

# Multi-Agency Risk Management (MARM)

# Why do we need a MARM process

Hull and East Riding Safeguarding Adult Partnership Boards agreed the need for a process to;

- manage risks when working with adults deemed to have capacity to make decisions for themselves,
- but who are at risk of serious harm or death through;
  - ► Self-neglect (Care Act 2014)
  - Risk-taking behaviour/chaotic lifestyles; or
  - Support required to enable engagement with services.

("serious harm" refers to the death or injury (either physical or psychological) which is life threatening and/or traumatic and which is viewed to be imminent or very likely to occur)



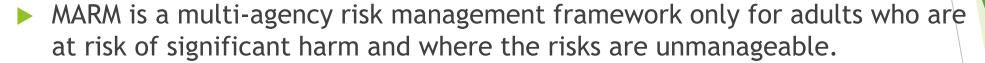
#### What is MARM?

- A multi-agency adult risk management process to facilitate effective multi-agency working with adults who are at significant risk of harm or death to;
  - Identify the relevant risks to an individual.
  - Discuss and agree agency responsibilities/actions.
  - ► Record, monitor and review progress with an agreed risk management action plan.
- Agree when the risks have been managed and evaluate the outcome.



# Is the MARM framework statutory?

No.



It is not a substitute to legislation and existing processes.

- Mental Health Act 2007
- ► Human Rights Act 1998
- Mental Capacity Act 2005
- Care Act 2014
- Data Protection Act 2018
- Multi-Agency Public Protection Arrangements (MAPPA)
- Multi-agency risk assessment conference (MARAC)



#### When to hold a MARM?

A MARM will only be called where the adult at risk does not fall within existing multi-agency processes,

or

if it is felt that a MARM meeting will help to reduce the risk of serious harm or death.

The MARM is not a substitute for:

- Multi-Agency Public Protection Arrangements (MAPPA)
- Multi-Agency Risk Assessment Conference (MARAC)
- Channel (multi-agency meeting within the Prevent programme)
- Formal adult safeguarding procedures



### Criteria for a MARM

All the following conditions must apply for a MARM to be called:

- 1. The person is;
  - a) 18+, and
  - b) has the mental capacity to make decisions and choices about their life.
- 2. Has care and support needs (whether these are being met or not).
- 3. There is a risk of;
  - a) serious harm (physical or psychological) which is life-threatening and/or traumatic and which is viewed to be imminent or very likely to occur,
  - b) or death by self-neglect, hoarding, non-engagement with services.
- 4. There is a high level of concern from partner agencies.
- 5. Health and social care services have explored all known options of care and support/signposting, and the adult has declined all offers of care and support and is not currently engaging with any service.



# MARM Referral

Any agency can make a MARM referral.

If you think an adult would benefit from MARM;

- Discuss with your Adult Safeguarding Lead and confirm all 5 criteria are met.
- Inform the relevant Adult Safeguarding Team;

  AdultSafeguarding@hullcc.gov.uk and provide supporting information.



# Pre MARM Meeting

- Hull Adult Safeguarding Team will assess all requests for a MARM and determine if the criteria is met.
- Where the criteria is met, they will identify a lead agency.

#### The Lead Agency will;

- Identify agencies required at the MARM meeting, including non-statutory, voluntary sector and local community groups.
- ► Where children are part of the household/linked to the person, Children's Services must be invited and a safeguarding children referral completed.
- Arrange a suitable venue and coordinate attendance.
- Consider how the views of the person can be included every effort should be made to encourage the person, or an appropriate advocate, to attend.



# Pre MARM Meeting

- All partner agencies must ensure an appropriate member of staff, with the required seniority to make decisions on behalf of their organisation, attends.
- Wherever possible consent for holding a MARM meeting should be obtained from the person, and they should be encouraged to participate in the process.

However, a lack of consent will not prevent a MARM meeting from taking place.

- Agencies receiving an invitation to attend a MARM meeting must;
  - Gather information held within their organisation about the Adult.
  - Take reasonable steps to gather further information if required.
  - Liaise with the Chair or Lead Agency to confirm attendance or submit a detailed information report to support the MARM process.



