



East Lothian and Midlothian Public Protection Committee

**Multi-agency Risk Assessment Conference (Marac)
Operating Protocol**

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1. Introduction and definitions

East Lothian and Midlothian Public Protection arrangements include agreement to operate Multi Agency Risk Assessment Conference (Marac) in East Lothian and Midlothian which is the highest risk element of our approach to improving the safety of survivors of domestic abuse and their families.

Marac is a key part of our delivery of the Scottish Government and COSLA's [Equally Safe Strategy](#):

- Priority 3: Interventions are early and effective, preventing violence and maximising the safety and wellbeing of women, children and young people.
- Priority 4: Men desist from all forms of violence against women and girls and perpetrators of such violence receive a robust and effective response.

This document sets out the operation of our Marac in accordance with the [10 Principles of an Effective Marac](#) and the [Toolkit for Marac in Scotland](#) from [SafeLives](#), which is recognised as the lead agency for domestic abuse risk assessment and the Marac model.

Whilst this protocol refers to 'victim' throughout, based on the language of Marac/SafeLives, our approach to Marac will recognise that victims are also survivors and will seek to strengthen their resilience within safety planning.

What is a Multi-Agency Risk Assessment Conference¹?

- A Marac is a multi-agency meeting where information is shared about the victims who are at the highest risk of serious harm or murder due to domestic abuse. The meeting provides a safe environment for agencies to share relevant and proportionate information about current risk, after which the Chair will summarise risks and ask agencies to volunteer actions to reduce risk and increase safety.
- Each case should seek to be completed within 20 minutes.
- The primary focus of the Marac is to safeguard the adult victim and their children. The Marac will also make links with other processes/systems in relation to child protection, adult support and protection, criminal justice and the disruption of perpetrator behaviour.
- 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.
- The victim does not attend the Marac meeting but is represented by an independent Domestic Abuse Worker who speaks on their behalf. The Marac requires the understanding and participation of all identified key agencies who may be involved in supporting victims of domestic abuse.

What is Domestic Abuse?

'Domestic abuse is a pattern of controlling, coercive, threatening, degrading and/or violent behaviour, including sexual violence, by a partner or ex-partner. Domestic abuse is overwhelmingly experienced by women and perpetrated by men. It doesn't matter how old

¹ Adapted from [Marac Overview - Scotland 2019](#)

someone is, what race or ethnicity they are, what class they are, whether or not they are disabled, or whether they have children – anyone can be a victim of abuse.’ ([Scottish Women’s Aid](#))

‘Domestic abuse, also called "domestic violence" or "intimate partner violence", can be defined as a pattern of behaviour in any relationship that is used to gain or maintain power and control over an intimate partner. Abuse is physical, sexual, emotional, economic or psychological actions or threats of actions that influence another person. This includes any behaviours that frighten, intimidate, terrorize, manipulate, hurt, humiliate, blame, injure, or wound someone. Domestic abuse can happen to anyone of any race, age, sexual orientation, religion, or gender. It can occur within a range of relationships including couples who are married, living together or dating. Domestic violence affects people of all socioeconomic backgrounds and education levels.’ ([Covid 19 response, United Nations](#))

Coercive Control is at the centre of the Domestic Abuse (Scotland) Act (2018):
‘Domestic abuse isn’t always physical. Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish or frighten the victim. This controlling behaviour is designed to make the person dependent by isolating them from support, exploiting them, depriving them of independence and regulating their everyday behaviour.’ ([Scottish Women’s Aid](#))

The [Domestic Abuse \(Scotland\) Act \(2018\)](#) enables behaviours commonly known as coercive control to be included in this Section 1 Domestic Abuse offence. Under this Act, it is an offence for someone to engage in a course of behaviour which is abusive to their partner or ex-partner, and which is likely to cause the partner/ex-partner physical or psychological harm.

2. Purpose of the Marac Operating Protocol

The purpose of this Protocol is to:

- Establish accountability, responsibility and reporting structures for Marac;
- Outline the process for the Marac;
- Enhance existing safeguarding, public protection and information sharing protocols and arrangements, rather than replace them; and
- Support existing policies and procedures regarding multi-agency working on domestic abuse.

