

STANDING TOGETHER

against domestic abuse



M O P A C

MAYOR OF LONDON
OFFICE FOR POLICING AND CRIME

What does 'Good' look like? Pan-London MARAC Review

Executive Summary

Authors: Katie London (ST), Dr Olumide Adisa (UOS), Joana Ferreira (UOS), Dr Katherine Allen (UOS)

Contents

Glossary of terms.....	3
Disclaimer	4
Acknowledgments.....	5
Executive Summary	6
<i>Background to the review</i>	6
<i>Aims and Objectives of the review</i>	6
<i>What we did?</i>	7
<i>Summary and key findings</i>	8
<i>Limitations summary</i>	18
<i>Recommendations</i>	18

Glossary of terms

AFH	Adult Family Homicides
AFV	Adult Family Violence
By and For services	A service whose staff team reflect their client group and is shaped out of the experiences and voices of their clients.
CCG	Clinical Commissioning Group
CCR	Coordinated Community Response
DA	Domestic Abuse
DAHA	Domestic Abuse Housing Alliance
DASH RIC	Domestic Abuse Stalking and Honour Based Violence Risk Identification Checklist
DHR	Domestic Homicide Review
DVPN/DVPO	Domestic Violence Protection Orders/Domestic Violence Protection Notices
FGM	Female Genital Mutilation
IDVA	Independent Domestic Violence Adviser (or Advocate)
IGVA	Independent Gender-based Violence Adviser (or Advocate)
LGBTQ+	Lesbian, Gay, Bisexual, Transgender, Queer
MASH	Multi Agency Safeguarding Hubs
MARAC	Multi Agency Risk Assessment Conference
RIC	Risk Identification Checklist
VCS	Voluntary and Community Sector
VAWG	Violence Against Women and Girls
V/S	Victim / Survivor
SafeLives 10 Principles	SafeLives set out 10 principles that underpin an effective MARAC

Disclaimer

While every effort has been made to ensure that the information contained in this report is accurate and up to date, the authors cannot accept legal responsibility or liability for any actions taken by readers as a result of any errors or omissions.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form, or by any means, electronic, mechanical, photocopying, recording or otherwise, without prior permission of the publishers.

Acknowledgments

We are indebted to all the professionals who took part in this review, in particular the London MARAC Coordinators, VAWG leads and MARAC Chairs.

We would like to thank the following people who supported the project team in this review: Gudrun Burnet, Hannah Candee, Olga Trilla Rodriguez, consultant Vivien Bickham, MOPAC, Deputy Mayor for Policing & Crime, City Hall, SafeLives and peer reviewer Professor Amanda Robinson.

Lastly, we give thanks to those living with and recovering from domestic abuse.

In memory of those we have lost due to domestic abuse either through murder or suicide

Executive Summary

Background to the review

The Mayor's Office for Policing and Crime (MOPAC) commissioned a review of London MARACs seeking to obtain an overview of the following:

- The performance of London MARACs and the partner agencies involved in the MARAC to understand their effectiveness and determine what 'good' looks like;
- How they are resourced, and any limitations boroughs and partners face in delivering a good service;
- The relationship with wider Voluntary and Community Sector (VCS) organisations;
- How MARACs and partners assess and manage perpetrators whilst balancing the requirement to keep victims safe;
- How effective communication is between children's safeguarding agencies and DA practitioners;
- Children's safeguarding agencies and DA practitioners including identifying child to parent violence work and how they respond in this dynamic;
- Additional research required on adult family violence (AFV).

The review was commissioned to Standing Together Against Domestic Abuse (ST) in collaboration with the Centre for Abuse Research (CARE) at the University of Suffolk (UOS). The project started in July 2021 and research concluded in September 2021.

Aims and Objectives of the review

The review sought to consider the SafeLives 10 principles of an effective MARAC across London. The principles are as follows:

1. Identification: That professionals recognise domestic abuse, risk assess and identify high-risk cases
2. Referral to MARAC: That professionals recognise domestic abuse; risk assess and identify high-risk cases based on the referral criteria for MARAC
3. Multi-agency engagement: That agencies that can contribute to safeguarding high-risk survivors, associated children and vulnerable adults attend the MARAC
4. Independent representation and support for survivors: That all high-risk survivors are offered the support of an IDVA; their views and needs are represented at MARAC
5. Information sharing: That MARAC representatives share relevant, proportionate, and risk-focused information
6. Action planning: That multiagency action plans address the risk to the survivor, safeguard children and adults at risk, and manage perpetrator behaviour
7. Number of cases: That the MARAC hears the recommended volume of cases
8. Equality: That the MARAC addresses the unique needs of survivors with protected characteristics
9. Operational support: That there is sufficient support and resources to support effective functioning of the MARAC

10. Governance: That there is effective strategic support and leadership of the MARAC and IDVA/specialist DA response, and agencies work together effectively

What we did?