# MARM Meeting

- Nominated Chair responsible for chairing and coordinating the MARM meeting. Agencies will be expected to;
  - outline their responsibilities
  - share information about the person
  - evaluate concerns
- ► The meeting may identify the need to make other referrals about the person, other adults at risk or children.
- ▶ Whether or not the person is present, their views must be sought and considered.
- ► A Risk Management Action Plan will be created agreed and Actions allocated.

(There is a meeting template to record the discussion and actions)



#### Post MARM

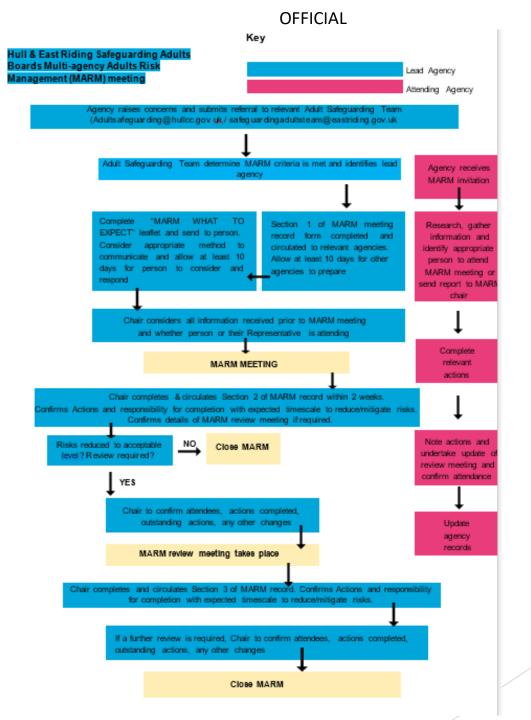
- Actions agreed at the meeting should be completed within the agreed timescale, and the lead agency updated.
- Where necessary, the Chair will arrange review meetings.
- The MARM process should be closed when actions have been completed, and the Chair believes the risks have been reduced to an acceptable level.
- ► The MARM process may be reopened at any time and by any agency in response to the person's changing circumstances/risks.



# MARM Record Keeping

- Referring Agency to record using own systems.
- Hull Safeguarding Adult Team to record on old VARM case note and Word meeting record and upload to documents section of Liquid Logic.
- Awaiting amendments to Liquid Logic for MARM case notes.

# MARM Process





## MARM Example - Jeff

- Recently separated and lives in family home on his own.
- House is in state of disrepair but has gas, electricity and water.
- Has an income.
- Alcoholic and smokes heavily.
- Has COPD and uses inhalers.
- Inhalers have run out and he will not go back for a repeat prescription. Result - he struggles for beath.
- Eyesight is deteriorating.
- Pressure sores on sacral area visibly weeping.

- Does not see GP or district nurse.
- Losing weight and son believes he is malnourished.
- Occasionally incontinent.
- Son is concerned and has called Adult Safeguarding Team.
- ASC have knocked on Jeff's door 6 times. Either no response or Jeff tells then he does not want any help and to go away.

### MARM Example - George

- Lives on own in detached house.
- House is in disrepair.
- No gas, electricity or hot water.
- No money, no income, will not claim benefits, no intention of looking for a job.
- Survives from food banks and gifts from neighbours.
- Cooks inside on an old gas BBQ and used an oil lamp for lighting.
- Have been small fires in the past.
- Isolated and no means of transport.

- No friends and estranged from his family.
- Appears malnourished and does not go to the doctors.
- ► Had a mental breakdown some time ago.
- Concerns raised to ASC by neighbours and GP worried about his health and wellbeing.
- Had declined any offers of care and support. Will not let any professionals into his house.

#### Further information

MARM Guidance can be found on the HSAPB web site;

https://www.hullcollaborativepartnership.org.uk/hull-safeguarding-adults-partnership-board

- Contains MARM supporting documents including;
  - ► Aide Memoir for MARM Chairs
  - Confidentiality statement
  - ► MARM Fact sheet
  - ► MARM Process chart
  - MARM Agency report template
  - MARM Meeting Record
  - ► MARM What to expect
  - ▶ 7 minute briefing

