# DASH [Domestic Abuse Stalking & Harassment & Honour Based Abuse Risk Assessment Form]

Name of victim: Date of completion:

## How to use the form:

Before completing this form for the first time we recommend that you complete internal domestic abuse training or ideally, the domestic abuse training available via the [LSCP Training – LSCP (lincolnshirescp.org.uk)](https://www.lincolnshirescp.org.uk/lscp-training)

Risk is dynamic and can change very quickly. It is good practice to review this risk assessment after a new incident.

**Guidance notes for both the DASH and S-DASH can be found on the** [**Lincolnshire Domestic Abuse Website**](https://professionals.lincolnshire.gov.uk/downloads/download/209/domestic-abuse-resources)

**A leaflet that can be given to those you are completing the DASH with is also available on**

[Domestic abuse resources – Professional resources (lincolnshire.gov.uk)](https://professionals.lincolnshire.gov.uk/downloads/download/209/domestic-abuse-resources)

## OASYS Definition of Serious Harm:

Harm which is life threatening or traumatic and from which recovery, whether physical or psychological, can be expected to be difficult or impossible.

## Definition of level of Risk:

**HIGH** – There are identifiable indicators of risk of SERIOUS harm. The potential event COULD happen at ANY TIME and the impact would be SERIOUS.

**Non High Risk**:

**MEDIUM** – There are identifiable indicators of risk of harm. The offender has the potential to cause harm but is UNLIKELY to do so UNLESS there is a change in circumstances, e.g. loss of accommodation, failure to take medicine.

**STANDARD** – No Significant CURRENT indicators of risk of harm.

**Recommended Referral Criteria to MARAC:**

1. **Professional judgement:** if a professional has serious concerns that the victim is at high risk of serious harm or homicide, they should refer the case to MARAC. There will be occasions where the particular context of a case gives rise to serious concerns even if the victim has been unable to disclose the information that might highlight their risk more clearly. ***This could reflect extreme levels of fear, cultural barriers to disclosure, immigration issues or language barriers particularly in cases of ‘honour’- based abuse.*** This judgement would be based on the professional’s experience and/or the victim’s perception of their risk even if they do not meet criteria 2 and/or 3 below.
2. **‘Visible High Risk’:** This is based on the number of 'yes' answers given on the DASH risk assessment. As a guide, if there are 14 yes answers or more you may wish to consider a MARAC referral. **14 yes answers or more does not mean an automatic referral to MARAC**. You should use your professional judgement, and in particular discuss the case with your MARAC representative. If there is a high risk of serious harm or homicide the case should then be referred to the MARAC.
3. **Potential Escalation:** There is an increase in the frequency or severity of the abuse.

# What next:

If any of the above Criteria are appropriate you should consider referring the case to MARAC, by completing a ‘Referral to MARAC’ form, available on th[e Domestic abuse websit](https://professionals.lincolnshire.gov.uk/downloads/download/206/marac-resources)e.

## Always consult first with your manager and MARAC representative before submitting the referral.

If any of the above criteria are not appropriate you should consider a referral to Lincolnshire Domestic Abuse Specialist Services or offer the person their contact details. Email: info@ldass.org.uk Tel: 01522 510041 Website: [www.ldass.org.uk](http://www.ldass.org.uk)