This review adopted a mixed method approach, combining surveys, interviews, and desktop reviews.

A desktop review and observation was conducted among London MARACs, focusing on reviewing MARAC operating protocols and/or procedures, referral forms; anonymised MARAC minutes; performance data between 2018 and June 2021; and observation of one MARAC meeting by the project team¹. Due to the time constraints of the project, it was not possible to carry out a desktop review and observation for all thirty-two boroughs. A review tool was created to consider the MARACs in line with the SafeLives 10 Principles of an effective MARAC. The request for participation in this activity was sent to all London MARAC Coordinators via email to garner interest and volunteers. The initial email specified ten MARACs that had been selected across different areas of London and with different frequencies of meetings to get a representative sample. **Of these ten, five consented to take part in this desktop review and observations. A further four volunteered to take part and two agreed to observations of their meetings resulting in a convenience sample. Sixteen MARACs gave consent for the review to access the SafeLives performance data.**

Two online surveys were developed for professionals involved with MARACs across 32 London boroughs; one designed for MARAC Chairs, Coordinators, and partner agencies and one for professionals from specialist services. Links to the surveys were disseminated via professional networks and MOPAC themselves to ensure as many professionals as possible had the opportunity to participate. **Overall, the two surveys attracted 257 participants.**

Twenty-nine semi-structured interviews were conducted, via Microsoft Teams, with MARAC coordinators and chairs across different boroughs in London. An interview schedule was developed collaboratively by the researchers, with a focus on addressing the aims of this review. That said, interview questions aimed at exploring participants' views of the challenges and gaps faced by MARAC, their perceptions of its performance and effectiveness, and their experiences within their role at MARAC.

¹ *The observation time varied.*

Summary and key findings

This summary below has been linked specifically to the SafeLives Ten Principles, data sources and findings:

Principle/Finding	Data sources	Finding
<p>Principle 1 & 2: Identification & Referral to MARAC</p>	<p>Desktop review Surveys Interviews</p>	<p>Frequency of MARAC meetings varied across borough, both pre- and post-pandemic. In most cases, frequency of meetings was reflective of the caseload (e.g., high volume of referrals) and the need to keep partners engaged. The most common frequency of meetings was fortnightly, monthly, and weekly.</p> <p>Most participants from both surveys felt that their MARAC employed clear referral criteria and had a clear pathway for referrals. However, lack of uniformity and standardisation in MARAC delivery across boroughs (e.g., referral forms, MARAC frequency) was perceived to impose challenges in situations of ‘cross-borough’ intervention. The main MARAC referral criteria across London were: Visible High Risk (14+ ticks on SafeLives DASH-RIC); professional judgement; potential escalation; and repeat victimisation within a 12 month period. There are inconsistencies in how these criteria are applied by boroughs for the number of incidents associated with potential escalation. Furthermore, 19% of MARACs had additional criteria on their referral forms including honour-based abuse, forced marriage and child to parent violence. Further inconsistencies were found in the way that MARACs dealt with and processed MARAC transfers outside of the SafeLives recommendations with some areas not hearing them or having them as a mention only. Inconsistencies can lead to survivors being missed by the MARAC process.</p> <p>The need for uniform referral forms and procedures was put forward as a recommendation for improvement, to facilitate information sharing and engagement from partner agencies intervening in more than one borough.</p>

