

Southampton Safeguarding Adults Board (SSAB)

Multi-agency Risk Assessment and Management Guidance (MARM)



Contents

Purpose of Risk Management2

Applying the Risk Management Process2

Scope and Parameters of Risk Management.....3

Who can set up a MARM Process.....4

Involving The Adult.....4

Human Rights Act.....5

Best Practice Decision Making.....5

Transitional Safeguarding.....6

Summary; Risk Assessment and Planning.....6

Summary; Principal Components.....7

Further Guidance ; Documents and Forms.....7

Multi-agency Risk Assessment and Management Guidance (MARM)			
Version	2.0	Approved by	Click here to enter text.
Date last amended	30/08/2023	Approval date	Click here to enter a date.
Lead officer	Eric Smith	Review date	Click here to enter a date.
Contact	Eric.Smith@southampton.gov.uk	Effective date	Click here to enter a date.

Purpose of Risk Management

The key purposes of the MARM process are;

- Timely information sharing around risk.
- Identification and holistic assessment of risk.
- Complete a comprehensive statement of risk.
- Development of shared risk management plans.
- Shared decision making and responsibility.
- Involvement and engagement of the adult at risk (or representative) in the MARM process.
- Ensure good partnership working with family/friends/support networks are agreed and understood.
- Improved outcomes for the adult at risk.

Applying the Risk Management Process

The MARM Framework cannot be used instead of the safeguarding process. The MARM Framework is for high-risk concerns that have been assessed as not meeting the Care Act 2014 Section 42 criteria. It is necessary to first consider if the Care Act S42 Safeguarding criteria apply. Further information and guidance on raising a Safeguarding Concern can be found here: [4LSAB Safeguarding Concerns \(hampshiresab.org.uk\)](http://hampshiresab.org.uk)

The MARM Framework is not a statutory process, however member agencies of the SAB have signed up to the framework and it is expected that their staff will use it. Partner agencies should be invited where they have specific expertise or who may be able to support the individual e.g., substance misuse, domestic abuse etc. MARM can consider the need for a Care Act S9 needs assessment.

However, there are shared processes across Safeguarding Enquiries and MARM. For example, both processes are responding to risk and each is built on the same principles and value based themes promoting prevention, person-centred working, developing personal resilience, effective partnership working, strength based and a whole family approach and Making Safeguarding Personal.

The current LSAB Safeguarding Policy Guidance advises about risk assessment processes and practice. Risk Assessment is an essential component of the response by all services to situations where vulnerable adults are unable to effectively protect themselves from significant risks.

Risk assessment has the primary purpose of taking a collaborative multi-agency approach to situations where an adult is not able to maintain/manage their own safety. It enables a focused analytical response to unsafe situations using the resources and knowledge of people in the adult's informal and formal networks, to maximize the safety of the adult, with the aim of to reducing and managing risks and monitoring progress. Risk management should enable the Adult to improve their capacity to respond to the issues facing them and to be positively supported by others in their life.

Anyone, including service users, their family or carers and professionals, who feel these principles are not being met in practice have the right to make constructive challenge about this. There should also be opportunities for professionals to escalate any concerns both within and across their organisations. Appropriate challenge and escalation are an essential part of partnership working and professional responsibilities to achieve high standards. On occasion, this may necessitate challenging poor practice when staff in one partner agency have concerns about the way in which staff within another agency are delivering their practice. This could also include a lack of engagement with the MARM process. In such circumstances, there must be a respectful challenge about the action or inaction taken. For guidance on resolution of disagreements, please refer to the [4LSAB Escalation Policy](#).

The process should be considered and applied in situations of risk, where there is evidence of concerns listed below.