The principles of this Protocol will be applied fairly regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation (in accordance with the UK Equality Act 2010).

3. Aims of Marac

Our Marac aims to:

- Work with victims of domestic abuse to help keep them safer and respond to their needs.
- Manage perpetrators’ behaviour to reduce risk.

- Ensure that risk and support needs attached to family members or extended networks are identified.
- Maintain the safety and welfare of professionals.
- Make links with other protection processes (such as Child Protection, Adult Support and Protection, Multi-Agency Task and Coordination groups, Multi-Agency Public Protection Arrangements).

4. Marac partner agencies

The success of Marac is dependent on the full engagement and co-operation of each of the named partner agencies because this brings the benefit of multi-agency risk management and shared responsibility for creative problem solving. Our participating services are set out below.

We also accept Marac referrals and request professional support from other specialist agencies as appropriate to the needs of Marac cases (i.e., Specialist third sector organisations and Housing Associations).

Marac representatives need to be of an appropriate level of seniority or have delegated authority (e.g., Team Leader level), so that they can commit to actions on behalf of their agency, which in certain circumstances will involve the use of resources.

Marac representatives need to ensure that they have the protected time to prepare for and attend Marac. In the event that the named representative will be unable to attend, a depute representative should be identified to ensure all agencies are in attendance at the meeting. This is essential for the effective management of risk and safety planning.

Agencies are asked to ensure their representatives are familiar with:

- the Marac Operating Protocol;
- the Marac Representatives Toolkit; and
- their own Marac Agency Representatives and Internal Guidance Form (which should be reviewed, updated and provided to the Marac Co-ordinator on no less than an annual basis).

Representatives are also required to attend SafeLives Marac training as well as local Risk Assessment and Referring to Marac training, provided by EMPPC.

East Lothian Marac Representatives	
Job Title	Agency
Service Manager, East Lothian	Women's Aid East and Midlothian
Team Leader, Children's Services	East Lothian Council
Team Leader, Anti-Social Behaviour	East Lothian Council
Team Leader, Housing Services	East Lothian Council
Team Leader, Rent Income	East Lothian Council
Education Support Officer (Child & Public Protection), Education	East Lothian Council
Team Leader, Justice	East Lothian Health and Social Care Partnership (HSCP)
Team Leader, Adult Services	East Lothian HSCP
Health Visitor	East Lothian HSCP
Family Nurse Supervisor Team B	East Lothian HSCP
Service Manager, Mental Health & Substance Misuse	East Lothian HSCP
Charge Midwife	East Lothian HSCP
Domestic Abuse Support Worker	EMPPO
Domestic Abuse Risk Assessor, Domestic Abuse Investigation Unit	Police Scotland
Local Area Liaison Officer	Scottish Fire and Rescue Service
Court Advocacy Worker	Edinburgh Domestic Abuse Court Service (EDDACS)
Team Leader, School Nursing	NHS Lothian

Midlothian Marac Representatives	
Job Title	Agency
Service Manager, Midlothian	Women's Aid East and Midlothian
Service Manager, Children Services	Midlothian Council
Team Leader, Adult Support and Protection	Midlothian Council
Team Leader, Housing Services	Midlothian Council
Team Leader, Social Work (also covers Education)	Midlothian Council
Team Leader, Justice	Midlothian Health and Social Care Partnership (HSCP)
Team Manager, Health Visiting	Midlothian HSCP
Clinical Service Development Manager, Mental Health & Substance Misuse	Midlothian HSCP
Team Leader, Community Midwives	Midlothian HSCP
Domestic Abuse Support Worker	EMPPPO
Domestic Abuse Risk Assessor, Domestic Abuse Investigation Unit	Police Scotland
Local Area Liaison Officer	Scottish Fire and Rescue Service
Court Advocacy Worker	Edinburgh Domestic Abuse Court Service (EDDACS)
Team Leader, School Nursing	NHS Lothian

5. Governance and performance management

The principal line of accountability for Marac is the East Lothian and Midlothian Public Protection Committee (EMPPC) through the Marac Steering Group. The role of the Marac Steering Group is to provide oversight and governance to Marac. It will review and monitor performance information and partner commitment to successful delivery of Marac. The VAWG Delivery sub-group reviews Marac performance and improvement actions at each quarterly meeting.