<p>Principle 3. Multi-agency engagement</p>	<p>Desktop review</p> <p>Surveys</p> <p>Interviews</p>	<p>MARACs who participated in the observation were noted to have an overall good attendance from a range of core agencies. Specialist DA/IDVA services, police, children’s social services and housing were identified as regular MARAC attendees by an overwhelming majority of survey participants. However, irregular attendance, and a lack of engagement and ownership, by some agencies – including “core agencies” such as probation, mental health and children’s social services – were described as major challenges. There was good practice seen in the observations around how to involve GPs and health partners who cannot attend the meeting as well as good examples of education involvement at MARAC. There were examples of how the input of registered social landlords (RSL) are linked to positive actions for survivors. There were inconsistencies noted in how housing agencies participated at MARAC as well as mental health and adult social care. It was seen across all research activities, that a lack of research and preparation is an ongoing issue for some agencies which not only limits the effectiveness of participation but has adverse impacts on the MARAC process. Other barriers to multi-agency working arose from difficulties in identifying, engaging, and communicating with the relevant people at partner agencies, as well as a lack of accountability or ‘ownership’ among some agencies. Lack of attendance from certain groups can have a negative impact on ensuring not only multiagency collaboration, but equally an intersectional approach to domestic abuse. It cannot be ignored, though, that this may be linked to the nature of representatives’ involvement with MARAC. Interviewees highlighted that MARAC was an ‘add-on’ or ‘side’ job, which meant representatives are overworked, at capacity, and not always necessarily prioritise MARAC.</p>
<p>Principle 4. Independent</p>	<p>Desktop review</p> <p>Surveys</p>	<p>There was a widespread belief that survivors’ voices should be placed at centre-stage within the MARAC, guiding action-planning and multi-</p>

<p>representation and support for survivors</p>	<p>Interviews</p>	<p>agency collaboration. Participants shared that survivors' voices were mostly represented through the specialist domestic abuse service, these being responsible for advocating for both what the survivor wants and needs for themselves and from the MARAC process. In the observations, all cases had been referred to a specialist domestic abuse service prior to the meeting who had made attempts to contact cases prior to the meeting. The survivor's voice and wishes were heard in most cases. However, difficulties arose when the survivor had either declined to engage, or the specialist domestic abuse service had not been successful in establishing contact.</p> <p>Participants highlighted the need for effective coordinating and chairing to ensure that information is presented efficiently, and that survivors' stories and experiences come through during the meeting. The importance of building relationships with VCS organisations was even more pertinent for those supporting survivors with protected characteristics. Not all MARACs were able to provide strong evidence on the participation with 'by and for' organisations (see principle 8).</p> <p>Specialist organisations were asked about the survivor's experience of MARAC and just under half felt that the survivor had a positive experience of MARAC. The responses evoke a mixed picture of survivors' experiences of MARAC; one where survivors' safety is at the forefront but where their voices may go unheard, and where the process revolves around the survivor but does not directly involve them. There was a call for a more structured collection of feedback from survivors on the impact of the MARAC process, given that most MARACs did not appear to have processes in place to gather this information. Participants put forward suggestions to ensure survivors' voices are put at the forefront of the MARAC process, including training, engagement and awareness-raising with communities and local authorities,</p>
--	-------------------	--

		and tackling barriers for domestic abuse reporting.
Principle 5. Information sharing	Desktop review Surveys Interviews	<p>The chairs played a key role in ensuring the smooth running of the meeting and where there was little structure to information sharing it did lengthen the time spent on a case. Difficulties were noted around information sharing and timings (e.g., repeat information, lack of concise and succinct contributions), which compromise the effectiveness of MARAC meetings.</p> <p>There had been changes to the process of information sharing for some MARACs who are requesting research from agencies in advance of the meeting to the coordinator; the coordinator then collates the draft minutes document and circulates to agencies prior to the meeting. Some participants cited that research being sent prior had improved the efficiency of the meeting and minute writing process for coordinators. However, it was noted in the desktop review that some information shared by agencies in research for minutes was unnecessarily lengthy and may fall short of GDPR standards. There is an argument that the information shared in research ahead of time is not always relevant and proportionate as there is not opportunity for representatives to see hear/view what else has been shared by other agencies when sharing their own. Oversharing of information was also observed in meetings with some agencies sharing details that could have been summarised more succinctly and to the point rather than providing a chronological history of incidents.</p> <p>In some meetings, agencies were present but did not contribute so whilst attendance on paper may have improved since the pandemic, this did not necessarily equate to engagement.</p>
Principle 6. Action planning	Desktop review Surveys Interviews	In the observations of MARACs, most actions related to the survivor's wishes and safety. Inconsistencies were noted across the meetings for police actions with thresholds for

