**Local Intervention Fire Education |** Referral Form

****Please complete this form fully, and return to:

**FAO Coral Jobson**

|  |  |
| --- | --- |
| **Course No:** |  |
| **Date Received:** |  |
| **Date Entered:** |  |

**Email:** [**HFRS.Youth@hertfordshire.gov.uk**](mailto:HFRS.Youth@hertfordshire.gov.uk) **Tel:** 01992 555282

Hertfordshire Fire and Rescue Service - LiFE Project

Former Tractor Bay

Car Park H

CHG002

County Hall

Hertford

SG13 8DE

**Candidate Details**

|  |  |
| --- | --- |
| **Name of Young Person** |  |

|  |  |
| --- | --- |
| **Home Address** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Age** |  | **Date of Birth** |  | **Gender** |  |

|  |  |
| --- | --- |
| **Name of Parent/Guardian** |  |

|  |  |
| --- | --- |
| **Relationship to Young Person** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Telephone Number** |  | **Email Address** |  |

**Emergency Contact Details**

|  |  |
| --- | --- |
| **Name of Emergency Contact** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Relationship** |  | **Telephone No** |  |

**Referring Agency Information**

|  |  |
| --- | --- |
| **Name of Referral Officer** |  |

|  |  |
| --- | --- |
| **Organisation Details** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Telephone** |  | Email |  |

|  |  |
| --- | --- |
| **Length and nature of work with YP** |  |

**Education**

|  |  |
| --- | --- |
| **School/College/ESC Name** |  |

|  |  |
| --- | --- |
| **Contact Name, Number & Email** |  |

|  |  |
| --- | --- |
| **Details of Educational Concerns** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Are school aware of referral** |  | **Consent Given to Attend** |  |

**LIFE Course Selection Criteria** (Please click boxes and explain where appropriate)

|  |  |  |
| --- | --- | --- |
| **Not in Education, Employment or Training** |  | 6 Weeks or less |
|  | 2-6 Months |
|  | 6 Months + |
| **Underperforming at School**  *(Please explain your answer)* |  | Disruptive |
|  | Unmotivated |
|  | Poor interaction / Team Work |
|  | Special Needs (Please specify) |
|  | Low Self Esteem |
|  | Family Circumstance |
|  | Victim of Crime |
|  | Bullying |
|  | Poor School Attendance (please indicate %) |
|  | Other (Please Specify) |
| **School Exclusions**  *(Please explain your answer)* |  | Fixed Period Exclusion |
|  | Permanent Exclusion |
|  | Alternative Education |
|  | Other (Please Specify) |
| **Showing Signs of Anti-Social Behaviour**  *\*if a young person displays fire setting behaviour, they may need to be referred to our Fire Setter Programme prior to attending LIFE.*  *(Please explain your answer)* |  | Fire Setting |
|  | Hoax Calls |
|  | Abuse directed at HFRS, Police, Other |
|  | Damage to Property |
|  | Damage to Outdoor Space |
|  | Gang affiliation/ at risk of being involved with gangs |
|  | Other (Please Specify) |
| **Behavioural Issues**  *(Please explain your answer)* |  | Violence |
|  | Anger Management |
|  | Bullying |
|  | Confrontational |
|  | Introverted |
|  | Other (Please Specify) |
| **Specify your main reason for referral:**  *(Please explain your answer)* |  | NEET |
|  | Underperforming at School |
|  | School Exclusion |
|  | Signs of Anti-Social Behaviour |
|  | Behavioural Issues |
|  | Offending Behaviour |

**Record of Offences**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Offences Committed** *(tick as appropriate)* | **YES** |  | **NO** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Details of any known offences:**  *(Please give details of offence)* |  | Public Order | | |
|  | Property, Theft & Kindred | | |
|  | Drugs | | |
|  | Against Person | | |
|  | Motoring | | |
|  | Other (Please Specify) | | |
| **Length of known offending behaviour** | Up to 1 year | | Up to 2 years | 2 years + |
| **Frequency of offences***(Recorded or Unrecorded)* | 1 offence | | 2-5 offences | 5+ offences |
| **Is there a history of substance abuse?**  *(Please give details)* |  | | | |

