**Safe & Well Referral Partner Application Form**

South Yorkshire Fire & Rescue’s ***Safe & Well Referral Partner*** scheme has been created to improve the safety and wellbeing of members of the community within South Yorkshire. By developing positive and mutually beneficial partnerships with organisations and groups from the Public, Private and Voluntary Sector, the Scheme aims to improve the identification, targeting and risk management of vulnerable and excluded members of the community who may be at an increased risk of fire.

The scheme is entirely voluntary, both in respect of members and service users. The scheme is non-statutory and therefore has no impact on any other requirements that may or may not be applicable to individual organisations who become members.

**Part A – Organisation Details**

|  |  |
| --- | --- |
| Name of Organisation:  |  |
| Address of Organisation: |  |
| Telephone Number: |  |
| Email: |  |
| Wed Address: |  |
| Brief Description of the service provided: |  |
| Approximate number of clients receiving services: |  |
| Approximate number of staff: |  |
| Main Contact Details |
| Name: |  |
| Role: |  |
| Section/Team: |  |
| Telephone number: |  |
| Email Address |  |

|  |
| --- |
| Organisation Sector |
| 3rd Sector |[ ]  Health/GP |[ ]  Local Authority |[ ]  Private |[ ]  Social Housing |[ ]

|  |
| --- |
| Beneficiaries/Target GroupsPlease tick all that apply |
| All or: |[ ]
| Alcohol Users |[ ]
| Black Asian Minority Ethnic (BAME) |[ ]
| Substance Misuse |[ ]
| Faith & Belief |[ ]
| Homeless |[ ]
| LGBT+ |[ ]
| Medical Dependant Individuals |[ ]
| Obesity |[ ]
| Older People 60+ |[ ]
| People Affected by Domestic Abuse & Violence |[ ]
| People Previously Affected by Fire |[ ]
| People with Disabilities and Impairments |[ ]
| People with Mental Health Issues |[ ]
| People with Memory Impairment |[ ]
| Refugees and Asylum Seekers |[ ]
| Single Occupants |[ ]
| Single Parents |[ ]
| Smokers |[ ]
| Tenants and Residents |[ ]
| Tenants and Residents – High Rise Flats |[ ]
| Young People up to 10 years |[ ]
| Young People 11-19 years |[ ]
| Young People at risk of being excluded from School |[ ]
| Young People at risk of Offending/Young Offenders |[ ]
| Carers including Young Carers |[ ]
| Veterans |[ ]
| Suicide Prevention |[ ]
| Loneliness |[ ]
| Domiciliary Care |[ ]
| GP Practice |[ ]
| Other (Please state) |[ ]

**Safe & Well Referral Partner Membership Commitments**

**Part B**

I apply for membership of South Yorkshire Fire & Rescue’s Safe & Well Referral Partner Scheme on behalf of ***Enter name of Organisation Here.***

I confirm that I have authority to make this application on behalf of the organisation and agree that the organisation and anyone delivering services or working for the organisation will be made aware of the Safe & Well Referral Partner Scheme and associated commitments.

**Enter name of organisation here Will:**

1. Actively promote SYFR’s Home Safety Check (HSC) to service users living within South Yorkshire.
2. Promptly refer all requests received by service users for a HSC to SYFR by completing the secure online referral questionnaire or by calling SYFR’s Hotline.
3. Promptly refer any individuals for a HSC where a professional concern of fire safety has been identified by completing the secure online referral questionnaire or by calling SYFR’s Hotline.
4. Agree to relevant members of staff/volunteers receiving Fire Safety Awareness training provided by SYFR.
5. Ensure, where relevant, service user risk assessments and/or care plans consider Fire Safety in

relation to the individual’s environment, behaviours and the risk they pose to themselves and others. \*This may include recommendations stated in SYFR *Sharing Information form.*

1. Where possible, provide a link to SYFR’s website and/or SYFR safety advice on your organisations

website or other relevant media.

1. Ensure all relevant staff are made aware of the Safe & Well Referral Scheme and associated

commitments.

8. Be permitted to use the Safe and Well logo whilst a member of the scheme.

**South Yorkshire Fire & Rescue will:**

1. Assess the priority of all referrals received and arrange a HSC to be carried out within the following

timescales: **High Risk – 14 days, Medium Risk – 42 days**

1. Provide specialist fire safety equipment e.g. flame retardant bedding or throws, deaf alarms etc. when

specific risks have been identified and professionally assessed.

1. Provide a Sharing Information form to relevant/referring partner when service user and/or property is

found to be at increased risk, to enable integration of risk reduction recommendations into care/support plans.

1. Provide monitoring information on the number of referrals received and the number of HSCs conducted as a result of membership of the Safe & Well scheme.
2. Make further referrals to other appropriate agencies where a specific vulnerability or risk has been

identified.

1. Advise the partner when SYFR have been unable arrange a HSC with the service user.
2. Advise the partner when a service user and/or property is found to be High Risk and we have been unsuccessful in engaging with service user and/or implementing risk reduction action.
3. Ensure any information recorded is maintained in accordance with the Data Protection Act 2018.
4. Take action to end the partnership if any member of the organisation, or person delivering services on its behalf, brings or is likely to bring disrepute upon SYFR, and reserves the right to cancel membership without notice.

|  |  |  |
| --- | --- | --- |
| Are there any addition commitments which have been agreed within this partnership? *If yes please complete Part C*  | Yes [ ]  | No [ ]  |
| Signature of Main Partner Contact |  | Date |  |
| Signature of SYFR CSTL/GM |  | Date |  |

**Part C**

Please describe any additional commitments within this partnership below, e.g. reciprocal training arrangements and/or referral commitments, attendance at events, meetings etc.

**Partner Additional Commitments**

Enter Text Here

**SYFR Additional Commitments**

Enter Text Here