		<p>certain safety measures being unclear. There were further variations in how actions were recorded with some not being given timed deadlines or assigned to an agency. This can lead to ambiguity on their urgency and impact accountability from agencies.</p> <p>Perpetrators' management and engagement was also mentioned as one of the gaps not only as a limitation in terms of MARAC, but equally and more broadly with regards to the response to domestic abuse. Some participants cited a lack of attention to managing perpetrators' behaviour, sometimes accompanied by a hyper focus on, and responsabilisation of, survivors. As mentioned, the participation of National Probation Service (NPS) was inconsistent across the boroughs and this negatively impacted the risk management options available to the survivors, particularly for perpetrator management.</p> <p>Survey findings regarding links to children's safeguarding arrangements, and the presence of children's voices and perspectives in the MARAC process, suggest that, as with adult survivors, there can be a disconnect between the focus on safety and wider concerns about agency and lived experience. Both sets of survey participants broadly agreed that their MARAC enjoyed positive links with Children Safeguarding arrangements. However, others identified issues as a barrier were related to communication, internal processes differing expectations, knowledge levels and thresholds for referrals. Overall, the survey findings suggest that both sets of participants have mixed perceptions regarding the efficacy of the MARAC process in relation to advancing children's interests.</p>
<p>Principle 7. Number of cases</p>	<p>Desktop review Surveys Interviews</p>	<p>It is fair to conclude that most MARACs had seen an increase in volume in 2020 when compared with 2019 with an average 20% increase. From the sample, 88% of MARACs were seeing over the recommended volume of cases. In terms of referring agencies, most</p>

		<p>MARACs had police as the top referring agency in 2020 accounting for 9% to 46% of all referrals. In 2020, the remaining MARACs had IDVAs as the top referring agency accounting for 31% to 47% of referrals. This was a slight increase on 2019, whereby IDVAs accounted for 31% of all referrals into MARAC. Other top referrers were noted to be Children’s Services (CSC), the voluntary sector and other (MARAC transfers and non-core agencies). Some boroughs had increased frequency of MARAC meetings during the pandemic to cope with the demand whereas others noted the length of the meeting increasing with some continuing late into the evening or split across two days which had an impact on resourcing for the coordinators, chairs, and partners.</p>
<p>Principle 8. Equality</p>	<p>Desktop review Surveys Interviews</p>	<p>Intersectionality was explored across all research areas by examining the diversity of survivor’s voices within the MARAC and ensuring all communities are represented and that their needs are attended to. Several barriers were identified in ensuring diversity and representation of certain groups at MARAC, such as inaccurate recording of diversity data (e.g., disability, sexual orientation). Interviews and surveys revealed that diversity of survivor’s requires knowledge of the dynamics of domestic abuse affecting those exposed to multiple sources of disadvantage (e.g., LGBTQ+, migrants with no recourse to public funds, those with disabilities), particularly through the input of specialist agencies. Trauma-informed practice when engaging with survivors facing multiple disadvantage emerged as a further area where further training and awareness may be warranted. Responsibilisation of survivors emerged as a harmful pattern of behaviour within some MARACs, which directly conflicts with basic principles of trauma-informed practice. The most common method of ensuring there is adequate representation from marginalised communities was from the inclusion of by and for specialist services as guest or core agencies. In the observations, it was noted that</p>

		<p>very few MARACs had representation from ‘by and for’ specialist services as a ‘core’ agency and where they were present, it was in a guest capacity but when present their input enriched discussions and action planning. Throughout the observations, there were a handful of cases that involved harmful practices (HP). Responses to these cases in observations varied and this is thought to be in part to the lack of ‘by and for’ services. There were some boroughs within the in-depth review sample who specifically included HP as a referral criteria. Further work is required to consider whether the inclusion of these criteria for MARAC increases identification of cases when coupled with specialist training on HP and what longer term impacts are seen. Coordinators and chairs shared different ways in which they addressed issues of representativeness within the MARAC, as well as further strategies to ensure that survivors have access to support and that their voices are not being silenced</p>
<p>Principle 9. Operational support</p>	<p>Desktop review Surveys Interviews</p>	<p>When reflecting on the barriers to effective partnership working resources, capacity, funding, and communication between agencies were most cited. This pervasive under-resourcing has profound implications for professionals’ ability to dedicate the requisite time and attention to MARAC-related tasks. Many coordinators cited they did not have sufficient administrative support for their role. This was further impacted by caseloads and frequency in meetings. This was due to the specialist skills that are required to carry out some of the tasks such as processing referrals, understanding the makeup of the local agencies and managing relationships. The need for administrative support was highlighted by many coordinators which would allow them to focus on building relationships and facilitating the collaborative approach required by MARAC. The lack of administrative support was related to issues of funding and its seemingly inevitable short-term nature. Subsequently, many stated they could not take annual leave or sickness</p>