6. Marac Process

6.1 Cycle and co-ordination

Calendar days	Action	Owner
8 days before	Last date to submit referrals to Marac Co-ordinator (5pm)	All agencies
7 days before	Send agenda (midday)	Marac Co-ordinator
Day of	Marac Meeting	
Same day	Action log	Marac Co-ordinator
21 days after	Latest date for agencies to report update on action completion	All agencies

6.2 Identification

The identification of cases for Marac should be informed by a formal risk assessment; either:

- Domestic Abuse, Stalking and Honour Based Violence (DASH); or
- The Police Domestic Abuse Questionnaire (DAQ).
- Notwithstanding the above, a case can be identified using professional judgement.
- Many victims will never report abuse to police or seek support from a specialist agency and almost all will have contact with universal and mainstream services (e.g., a health professional, housing officer, school). It is essential that domestic abuse is seen as 'everyone's business' and that agencies know that anyone can refer to Marac, informed by the risk assessments identified above.
- As soon as a professional identifies that someone should be referred to Marac, the referral should be made at the earliest opportunity, with no delay.

6.3 Marac referral criteria

Both the victim and perpetrator must be aged 16 and over to meet the Marac referral threshold. Referral to Marac is based on a comprehensive assessment of the perceived risk of further harm to a survivor of domestic abuse. The referral criteria are as recommended by SafeLives:

- **Visible High Risk:** This is the number of positive indicators in the DASH Risk Checklist, which will be cases scoring 14+ indicators
- **Potential Escalation:** One of the ways to identify escalation is the number of police calls to the client in the previous 12 months. This would include cases with less than 14 indicators on the Risk Checklist, but where the number of Police incidents is three domestic abuse occurrences within a 12-month period.
- **Professional Judgement:** If a case does not meet any of the above criteria but the professional involved with the victim considers that there are serious concerns about a client's safety, they should refer the case to Marac. This can also be based on the client's own perceptions of their risk. This may feature more in cases where there are cultural barriers to disclosure, honour-based violence cases and extreme fear by the client. The rationale for any referral using this criterion must be recorded by the professional on the referral form.
- **Repeat Marac referral:** In accordance with the [Safe Lives - Repeat Cases](#) if a case involving a victim and perpetrator has already been reviewed at Marac it can be referred again if there has been ANY instance of abuse between the same victim and perpetrator(s) within 12 months of the last referral to Marac. The individual act of abuse does not need to be 'criminal', violent or threatening but should be viewed within the context of a pattern of coercive and controlling behaviour. This might include but is not limited to:
 - Unwanted direct or indirect contact from the perpetrator and/or their friends or family
 - A breach of police or court bail conditions
 - A breach of any civil court order between the victim and perpetrator
 - Any dispute between the victim and perpetrator(s) including over child contact, property, divorce/separation proceedings, etc.
 - These events could be disclosed to any service or agency including, but not exclusive to, health care practitioners, (including mental health), domestic abuse specialists, police, substance misuse services, housing providers, etc.

6.4 Information sharing and consent

- Information discussed by the agency representatives at the Marac meeting is strictly confidential and must not be disclosed to third parties who have not signed up to the Marac Operating Protocol, without the agreement of the partners of the meeting. It should focus on domestic abuse and child protection concerns and a clear distinction should be made between fact and professional opinion.
- When sharing information in any circumstances, all agencies need to demonstrate that they are compliant with the General Data Protection Regulations (GDPR) and accompanying Data Protection Act 2018 (DPA) and must have appropriate policies in place.
- It is best practice to obtain client consent before making a referral to Marac, however this is not always safe or possible. Consent should not be sought if the information will be shared regardless. Information sharing without consent is allowed where this is necessary to protect someone from serious harm, the justification for which is:
 - By virtue of Public Task (the task is carried out in the public interest or in the exercise of official authority); and/or
 - Vital Interests (the processing is necessary to protect someone from serious harm or death).
- All agencies need to demonstrate that they are compliant with the General Data Protection Regulations (GDPR) and accompanying Data Protection Act 2018 (DPA) and must have appropriate policies in place. Each agency representative should seek advice and guidance from their manager or designated officer for public protection if they have concerns about sharing information without consent.
- Practitioners should refer to [Information Sharing Guidance 2019 - Scotland version.pdf \(safelives.org.uk\)](#) for specific guidance about sharing information for Marac. Further information in relation to consent can also be found in on the [Information Commissioner's website](#).

