# Anti-social behaviour case review

An anti-social behaviour (ASB) case review is a tool for tackling anti-social behaviour. Please provide as much detail as possible when giving information about incidents that have taken place and the people involved.

Email the completed form to communitysafetyteam@southglos.gov.uk or print and post it to: South Gloucestershire Council, Department for Place, Anti-Social Behaviour Team, PO Box 1954, Bristol, BS37 0DD.

## Have you reported this incident to the police, council or housing association?

Please give details including any officer or staff names and reference numbers you may have.

## Is the ASB case review being activated individually or on behalf of the community?

## If the ASB case review is being activated on behalf of the community, provide names and addresses of those parties:

## Please confirm you have the agreement and consent of any parties mentioned in the question above. All parties will be contacted.

## When and where did the incident(s) take place?

## What has happened?

## Who was involved in the incident(s)?

## Has anyone else witnessed this?

## Please confirm what (if any) action has been taken:

## How are these incidents affecting you?

## Your details

Please provide your details so we can contact you. If you’re completing this form on behalf of a friend or client of your service, please provide details of the person affected by this situation:

**Name:**

**Address:**

**Phone:**

**Email**:

### Which of these options best describes you?

Council tenant [ ]

Private tenant [ ]

Owner/occupier [ ]

Housing association tenant [ ]

Other [ ]

### What is your ethnic origin?

Mark the appropriate box or write in the space provided.

Arab [ ]

Asian / Asian British – Bangladeshi [ ]

Asian / Asian British – Indian [ ]

Asian / Asian British – Pakistani [ ]

Asian / Asian British – Chinese [ ]

Asian / Asian British – Other (please state)

Black / African / Caribbean / Black British – African [ ]

Black / African / Caribbean / Black British – Caribbean [ ]

Black / African / Caribbean / Black British – Other (please state)

Gypsy or Traveller of Irish Heritage [ ]

Mixed / multiple ethnic groups – White and Asian [ ]

Mixed / multiple ethnic groups – White and Black African [ ]

Mixed / multiple ethnic groups – White and Black Caribbean [ ]

Mixed / multiple ethnic groups – Other (please state)

White – English / Welsh / Scottish / Northern Irish / British [ ]

White – Irish [ ]

White – Other (please state)

Other ethnic group (please state)

Prefer not to say [ ]

### What gender do you identify as?

Female [ ]

Male [ ]

Other [ ]

Prefer not to say [ ]

### Do you consider yourself to be disabled?

Mark the appropriate box or write in the space provided.

No, I do not have any disabilities [ ]

Prefer not to say [ ]

Yes, physical impairment such as difficulty using arms or mobility issues
which means using a wheelchair or crutches [ ]

Yes, sensory impairment such as being blind or having a serious visual
impairment, or being deaf or having a serious hearing impairment [ ]

Yes, mental health condition such as depression, anxiety or
schizophrenia [ ]

Yes, learning disability or difficulty such as Down’s Syndrome, dyslexia,
dyspraxia or cognitive impairment such as autistic spectrum disorder [ ]

Yes, long standing illness or health condition such as cancer, HIV,
diabetes, chronic heart disease or epilepsy [ ]

Yes, other (please state)

### If yes, please tell us how this affects the way you access or use council services:

### What is your sexual orientation?

(Used by service areas where deemed to be relevant, i.e. a clear rationale for asking this question has been identified.)

Bisexual [ ]

Gay man [ ]

Gay woman / lesbian [ ]

Heterosexual [ ]

Other [ ]

Prefer not to say [ ]

### What is your religion?

(Used by service areas where deemed to be relevant, i.e. a clear rationale for asking this question has been identified.)

Mark the appropriate box or write in the space provided.

Buddhist [ ]

Christian [ ]

Hindu [ ]

Jewish [ ]

Muslim [ ]

Sikh [ ]

Other religion (please state)

No religion [ ]

Prefer not to say [ ]

### Do you identify as a transgender person?

(Used by service areas where deemed to be relevant, i.e. a clear rationale for asking this question has been identified.)

Yes [ ]

No [ ]

Prefer not to say [ ]