focused on those deemed to be at highest risk to the detriment of those who fall below this threshold. It was suggested that training on violence against women issues and appropriate intervention should also be made statutory, and that resources should be committed to early intervention and support for all victims of domestic abuse as well as for those at highest risk.

May be too prescriptive

Some respondents felt that a statutory approach may be too prescriptive, hampering the use of professional judgement, local knowledge and a case-by-case approach, and potentially leading to increased risk for some victims. There was concern that a statutory footing could lead to victims having less say in the support they are given and potential 'overprotection', such as for those with learning disabilities. It was argued that often women self-refer to services such as health services and specialist domestic abuse services because they know that this will be confidential, and that a statutory footing might jeopardise this. Some responses also highlighted a need for these arrangements to be able to adapt to new evidence and understanding that emerges about what works.

Better alternatives

Several respondents suggested that there are better alternatives which could improve multi-agency working for victims of domestic abuse, such as:

- Additional authority
- Additional resources, including funded training and a national funding model to ensure consistent funding across local authorities

- A duty for statutory services to participate and contribute in this multi-agency working
- Systems to monitor the work happening in local areas, and its effectiveness
- Placing Violence Against Women Partnerships on a statutory footing
- Promote national consistency and strategic integration
- Production of guidance, protocols and good practice examples.

2. Reasons given in support of placing arrangements on a statutory footing

Proven model

In contrast to responses which suggested that there is insufficient evidence to support placing these arrangements on a statutory footing, others said that research has proven this form of multi-agency working to be effective in improving outcomes for victims of domestic abuse.

Would improve commitment from partners

Many respondents felt that placing these arrangements on a statutory footing would lead to improved commitment from partners, including in terms of training, conducting research, sharing information, providing IDAA support, attending meetings and committing resources. It was also felt that this would improve victims' trust and confidence that ongoing support will be delivered. It was suggested that this improved commitment would largely stem from a sense that arrangements would have a higher status with a statutory footing.

Would improve effectiveness

Responses suggested that a statutory footing would improve the effectiveness of multi-agency arrangements for victims of domestic abuse, including in terms of earlier intervention, clearer processes, more coordinated responses (which address not only the full range of needs of the victim, but link in to those of their wider family), and reduced opportunities for abusers to 'work the system' to regain contact.

Would improve consistency

There was also a strong sense among responses that a statutory footing would improve the consistency of responses to domestic abuse across Scotland. It was suggested that this consistency is unlikely to be realised without legislation.

Greater accountability

It was suggested that placing these multi-agency arrangements on a statutory footing would provide a more transparent governance structure, clarify agencies' responsibilities and increase accountability among partners. It may also assure victims that their voices and needs are taken seriously.

Funding and sustainability

Several respondents thought that a statutory footing would help ensure sustained and nationally consistent funding and resourcing for this work, especially in a 'climate of reducing resources'. One response voiced concerns that without a statutory footing, MARACs may cease in some areas. Some responses referenced SafeLives' cost-benefit analysis which indicated that every £1 spent on MARAC saves £6 of public money.

Would address information sharing concerns

Some respondents felt that placing these arrangements on a statutory footing would provide better legal grounding for sharing information, and address concerns in this respect. Section 36(4) of the Data Protection Act 2018 was again highlighted: 'Personal data collected for any of the law enforcement purposes may not be processed for a purpose that is not a law enforcement purpose unless the processing is authorised by law.'

Support ratification of the Istanbul Convention

It was noted that placing these arrangements on a statutory footing would support ratification of the Istanbul Convention.

Alignment with other multi-agency public protection & risk management models

Many responses suggested that placing multi-agency arrangements for protecting victims of domestic abuse on a statutory footing would bring them in line with other multi-agency public protection and risk management models, such as Child Protection, Adult Support and Protection, and MAPPA. It was felt that this would lead to support for victims of domestic abuse being seen as of equal importance, and that it would also promote integration of the different arrangements. It was specifically suggested that a similar approach as that taken for MAPPA could be used for domestic abuse arrangements.

3. Reasons for which respondents felt unable to answer

In some cases, respondents appeared not to answer the closed question here because they had gathered input from a variety of other individuals or organisations to feed into their response, and those that they had consulted were split on this question.

A number of other specific reasons for which some respondents felt it was difficult to answer this question were given. These included:

More information needed

Some respondents felt that they could not answer this question without a clearer definition of 'statutory' and more detail on what a statutory footing would entail.

More research and discussion required

It was suggested that further research is required into the effectiveness (including the cost effectiveness) of multi-agency arrangements for protecting victims of domestic abuse, and how victims can best be supported in the long term. Further discussion was also proposed on the intended purpose of any legislation, and whether those aims would best be met through legislative or community approaches (or both).

