

ASB Case Review Summary



For initial completion by the lead agency appointed by the OPT,
prior to challenge & review by core ASBAG partners.

Agency Completing the ASB Case Review			
Agency Name			
Name of Reviewer			
Position			
Phone No.		Email	

ASB Victim Details			
Name			
Address			
Date of Birth			
Phone No.		Email	
Preferred means of contact:			
Describe any relevant vulnerabilities			

Advocate Details (person referring, if relevant)			
Name			
Organisation (if applicable)			
Position			
Phone No.		Email	

ASB Case Review Summary

Summary of ASB

To include days, times etc. when most prevalent, witnesses and other evidence gathered

Impact of ASB on Victim

Alleged Perpetrators

1.	Name	
	Address	
2.	Name	
	Address	
3.	Name	
	Address	

ASB Case Review Summary

Which Agencies have been involved?	
Summarise the response of each to date:	
Police	
District Council	
Registered Social Landlord(s) – victim & perpetrator	
YOT	
Children’s Services / School	
Health (for drug / alcohol / mental health issues)	
3rd Sector providers including mediation	
Other	

Identified Support Needs (and whether in place at time of the review)	
e.g. Social Care Services, Mental Health, Victim Support, Tenancy Support	
Victim	
Perpetrator	

ASB Case Review Summary

What enforcement action/diversionary activity has taken place so far?
e.g. ASBI, tenancy breach warnings / NoSP, Noise abatement notice, arrest of suspects, Dispersal, CPNs, CBOs, PSPOs, Closure Orders, Mandatory Grounds for Possession, RJ etc.

Are there further evidence gathering opportunities?
Consider door knocks for witnesses, installation of recording/monitoring equipment, use of professional witnesses, use of hearsay evidence in civil proceedings etc.

Lead agency to complete the following section initially. For review and consideration by the multi-agency Case Review Panel:

Have all reasonable measures been taken to address the problem?			
<input type="checkbox"/> Yes			
<input type="checkbox"/> No			
If No, suggested Action Plan to address the ASB problem:			
	Action Required	By Whom	By When
1.			
2.			
3.			
4.			

ASB Case Review Summary

Challenge & Review by core ASBAG Partners	
Chair of Review Panel	
Attendees	
Date Review Panel held	
Further Action Required?	
Action Plan Reviewed, amended & agreed?	
Interested parties informed of action plan and provided copy:	