		<p>without being concerned about workload on return.</p> <p>Difficulties around chairing were also put forward as a challenge in MARAC delivery, particularly regarding the lack of consistency around chairing brought about by quick staff turnover and lack of training. There was an understanding that quick staff turnover in such a fundamental role created unnecessary inconsistencies around MARAC meetings and often undermined long-lasting relationships between chairs and representatives. Ultimately, lack of consistency and training has implications on the ability to maintain a collaborative approach between agencies and the MARAC. Participants highlighted the importance of training and support for chairs prior to beginning their role within MARAC to guarantee there is an understanding of the role and its value.</p>
<p>Principle 10. Governance</p>	<p>Desktop review Surveys Interviews</p>	<p>Most survey respondents reported that their local MARAC has a steering group to monitor the governance and performance of the process as were some of the in-depth samples. However, some MARACs were reported not to have a steering group or participants were not sure, indicating a need for greater clarity and visibility around the role of MARAC steering groups. It is recommended that all MARACs have a group who have oversight over the process and support from senior management to actualise real and long-term changes in practice.</p> <p>Although not discussed extensively, the lack of statutory footing underpinning the MARAC process was mentioned as a challenge, for example, in terms of ensuring participation and engagement, as well as resourcing and prioritising of MARAC.</p> <p>Inconsistencies in how MARACs were run across boroughs was noted as an issue. A collaborative approach to establishing the</p>

		pillars of MARAC performance is required to ensure a certain level of consistency is achieved which allows for cooperation and sharing between boroughs, without compromising the often 'individualised' structure it requires to address specific needs of one borough.
Finding 11. Impact of Covid-19	Interviews Surveys	<p>Several changes to the way MARAC is delivered and run were brought about by the Covid-19 pandemic, with MARACs moving to an online platform. One of the most noticeable changes was the need to change to virtual working and move MARAC meetings to an online platform. Inevitably, this resulted in several changes in the delivery of MARAC meetings, information sharing, and general interaction with partner agencies</p> <p>Most interviewees identified an increase in the workload and the number of referrals made to their MARAC, which put added pressures to already limited resources (particularly in terms of time and funding). Better attendance from partner agencies was consistently identified as one of the main improvements. Online meetings were said to be more accessible and often less time consuming for each representative. However, as was noted by some survey participants as well as interviewees, more attendance does not always equate to more participation. Other issues included logistical issues (e.g., 'clunky' system making it difficult for representatives to intervene effectively, less natural or flowing interaction), managing participation, and establishing rapport with partner agencies. As previously discussed, increased MARAC referrals from partner agencies and subsequently high caseloads seemingly reflected the increase in domestic abuse cases throughout the pandemic, particularly during periods of national lockdown resulting in some areas increasing the frequency of their meetings.</p>
Finding 12. Trust and confidence in policing	Survey	73% of participants from the MARAC Chair, Coordinator and partner agency survey felt agencies had trust and confidence in policing

		<p>where MARAC cases are involved. Some participants stated they had experienced effective communication and a good working relationship between police and agencies. However, other participants expressed a more equivocal view on the levels of trust and collaboration, describing issues with communication, misaligned expectations, or a lack of confidence in police’s ability to deliver just outcomes for survivors. Several cited high caseloads and a lack of corresponding resources as a major barrier for police. Specialist organisations mostly agreed that agencies had trust and confidence in policing but participants reported more mixed attitudes towards police, or described inconsistent or “variable” practice by frontline officers</p>
<p>Finding 13. An ‘ideal’ MARAC?</p>	<p>Interviews</p>	<p>Throughout the interviews, chairs and coordinators put forward suggestions to improve MARAC provision, from increasing communication to ensuring uniformity across boroughs. Some of the recommendations reflect strategies already in place to address challenges within MARAC. These include adjusting the frequency of MARACs, controlling timings, and managing information sharing and representatives’ contributions at the meeting (to ensure proportionate interventions).</p> <p>Common themes for an ‘ideal’ MARAC were good action planning, good attendance from partner agencies, good representation at MARAC meetings reflecting the needs of the borough, good relationships between partner agencies and representatives, good research, efficient information sharing, and sufficient time to discuss cases, incorporating offender management, good chairing, a structured and streamlined process at MARAC, among others.</p>

Limitations summary

Time constraints: The review was set to take place across a six-month period. Due to the time constraints of the project, it was not possible to carry out both a desktop review and observations for all thirty-two boroughs and this should be considered.