Some respondents also suggested alternative ways forward. The ICO reiterated the Scottish Government's duty to consult with them before any legislation is taken forwards, while another respondent felt that the proposals in the consultation, including this one, should only be taken forward after a national referendum in which the majority of the Scottish population approved the proposals.

4. Which aspects of multi-agency arrangements should be statutory

Respondents variously indicated that the following 5 areas of multi-agency arrangements for protecting victims of domestic abuse should be placed on a statutory footing:

1. Training

2. Guidance

3. Information sharing

It was suggested that a statutory obligation to share information related to domestic abuse cases is applied to both public and third sector partner organisations.

4. MARACs

There were proposals for a duty for each local authority to hold multi-agency risk assessment conferences, and for partners to participate.

5. A national body

One individual suggested a single body with 'statutory remit for training, policy development and national implementation' is either created, or that this remit is taken on by an existing organisation.

Annex A: Glossary

DASH

Domestic Abuse, Stalking and Honour-Based Risk Identification Checklist – one type of risk checklist for the identification of cases of domestic abuse, stalking and ‘honour-based’ violence. It is primarily intended for professionals – both specialist domestic abuse workers and other professionals working for universal services.

IDAA

Independent Domestic Abuse Advocate – a single specialist professional who works with a victim to develop a trusting relationship and who can help with everything they need to become safe. Since they work with the highest risk cases, IDAAs are most effective as part of an IDAA service and within a multi-agency framework. The IDAA’s role in all multi-agency settings is to keep the client’s perspective and safety at the centre of proceedings. This creates the context in which other needs can be met.

MAPPA

Multi-Agency Public Protection Arrangements

MATAC

Multi-Agency Tasking and Coordinating – a Police Scotland initiative to identify and manage the most harmful domestic abuse perpetrators.

MARAC

Multi-Agency Risk Assessment Conference – a regular, local, confidential meeting to discuss how to help victims and survivors at high risk of being murdered or seriously harmed. A domestic abuse specialist (IDAA), police, children’s social services, health and other relevant agencies sit round the same table. They talk about the circumstances faced by the victim or survivor, perpetrator and their children, and share information. This information then informs an action plan which all agencies contribute to, with the IDAA acting as a vocal advocate for the victim’s wishes and needs. The principal endeavour of the meeting is to help the victim become sustainably safe.

Annex B: Organisational Respondents

52 organisations responded to the consultation. Those who gave permission for their names to be published are listed below:

Domestic violence organisations

ASSIST

Dundee Women's Aid

East Ayrshire Women's Aid

Edinburgh Women's Aid

Fife Women's Aid

Inverclyde MARAC Governance Group

Perthshire Women's Aid

SafeLives

Scottish Women's Aid

Shetland Domestic Abuse Partnership

Shetland Women's Aid

Women's Aid South Lanarkshire and East Renfrewshire

Violence Against Women Partnerships

Angus Violence Against Women Partnership

Dundee VAW Partnership

East Ayrshire Violence Against Women Partnership

East Renfrewshire Violence Against Women Partnership

Fife Violence Against Women Partnership

Glasgow Violence Against Women Partnership

Highland Violence Against Women Partnership

North Lanarkshire Violence Against Women Working Group

Perth & Kinross Violence Against Women Partnership

Renfrewshire Gender Based Violence Strategy Group

South Ayrshire Violence Against Women Partnership

Health and social care

Aberdeen City Health and Social Care Partnership
Argyll and Bute Health and Social Care Partnership
Health Visiting Team, NHS Tayside
NHS Ayrshire and Arran
NHS Greater Glasgow and Clyde
Royal College of Midwives
Scottish Children's Reporter Administration

Equalities organisations

LGBT Youth Scotland
Scottish Women's Rights Centre
Stonewall Scotland
The Scottish Commission for Learning Disability

Local councils

Scottish Borders Council
Stirling Council

Animal welfare

Scottish SPCA

Information & data

Information Commissioner's Office

Legal

The Law Society of Scotland

Online safety

Lemon Tree Consulting Ltd

Policing

Police Scotland

Public Protection

Dumfries and Galloway Public Protection Committee

Relationships

Relationships Scotland



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This document is also available from our website at www.gov.scot.

ISBN: 978-1-83960-436-2

The Scottish Government
St Andrew's House
Edinburgh
EH1 3DG

Produced for
the Scottish Government
by APS Group Scotland
PPDAS675614 (12/19)
Published by
the Scottish Government,
December 2019



Social Research series
ISSN 2045-6964
ISBN 978-1-83960-436-2

Web Publication
www.gov.scot/socialresearch

PPDAS675614 (12/19)