6.5 Making a referral to Marac

- Each agency will complete the Marac referral form and send it to their agency Marac Representative for their approval as soon as possible after identification.²
- The agency Marac representative is responsible for submitting the referral by secure e-mail to MARAC@eastlothian.gov.uk at the earliest opportunity and no later than 8 calendar days prior to the Marac meeting.
- The referring agency will present the case at Marac, unless there is a local specialist service which has taken on the Lead Role, they will present the case.
- The Marac Co-ordinator will follow [Safelives Marac to Marac process](#) for transfers from another Marac, obtaining all necessary documentation.
- The Marac Co-ordinator will remind Marac representatives of the cut-off dates for receiving referrals 21 calendar days prior to the meeting.

² For a copy of the data protection compliant Marac referral form email: marac@eastlothian.gov.uk

6.6 Marac case list/agenda

- The Marac Co-ordinator will send the Marac meeting Agenda/case list to all agency representatives 7 calendar days before the meeting along with the Marac Research form to assist agencies in their research on each case.
- Cases with pregnancy will be placed first on the agenda, followed by cases with children. Midwifery services and children's services' representatives can leave after those cases are heard.
- Each Marac representative is responsible for the secure storage and disposal of any documentation associated with Marac that they handle.

6.7 Actions before Marac and post Marac

- The Marac Co-ordinator accepts the Marac referrals and checks to ensure that they meet the criteria, liaising with the main referring agencies to ensure all details are complete. Only referrals that meet the criteria set out will be accepted for Marac.
- The Marac Co-ordinator sends all Marac referrals with children involved to the relevant Children's Services Contact Centre for assessment and consideration of an Inter-Agency Referral Discussion.
- Every victim referred to Marac is entitled to support from a specialist VAWG agency. At the point of referral if there is no specialist VAWG service working with the victim, the Marac Co-ordinator will allocate the case to one of the specialist services if the victim has given consent. The specialist agency will seek to make contact with the victim and referring agency prior to the Marac meeting.
- Where the Marac Co-ordinator is aware of a victim's involvement with external services which are not core Marac partners, they will invite these services to the meeting.
- All representatives will seek to obtain information about a victim's or a perpetrator's involvement with their area of service when they are from a different local authority area to bring essential information to the meeting.
- All representatives will use the Marac Research Form to guide the checks that are required from agency systems for each case discussion at Marac.
- When undertaking research in preparation for Marac, the agency representative should **not** wait until the Marac meeting before progressing any immediate actions or making any referrals to other agencies/processes that are required to improve safety for the victim, child or adult associated with the victim or perpetrator (e.g., Inter-agency Referral Discussion for Child Protection or Adult Protection).
- The referring agency or allocated VAWG service should inform the victim that the case is being reviewed at Marac.
- All agencies will complete their agreed actions from the Marac meeting as soon as possible and are required to report on the completion of their actions on the meeting action log to the Marac Co-ordinator no later than 21 days following the Marac meeting.
- Representatives should update case files on their own recording systems with actions and updates/outcomes.

6.8 Marac meeting - structure

- Marac meetings are held on a Wednesday (Midlothian) and Thursday (East Lothian) morning every four weeks, scheduled between 09:15 – 13:15 hours. Each case

should be completed within 20 minutes. The maximum number of cases when meetings take place over MS Teams is ten. Additional meetings may be convened as required, depending on the number of referrals.