**Additional Information**

Please explain the reason you are referring the young, any behavioural concerns, triggers, coping strategies, any names of people they have concerns with and what you hope for them to gain from the course. PLEASE NOTE: Referrals will not be considered if this section has not been completed.

|  |
| --- |
|  |

**Wellbeing Information** (to help us coordinate appropriate support at course delivery)

|  |  |  |  |
| --- | --- | --- | --- |
| **Disability** | Mobility | Manual Dexterity Difficulties | Visual Impairment |
| Hearing Impairment | Epilepsy | Mental Health Difficulties |
| Other (please give details) | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Learning Difficulties** | Dyslexia | Asperger’s Syndrome | Dyspraxia |
| ADHD | ADD | OCD |
| Autism | Other Please give details) | |

**Consent**

By signing below, you are confirming that you have gained consent from the parent/guardian of the abovementioned young person. In line with General Data Protection Regulations, details of what happens to the information you have provided is available on the following page.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed** |  | **Print Name** |  |

**Privacy Statement**

**Why we need your information**

The data on this form is being gathered for the purpose of the LIFE Project. Hertfordshire County Council will use this information to administrate the course.

As a Fire and Rescue Service, Hertfordshire Fire and Rescue Service (part of Hertfordshire County Council’s Community Protection Directorate) has a responsibility to promote Fire Safety under the provisions of FRS Act 2004 Chapter 21 Part 2 Section 6 Fire Safety. The information you have provided will be used to allow us to fulfil this duty / responsibility.

If applicable – the information you have provided to us will be used alongside additional information obtained from your child’s school, or other family support organisation that has referred your child to us with your prior consent.

**What we will do with your information**

The information you give us will be held by the Hertfordshire Fire and Rescue Service Youth Engagement Team, Community Protection Directorate of Hertfordshire County Council and will only be used for the administration of the course and any subsequent mentoring thereafter.

We may also share information with third parties if we are legally obliged to do so, for example if it necessary to safeguard or protect a child.

We may also share information with the police or other agencies if it is necessary for the following purposes:

a) the prevention or detection of crime

b) the apprehension or prosecution of offenders

c) the assessment or collection of any tax or duty or any imposition of a similar nature

**How long we will keep your information**

The information that you supply to us will be kept on file for 15 years.

**What are your rights?**

Hertfordshire County Council will be the Data Controller for this information.

You have a number of rights over the data we collect and hold about you.

* You have the right to be informed about what information we hold about you and how we use it.
* You have the right to request copies of any information the Council holds about you by making a subject access request.
* If information we hold about you is factually inaccurate you have the right to have it corrected.
* You have the right to object to the way we are using your data.
* You have the right to request that your data is deleted. However we may be unable to delete your data if there is a need for us to keep it. In this case you will receive an explanation of why we need to keep the data.
* You can also request that we stop using your data while we consider a request to have it corrected or deleted. There may be some circumstances in which we are unable to do this however we will provide an explanation if this is the case.
* In certain circumstances you may also request data we hold about you in a format that allows it to be transferred to another organisation.
* In the event that decisions are taken using automated processes you have the right to request that these decisions are reviewed by a member of staff and to challenge these decisions.

If you would like to request copies of your data, request that your data is deleted or have any other queries in relation to data which the Council holds about you please contact the Data Protection Team.

**Data Protection Team**

Hertfordshire County Council

County Hall

Pegs Lane

Hertford

SG13 8DQ

**Tel:** 01992 588099

**Email:** data.protection@hertfordshire.co.uk

You can also contact our Data Protection Officer at dataprotection.officer@hertfordshire.gov.uk or in writing to the address above.

If you are unhappy with the way that Hertfordshire County Council has used your data or with the way we have responded to a request you also have the right to contact the Information Commissioner’s Office www.ico.org.uk