**Professional Concern of Fire Safety Referral Form**

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| **Date of Referral:** |       |
| **Referrer Details** |
| **Safe & Well Code:** |       | **Organisation:** |       |
| **Name of referrer:** |       | **Job Title:** |       |
| **Telephone number:** |       | **Email:** |       |
| **Service User / Occupier Details** |
| **Name:** |       | **D.O.B** |       |
| **Address:** |       |
| **Post Code:** |       |
| **Contact Number(s):** |       |
| **Alternative Contact Number:***(e.g. Family member – please state name & relationship to tenant)* |       |
| **Number of people in household** | **Adults:** |       | **Children:** |       |
|  |
| **Risk Assessment** | **Yes** | **No** |
| Is the household under threat of Arson or fire related crime? | [ ]  | [ ]  |
| Does the occupant have a cognitive or physical disability that may reduce their response to a smoke alarm and/or impede them exiting the property in the event of a fire? | [ ]  | [ ]  |
| Are there signs of hazardous smoking practices in the property such as burn marks on soft furnishings / clothes or overflowing ashtrays? | [ ]  | [ ]  |
| If the occupier is cooking for themselves, are there any safety concerns e.g. forgetfulness, use of hot oil, traditional chip pan, wok etc? | [ ]  | [ ]  |
| Is there evidence of substance misuse (drugs and/or alcohol)? | [ ]  | [ ]  |
| Does the occupant have a sensory impairment? | [ ]  | [ ]  |
| Does the occupier use or have access to medical oxygen or other flammables stored within the home? | [ ]  | [ ]  |
| Does the occupier exhibit hoarding behaviours or are there any safety concerns over housekeeping and/or blocked exits? | [ ]  | [ ]  |
| Has the occupier had a previous fire? | [ ]  | [ ]  |
| Are there working smoke alarms on each level of the property? | [ ]  | [ ]  |
| Are any occupants over 65? | [ ]  | [ ]  |
| Are there identifiable unsafe electrics in the property e.g. frayed wires, overloaded sockets, scorch marks etc? | [ ]  | [ ]  |
| **If you have ticked ‘YES’ to any of the above, or you have further concerns relating to fire safety, please give further details on the next page.** |
| **Please tick to confirm that the Occupier has agreed to have details passed to SYFR: [ ]** All information recorded will be maintained in accordance with the Data Protection Act 1998 |
| **If you have ticked ‘YES’ to any of the above, or you have further concerns relating to fire safety, please give details below:** |
|       |

Please forward completed form to:

Email: cfsadmin@syfire.gov.uk

Fax: 0114 2532888

Post: Community Safety, South Yorkshire Fire & Rescue, 197 Eyre Street, Sheffield, S1 3FG

For contact by telephone please dial 0114 2532314.

DM# 404528