- It should only be in exceptional circumstances that an agency is not represented at Marac. In such an event, the agency representative should send their case research reports to the Marac Co-ordinator. After the meeting they should check for proposed actions for their service on the Action Log.
- The Marac meeting will be Chaired by a representative from one of the partner agencies in East Lothian or Midlothian, who is skilled and trained for the task at hand. The meeting agenda is based on the SafeLives Marac process.
- Each meeting will follow a standard agenda:
 1. Meeting details and introductions;
 2. Purpose of the meeting;
 3. Confidentiality statement;
 4. The SafeLives process for case discussion;
 5. Actions incomplete from the previous meeting;
 6. Case list;
 7. Evaluation of cases;
 8. Any other business; and
 9. Date of next meeting.

6.9 Marac meeting – case discussion

Each case discussion is structured as follows:

- The referring agency or lead agency (if they have updated information), succinctly presents the case giving: a brief outline of recent incidents (last three months), risks to all concerned, protective factors (strengths), safety actions in place and the victim's priorities from Marac. This summary should last no longer than three minutes.
- The lead agency working with the victim provides additional information relevant to the discussion, including any other protection processes in place (e.g., Child Protection Planning Meetings or Adult Support and Protection Case Conferences).
- The Chair asks each agency, in the standard sequence, to offer relevant and appropriate information³.
- The Chair sums up the risks, protective factors, safety actions in place and the victim's priorities and asks the meeting if they have anything to add.
- The Chair asks each agency to offer creative actions to reduce the remaining risks and meet the victim's priorities.
- The Chair checks that all the risks and the victim's priorities have been addressed.
- The Marac Co-ordinator notes discussion and reads out the agreed actions after each case, checking for clarity.

6.10 The role of the Marac Chair

- The role of the Marac Chair is to establish a process that addresses the safety of the highest risk victims of domestic abuse in the area in partnership with other agencies.

³ As per our local Marac Chair's Pack

- The Chair is not responsible for the actions of each attendee, but equally must use their professional authority in the role to establish an ethos of accountability and responsibility among partner agencies.
- The Chair is responsible for ensuring that all aspects of the agenda are covered in sequence, including the standard sequence in which agency representatives are asked to contribute.
- The ethos of Marac is to remove responsibility for addressing high-risk cases from a single agency, to adopting a shared approach among all relevant agencies for risk assessment and safety planning.
- The Chair has a key role in encouraging participation from all agencies to identify the risks and needs of victim, children and anyone associated with them and to create a proactive safety plan for all concerned and to manage the perpetrator's behaviour.
- The Chair is responsible for ensuring each case is discussed fully, the risks are identified, the victim's priorities are understood and that the safety actions effectively address these.
- The Chair will read the confidentiality statement, reminding all attendees of the confidentiality protocols in place regarding shared information that is about to be disclosed. Any attendee not included in the list of 'core' agencies in this protocol will be asked to confirm their adherence to the confidentiality agreement, which will be noted in the meeting record.

6.11 The role of the Marac Co-ordinator

- The Marac Co-ordinator will support the Marac Chair, by ensuring that the appropriate documentation is available for the Marac meeting within the requisite timescales and guide the Chair in ensuring the standard processes for Marac are followed.
- The Marac Co-ordinator will take a record of each meeting and will place a record of the case discussion and actions on the victim's record on the Marac database (OASIS), and actions on the victim's record on East Lothian or Midlothian's Social Work client recording system (MOSAIC).
- The Marac Co-ordinator will email the action log from the meeting to all agency representatives by no later than the day following the Marac meeting.
- The Marac Co-ordinator will track and monitor completion of actions by agency representatives and will report on these to the next Marac meeting. The status of completed actions will be noted on the agenda, which will serve as a reminder to agencies of the need to ensure that all actions are completed within the 21- day timescale.

6.12 Action planning

- The strength of the Marac meeting is its collaborative and dynamic approach to action planning. Agencies should offer pro-active actions to address the specific needs of the victim. Agency representatives should also consider not just what their single agency can do to address risks, but how they can jointly work together to develop a creative, multi-agency action plan.
- Actions should be SMART, designed to prioritise agency resources to Marac cases (i.e., actions should be beyond 'usual' business, and volunteered by the range of agencies).