Scope and Parameters of Risk Management - Examples

- a) Vulnerability factors placing them at a higher risk of abuse or neglect including mate crime, network abuse, etc.
- b) Self-neglect including hoarding, hazardous environments, or risk of fire safety.
- c) Refusal or disengagement from care and support services. Including where an adult are unable or unwilling to provide adequate care for themselves.
- d) Complex or diverse needs which require partnership working across several agencies and support networks.
- e) Complex needs and behaviours that lead the adult to cause harm or potential risk to others.
- f) Address and consider risk related to the impact of domestic abuse, mental health needs, substance misuse and homelessness. These may occur simultaneously or individually.
- g) Risks previously addressed via a section 42 enquiry but for which the need for on-going risk management and monitoring has been identified. This should be in relation to a change of risk where the person no longer meets the threshold for section 42.

Who can set up a MARM process?

Any involved professional can set up and lead a risk management assessment process. It can be used city-wide and aims to provide a collaborative framework for professionals to work in partnership. The forms can be used alongside a services own risk management processes, using the knowledge and experience of the Adults, their relatives and friends and all professionals involved in the adult at risk's wellbeing. It does not need to be led or directed by Adult Social Care. Any agency or professional can initiate a multi-agency risk management meeting. However, a responsible manager from that organisation should be involved in the decision-making process.

In addition to the above, the MARM framework may also be useful in an acute hospital context to address concerns about:

- a) Complex discharges.
- b) An adult being discharged back to a vulnerable situation e.g., homelessness, self-neglect or hazardous environment.
- c) Managing complex behaviours/needs during admission.
- d) Continuance of complex case management.
- e) An adult's refusal of medical treatment posing significant risk.
- f) Disputes with family members about treatment and discharge arrangements

Involving the Adult at Risk

The Adult at Risk should always be involved in and at the centre of the Risk Management (MARM) process. They should be made aware that it is taking place and be actively involved at the level they wish and/or are able to participate. The plan must be shared with the Adult and have their understanding, ideally their consent and agreement.

It is best practice for the key professional to meet with the individual before a MARM meeting and ensure they are aware of what the meeting is for, who will be there and what to expect and that if they are unable/don't wish to attend that their voice is heard.

Having access to information and advice will assist the adult at risk to make informed choices about support and will help them to weigh up the benefits and consequences of different options. Information and advice can enable the person to keep themselves safe in the first place by helping them understand their situation and what is needed to keep themselves safe now and in the future.

Positive Risk Taking

A risk averse approach should be avoided. Positive risk taking is a normal characteristic in life, and this should be part of the approach taken in the Risk Assessment Process. The Adult's wishes should be understood and they should be enabled to best maintain their preferred way of life, and allowed, within reasonable parameters, to take risks. Risk management should not be about seeking to remove all risks, it puts in place an action plan

that enables risks to be managed and reduced, but also gives the adult choice and control, and maximising, where possible, their independence. This will involve accepting uncertainty, as all risk cannot be predicted or prevented.

We must seek to change the situation for the adult, to reduce the risks to acceptable levels, whilst respecting their choices and promoting the quality of their life.

Human Rights Act

The application of the relevant clauses of the Human Rights Act, specifically articles 5 and 8 is highly relevant to good quality risk management.

Article 8 concerns the right to respect for private and family life, their home and their correspondence. This right can only be restricted in limited and specified circumstances. Article 5, the right to liberty and to security. Adults have the right to not be deprived of their liberty, except in specified circumstances, where, for example, criminal acts have been committed or are suspected.

These rights should be seen in association and considered within the risk management process. They clearly advise that decisions should respect these rights and must minimize the potential imposition of solutions that act to remove or jeopardise any of these rights.

Mental Capacity

The principles of the Mental Capacity Act should always be used when considering the mental capacity of an adult.

When an adult is seen to potentially lack capacity to make decisions for him/herself, staff must consider if there is a need to formally assess if the adult has/does not have capacity to make a specific decision.

The adult's decisional and executive capacity to make a decision must be taken into account. The ability to understand the consequences involved in risk taking and to manage any risks and safety implications resulting from choices or decision making, should be assessed. The right to make unwise or unreasonable lifestyle choices and to refuse support should be respected.