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| Please explain that the purpose of asking these questions is for the safety and protection of the individual concerned.Cross the box if the factor is present. Please use the comment box to expand on any answer.It is assumed that your main source of information is the victim. If this is not the case please indicate in the right hand column | Yes (tick) | No | Don’t Know | For Professional Judgement, state the source of info if not the victime.g. police  |
| 1. Has the current incident resulted in physical injury?(Consider asking what was the first, worst and last incident for context) |  | x |  |  |
| 2. Are you very frightened?  Comment: |  |  |  |  |
| 3. What are you frightened of? Further injury or violence? (Please give an indication of what you think (name of abuser(s)...) might do and to whom, including children).Comment: |  |  |  |  |
| 4. Do you feel isolated from family/friends i.e. does (name of abuser(s)………..) try to stop you from seeing friends/family/doctor or others? Comment: |  |  |  |  |
| 5. Are you feeling depressed  or having suicidal thoughts?  |  |  |  |  |
| 6. Have you separated or tried to separate from (name of abuser(s)….) within the past year? |  |  |  |  |
| 7. Is there conflict over child contact? |  |  |  |  |
| 8. Does (……) constantly text, call, contact, follow, stalk or harass you? (Please expand to identify what and whether you believe that this is done deliberately to intimidate you? Consider the context and behaviour of what is being done.) \*if **YES** complete **S-DASH** attached |  |  |  |  |
| 9. Are you currently pregnant?  Is the perpetrator pregnant? Or have you recently had a baby(in the last 18 months)? Or have you had a pregnancy loss in the last 12 months including miscarriage, ectopic pregnancy, still birth or a termination of pregnancy?  |  |  |  |  |
| 10. Are there any children, stepchildren that aren’t (….) in the household. Or are there any other dependants in the household (i.e. older relatives) Comment: |  |  |  |  |
| 11. Has (….) ever hurt the children / dependants? |  |  |  |  |
| 12. Has (….) ever threatened to hurt or kill the children / dependants? |  |  |  |  |
| 13. Is the abuse happening more often? |  |  |  |  |
| 14. Is the abuse getting worse? |  |  |  |  |
| **Tick box if factor is present. Please use the comment box if you need to expand further.** | Yes (tick) | No | Don’t Know | State source of information |
| 15. Does (….) try to control everything you do and / or are they excessively jealous? (In terms of relationships, who you see, ‘being policed at home’, telling you what to wear for example. Considerhonour based violence and stalking and specify the behaviour) |  |  |  |  |
| 16. Has (….) ever used weapons or objects to hurt you? |  |  |  |  |
| 17. Has ( ) ever threatened to kill you or someone else and you believed them? (If yes, tick who.) You Children Other (please specify)  |  |  |  |  |
| 18. Has (………) ever attempted to strangle/choke/suffocate/drown you? If yes, have there been times where it has been difficult to breathe, or where you have lost consciousness/become incontinent?  Comment:  |  |  |  |  |
| 19. Does ( ) do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else? (If someone else, specify who) Comment: |  |  |  |  |
| 20. Is there any other person who has threatened you or who you are afraid of? (If yes, please specify whom and why. Consider extended family if HBA.) Comment: |  |  |  |  |
| 21. Do you know if ( ) has hurt anyone else? (Please specify whom including the children, siblings or elderly relatives. Consider HBA.) Children Another family member  Someone from a previous relationship  Other (please specify)  |  |  |  |  |
| 22. Has ( ) ever mistreated an animal or the family pet? Comment: |  |  |  |  |
| 23. Are there any financial issues? For example, are you dependent on (…..) for money/food/have they recently lost their job/debt/other financial issues? Comment: |  |  |  |  |
| 24. Has ( ) had problems in the past year with drugs (Prescription or other), alcohol or mental health leading to problems in day-to-day life? Comment: |  |  |  |  |
| 25. Has (……) ever threatened or attempted suicide? Comment: |  |  |  |  |
| 26. Has (………) ever broken bail/an injunction and/or formal agreement for when they can see you and/or the children? (You may wish to consider any in relation to an ex-partner of the perpetrator if relevant.) Bail conditions Non-Molestation/Occupation Order   Child Contact arrangements  Forced Marriage Protection Order   Domestic Violence Protection Notice/Order   Stalking Protection Order Other  |  |  |  |  |
| 27. Do you know if ( ) has ever been in trouble with the police or has a criminal history? (If yes, please specify.) Domestic Abuse Sexual violence Other violence   Breach of Orders Other  |  |  |  |  |
| Total ‘yes’ responses |  |  |

