DORSET & WILTSHIRE FIRE AND RESCUE SERVICE

PR002 – Referral Request

(Confidential)

**To be used in conjunction with the** [**Firesetters Intervention Scheme Procedure (PCE 2)**](http://brigadehq3/pandp.nsf/MainDoc.xsp?documentId=7ADB5AC7AAA90D9080257F69004E756F&action=editDocument)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CONFIDENTIAL** | |  | | | |  | | | **DATE OF REFERRAL** | | **CASE NUMBER** | | | |
|  | | | | | | | | |  | |  | |  |  |
| **DETAILS OF REFERRER** | |  | | | |  | | |  |  |  | |  |  |
| Name | | | | | | | | | Telephone | | | | | |
| Organisation |  | Parent/Carer | | | | |  | | Mobile | | | | | |
| Organisation Name | | | | | | | | | Email | | | | | |
| Has Parent/Carer been consulted and happy for referral to go ahead? | | | | | | | | | Yes | | | No | | |
| **INDIVIDUAL BEING REFERRED** | | | | | |  | | |  |  |  | |  |  |
| Name | | | | | | | | | Age | | DOB | | | |
| Address | | | | | | | | | | | | | | |
|
| Postcode | | | | | | | | | | | | | | |
| **Parental Responsibility** | |  | | | |  | | |  |  |  | |  |  |
| Contact Name | | | | | | | | | | Phone | | | | |
| Relationship to firesetter | | | | | | | | | | Email | | | | |
| **SOCIAL SERVICES & YOUTH OFFENDING TEAM** | | | | | | | | |  |  |  | |  |  |
| Does the child/young person have a social worker? | | | | | | | | | Yes | | No | | | |
| Contact Name | | | | | | | | | Telephone | | | | | |
| Is the Youth Offending Team involved? | | | | | | | | | Yes | | No | | | |
| Contact Name | | | | | | | | | Telephone | | | | | |
| Referral Order or Court Order? | | | | | | | | | Yes | | No | | | |
| If YES, Type of Order and Expiry Date | | | | | | | | | | | | | | |
| **SCHOOL DETAILS** | | | | | | | | | | | | | | |
| School | | | | | | | | | | Year | | | | |
| Is the school aware of the firesetting? | | | | | | | | | | | | | | |
| **BRIEF HISTORY AND DETAILS** | | |  |  |  | | | | | |  | |  |  |
| Has any firesetting occurred? | | | Yes | No | When? | | | | | | | | | |
| Did the Service attend? | | | Yes | No | When? | | | | | | | | | |
| Does the child/young person have any special needs? | | | | | No | | | Yes (details below) | | | | | | |
| Details of special need and whether diagnosed or suspected | | | | | | | | | | | | | | |
|
| Details of the child/young person's preferred way of engaging eg writing, watching, drawing, playing etc | | | | | | | | | | | | | | |
|

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Details of siblings/other children living at the home | | | | | | | | | | | | | | | |
| Name | Gender | | Age | Details of note | | | | | | | | | | | |
|  |  | |  |  |  |  | |  | |  |  | |  | | |
| Has the child/young person been seen by the fire service before? | | | | | | | | | No | |  | | Yes attach old case notes | | |
| **Details of Firesetting Incidents (see PCE2SI - supporting information and include as much detail as possible)** | | | | | | | | | | | | | | | |
|
|
|
|
|
|
|
|
|
|
|
|
| Can the child/young person access matches/lighters | | | | | | | | Yes | | | |  | |  |  |
| Does the child/young person appear afraid of fire ? | | | | | | | | Yes | | | |  | | No |  |
| Does the child/young person feel remorse/upset about the fire | | | | | | | | Yes | | | |  | | No |  |
| Does the child/young person admit to the firesetting? | | | | | | | | Yes | | | |  | | No |  |
| Has the family had a Safe and Well Check? | | | | | | | | Yes | | | |  | | No |  |
| Do the family have working smoke alarms? | | | | | | | | Yes | | | |  | | No |  |
| Safe and Well Check arranged? | | | | | | | | Yes | | | |  | | No |  |
| Has standard information been sent? (Fire Safe leaflet) | | | | | | | | Yes | | | |  | | No |  |
| Information transferred on to FIS 02 | | | | | | | | Yes (Date) | | | | | | | |
| Case number given | | | | | | | | Yes Case Number | | | | | | | |
| Advisers assigned (in agreement with Firesetters Lead) | | | | | | | | Yes (Date) | | | | | | | |
| Forms placed in adviser’s file with details added | | | | | | | | Yes (date) | | | | | | | |
| **Record of calls and actions made by admin** | | | | | | | | | | | | | | | |
| **Date** | | **Action** | | | | | **Outcome** | | | | | | | | |
|  | |  | | | | |  | | | | | | | | |
|  | |  | | | | |  | | | | | | | | |
|  | |  | | | | |  | | | | | | | | |