Participation: All 32 London MARACs were contacted at the beginning of July 2021 and asked to participate in the research that would take place across August and September 2021. Some MARACs were unable to participate in the interview citing limitations on resources and this should be considered when reading this report. The coordination of MARACs was largely delivered by an employee from the local authority. However, some local authorities have commissioned the MARAC coordination service to the voluntary sector or police. It should be noted that none of the MARACs coordinated by the police were able to be interviewed.

Interviews: Some interviews occurred with chairs and coordinators simultaneously and that might have obscured some issues with regards to perceptions of coordinating and or chairing.

Analysis: As the two sets of survey participants responded to two survey questionnaires with largely overlapping, but non-identical sets of questions, and some participants chose not to answer all questions, researchers determined that conducting a descriptive analysis of each set of answers would be most appropriate. **However, it is important to note that, in the majority of cases where respondents answered the same questions, they exhibited similar patterns of answers.** Where responses from MARAC Coordinator, Chair and partner agency participants and specialist organisations are presented separately, this reflects the data collection and analysis processes, rather than to suggest that there was a clear divide or demarcation between groups of participants.

Recommendations

Recommendation 1: It is crucial that all London MARACs have a clear operating protocol and terms of reference so that there is a clear process and structure which is monitored by a local MARAC Steering Group. MOPAC may wish to consider a London wide MARAC steering group.

Recommendation 2: Core agencies as set out by SafeLives must ensure they participate in the MARAC process both operationally and strategically.

Recommendation 3: London MARACs must ensure they are following the SafeLives 10 Principles for an effective MARAC and any developments SafeLives make. They should be reviewing performance against this regularly at their local steering groups.

Recommendation 4: All partners involved in MARAC must attend training before participating in the MARAC process. To ensure this, there needs to be regular MARAC training available to chairs and representatives which includes but is not limited to roles and responsibilities of partners in the MARAC process, issues of intersectionality, trauma informed practices, cultural competency and harmful practices.

Recommendation 5: A standardised MARAC performance assessment to be in place across London and collected by MOPAC or London Councils. This can be developed through a

multiagency collaborative approach that considers the uniqueness of each MARAC and the needs of each borough, to avoid a 'one-size-fits-all' approach to the MARAC process. This performance can be monitored on a regional basis by the aforementioned London wide MARAC steering group.

Recommendation 6: Further research is required by MOPAC on the effectiveness of different models of MARACs operating in terms of frequency, performance, and coordination delivery.

Recommendation 7a: Local Authorities to convene and ensure there is a common referral criteria across London MARACs and consider the wider context of VAWG specifically the inclusion of Adult Family Violence and Harmful Practices as additional criteria.

Recommendation 7b: The addition of Harmful Practices as a referral criteria across some boroughs is an area that requires more exploration and research in how it impacts the response to this group of survivors.

Recommendation 7c: Research is required to understand how MARACs respond to Adult Family Violence (AFV) cases.

Recommendation 8: The MARAC meeting should be structured to ensure the survivor's voice is at the heart of the discussion and ensure feedback to survivors is part of the action planning process. MARACs can do this by having the specialist domestic abuse service present their updates after the referring agent or, in the event they are not directly involved, the agency who has strongest relationship with the survivor. This will allow the discussion to be survivor focused and led.

Recommendation 9: Local authorities must ensure they have robust survivor feedback loop for the MARAC process.

Recommendation 10: MOPAC to create an intersectional framework for funding and resourcing for MARACs. MOPAC should meet with regional partners to explore how funding can be sustainable and lobby for national change.

Recommendation 11: It is imperative that London MARACs have representation that reflects their local diverse communities. Local Authorities must ensure that equality is at the core of their MARAC operating protocols by including representation of by and for organisations. As part of this recommendation, it is important that an ongoing dialogue be established by Local Authorities with 'by and for' organisations on how to ensure effective participation and funding so that engagement is collaborative endeavour as against only featuring at MARAC in a guesting capacity.

Recommendation 12a: MARACs need to operate alongside effective perpetrator management. This will involve ensuring perpetrator management is discussed at MARAC as part of the safety planning and support options.

Recommendation 12b: Local Authorities must establish better perpetrator management options locally.