Consideration of mental capacity should be made regularly throughout the process. Where a person is found to lack capacity in any area of decision-making, a best interest decision will be made, and this must take into account the adult's views and wishes in accordance with the Mental Capacity Act Code of Practice.

Best Practice Decision making

The decision-making process must take necessary steps to ensure that it has followed an evidenced and defensible process, one that has considered all the factors fully and reasonably, including the wishes of the adult.

Defensible decision making needs to give assurance that,

- all reasonable steps have been taken.
- reliable assessment methods have been used.
- information has been collated and thoroughly evaluated.
- decisions are recorded, communicated and thoroughly evaluated.
- policies and procedures have been followed; and
- practitioners and their managers adopt an investigative approach and are proactive.

Transitional Safeguarding and Risk Management ;Young Adults

Transitional Safeguarding is a developing practice approach that recognises that safeguarding and risk management processes need to understand how to best support young adults who are moving into Adulthood. It aims to strengthen the safeguarding support available to young adults who have pre-existing vulnerability and risk factors, as they move into adulthood. The Southampton Transitional Safeguarding Framework ([link](#)) is designed to enhance and build on existing safeguarding and risk management processes to ensure that these are relevant to safeguarding at risk young people. It is recommended that this Framework is referred to when dealing with risk in such circumstances.

Summary : Risk Assessment and Planning

Risk Assessments and Support Plans should include the following.

- Active participation of the adult and their views and wishes
- A full understanding of the adult's perspective, wishes and preferred outcomes
- An up-to-date chronology.
- A Risk Statement that analyses what the risks are for the adult, for others and for the wider public.
- A clear action plan, that sets out tasks and responsibilities for those involved. It must be clear about what the Adult will do, what the lead professional will do, and what other staff and representatives will do.
- A monitoring and review plan.
- A multi-agency partnership approach and involvement of a wide range of appropriate professionals.

Summary : Principal Components

That should be considered and recorded when developing the Risk Management Assessment and Plan.

1. Personal details of the Adult and their key representatives, whether formal or informal.
2. Summary of current situation and concerns; this can be prepared in advance of the meeting by the lead professional and/or the staff member who calls the meeting. Summaries from others who are involved with the Adult can be prepared also.
3. Care Support and Health Plan. Stating what support, formal and informal, from any source, is provided and received by the adult.
4. Key information. Complete this at the meeting, using any or all of the subject headings in the Assessment form.
5. Risks. Identify the full scope of risks to the Adult from sharing information between partners/participants. The Risk Management assessment form includes sub-sections that list potential risk areas. Ensure that the views and wishes of the Adult and their key representatives are included.
6. Risk Statement. This should identify and record overall risks that are present, include any risks for other people and/or the community. Analyse the likelihood and the imminence of each relevant risk.
7. Risk Plan; the Action Plan sets out what needs to be done to manage the risk. State who is responsible for managing each risk, how they do this, and a timescale for each action.
8. The plan must consider and specify how the risks are to be reduced or removed.
9. It may be necessary to plan how to minimize risks, or to reduce them to acceptable levels, it cannot always be possible to remove risks. It may be necessary to make a statement about risks that cannot be managed or managed effectively.
10. Record any significant disagreements to the risk plan, from the adult, their family members or representatives, and by professionals. Note alternative plans and proposals that are not part of the agreed plan.

Further Guidance, Documents, Forms and Templates

SSAB and 4LSAB have a number of further guidance documents and forms.

These include, (LINKS TO BE ADDED, DOCUMENT SET TO BE CIRCULATED)

- 4LSAB Multi-Agency Risk Management Framework
- SSAB Chronology Template and Guidance
- 4LSAB Quick Guide to MARM
- SSAB Agenda and Minutes Templates
- 4LSAB What to expect if you are attending a MARM Meeting
- SSAB Risk Management Assessment and Planning Form