6.13 Marac to Marac transfers between local authority areas

Where it is known that the victim is no longer living in East Lothian or Midlothian and the risk is assessed as high, the Marac Co-ordinator should alert the Chair to the need for an action to transfer the case to the Marac or Domestic Abuse Service in the victim's new local authority.

6.14 Managing repeat cases and cases where action plans are unable to sufficiently address risk

- When a case is re-referred within 12 months, the referring agency will present a brief update on the case since the last Marac, identifying how the case meets the repeat threshold and sharing what action they have taken to reduce risk.
- The Marac Co-ordinator will provide a record of the previous actions plan(s) and status of completion of actions to the Chair as part of the documentation for the meeting. Actions not previously completed should be reviewed in light of new information. Risks should then be summarised, and agency representatives asked to identify and contribute further action to reduce current risks.
- Where the Marac meeting is unable to identify or agree a sufficient and effective safety plan to address the risks, one of the agency representatives should take an action to make a referral to the relevant Social Care Contact Centre. This will trigger a screening decision to progress a Duty to Inquire assessment, which will determine whether the victim should be supported by Adult Protection or care management processes. If the outcome of the Duty to Inquire is that the adult is not considered to meet the 3-point-test as an adult at risk of harm, the EMPPC Escalating Concerns Procedure can be instigated. The Marac Co-ordinator should prompt the Chair of this option.
- When there are more than three re-referrals within 12 months, the Marac meeting will consider whether a professionals' meeting would provide solutions to the challenges, particularly around complex needs, and which service should call and lead that meeting.
- The Marac meeting will consider if it may be safe, appropriate and necessary to hold a joint or professionals meeting with the victim or perpetrator present. Decisions should be made on a case-by-case basis and by all relevant agencies with a focus on the safety of all.
- Any case that has been referred more than three times within 12 months will be audited to identify themes and learning about the effectiveness of processes and practice including Marac action planning.

7. Equality

All member agencies have a responsibility to adhere to the UK Equality Act 2010.

The Marac Co-ordinator collates information on all Marac cases to monitor representation across the relevant protected characteristics for Marac in relation to the local and national demographic in order to identify under and over representation and inform action. This information is reported to the Marac Steering Group and to SafeLives⁴.

⁴ The UK Equality Act identifies nine protected characteristics. For Marac we monitor age; disability; sexual orientation, race (ethnicity) and sex, to align representation to local demographics. We do not monitor pregnancy, marital status/civil partnership, gender reassignment and religion or belief for reporting purposes.

The Marac Co-ordinator can direct agency representatives to the specialist services for cases identified as being from diverse communities.

An Integrated Impact Assessment will be conducted on Marac strategic reports and protocols to identify the needs of the local population based on all nine protected characteristics identified in the UK Equality Act 2010 and poor socio-economic status as defined by the Fairer Scotland Duty.

8. Evaluation and reporting

Marac service and performance data are collated by the Marac Co-ordinator and is reported quarterly to the East Lothian and Midlothian Public Protection Committee and associated sub-groups. Data is provided quarterly to SafeLives, which contributes to their annual overview of Marac in Scotland.

SafeLives undertakes an observation of each of our Marac every two years and the findings contribute to our improvement planning.

Marac is included in the annual self-evaluation within the East Lothian and Midlothian Equally Safe Quality Standards return to the Improvement Service.

The operation of Marac in East Lothian and Midlothian will routinely be self-evaluated, the findings and improvement actions flowing from which will be considered and progressed by the Marac Steering Group.

9. Record Keeping and Breaches

Any breach of this protocol may have a significant impact in the safety of a high-risk service user therefore it is important that all agencies familiarise themselves with this Protocol and the related Information Sharing Agreement.

All agency representatives will ensure that they keep any information associated with Marac secure, in line with their own agency's recording protocols. The reporting of any breach of information must be handled in line with the agency's data handling protocols.

10. Review

This protocol will be reviewed every two years and changed to meet the needs of the Marac function in consultation with Marac representatives, the Marac Steering Group and the Violence Against Women and Girls Delivery sub-group.

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Date	Reviewed 08/07/2024
Review date	2026