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| **For consideration by professional:** Is there any other relevant information (from victim or professional) which may increase risk levels? Consider victim’s situation in relation to disability, substance misuse, mental health issues, care and support needs, cultural/language barriers, ‘honour’- based systems and minimisation. Are there concerns that they are supportive of terrorism, an extreme ideology or is vulnerable to radicalisation?Are they willing to engage with your service? Describe:Consider abuser’s occupation/interests - could this give them unique access to weapons? Describe: |
| What are the victim’s greatest priorities to address their safety?Consider submitting a DVDS request and making the victim know you will do this.[Request information under Clare's Law: Make a Domestic Violence Disclosure Scheme (DVDS) application | Lincolnshire Police (lincs.police.uk)](https://www.lincs.police.uk/advice/advice-and-information/daa/domestic-abuse/alpha2/request-information-under-clares-law/) |
| **Do you believe that there are reasonable grounds for referring this case to MARAC? Yes / No**If yes, have you made a referral? Yes/No**Signed: Date:** |
| **Do you believe that there are risks facing the children in the family? Yes / No**If yes, please confirm if you have made a referral to safeguard the children: Yes / No Date referral made ……………………………………………. |
| **Signed: Name:** | **Date:** |

**Any further Practitioner’s Observations**

## S-DASH - DASH Additional Stalking and Harassment Risk Questions

**only to be used if you answered YES to questions 8 on the DASH.**

If you have concerns of stalking in the DASH element of this Risk assessment then please continue, so you can understand what risks there might be to your client regarding stalking.

Stalking is defined as (NPCC/CPS 2018): ***A pattern of unwanted, fixated and obsessive behaviour*** *which is intrusive. It can include harassment that amounts to stalking, or stalking that causes fear of violence or serious alarm or distress.*

**Once you have completed the checklist, and if you answer positively to any of the questions there is support from any of the national stalking organisations;**

**National Stalking Helpline** : Operated by the Suzy Lamplugh Trust, the National Stalking Helpline gives practical information, support, and advice on risk, safety planning and legislation to victims of stalking, their friends, family, and professionals working with victims.

**Free phone: 0808 802 0300 E-mai****l: advice@stalkinghelpline.****org** [**www.stalkinghelpline.**](http://www.stalkinghelpline.org/)**org**

**Paladin – National Stalking Advocacy Service -** Paladin is a service for high risk victims. High risk is defined as those who are at risk of serious harm and/or homicide.

Phone: 0203 866 4107 E-mail: info@paladinservice.co.uk [www.paladinservice.co.uk](http://www.paladinservice.co.uk)

Professionals often refer to The 8 Stages of Homicide produced by Dr Jane Monkton Smith to understand the level of stalking, please visit [Domestic abuse resources – Professional resources (lincolnshire.gov.uk)](https://professionals.lincolnshire.gov.uk/downloads/download/209/domestic-abuse-resources)

**You can also report any of these behaviours to the police for support to be offered**

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| **The Context and details of what is happening is very important. Tick the relevant box and PLEASE add the details** | **Yes** | **No** | **Don’t Know** | **State source of info if not the victim** |
| **1. Are you very frightened?** |  |  |  |  |
| **2. Is there a previous domestic abuse and/or stalking/harassment history?** [involving you and/or anyone else that you know] |  |  |  |  |
| **3. Has** [insert name of stalker(s)….] **ever destroyed or vandalised any of your property?** |  |  |  |  |
| **4. Does** [name of stalker(s)….] **turn up at your workplace, home etc unannounced or uninvited more than 3 times per week?** |  |  |  |  |
| **5. Does** [……] **follow you or loiter around your home, workplace etc?** |  |  |  |  |
| **6. Has** [……] **made any threats of physical or sexual violence?** |  |  |  |  |
| **7. Has** [……] **stalked/harassed any third party since the stalking/harassment began?** (e.g. your friends, family, children, colleagues, partners or neighbours) |  |  |  |  |
| **8. Has** [……] **acted out violently towards anyone else within the stalking incident?** |  |  |  |  |
| **9. Has** [……] **persuaded other people to help him/her?** (wittingly or unwittingly) |  |  |  |  |
| **10. Is** [……] **known to be abusing drugs and/or alcohol?** |  |  |  |  |
| **11. Have they attempted/threatened suicide?** (signs of finality and commitment) |  |  |  |  |
| **12. Is** [……] **known to have been violent in the past?** (This could be physical or psychological) |  |  |  |  |
| Insert any other relevant information below, for example: duration of stalking/harassment, various stalking/harassingbehaviours engaged in by stalker, details of threats and violence, your beliefs concerning the stalker's motives and when it started, weapons owned by the stalker, nature of unwanted 'gifts'/items left or sent to the person and attitude/demeanour of stalker including mental health issues. |
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