**DIVERSION FROM PROSECUTION: SUITABILITY REPORT**

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| **Diversion from Prosecution – Suitability Report** |
| COPFS Reference |  |
| SW Reference |  |
| Local Authority |  |

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| **Referring Procurator Fiscal**  |
| Name  |  |
| Telephone Number |  |
| Email |  |

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| --- |
| **Person’s Details** |
| Name |  |
| Date of Birth |  |
| Address |  |

**To be completed by PF:**

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| **Summary of alleged offence** |
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| **Details of identified need(s)** |
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| **Victim Consideration(s)** |
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| **Nature of DfP Case**  |
| Date of Referral |  |
| Receiving Local Authority |  |
| Pathway |  |

**To be completed by Local Authority:**

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| **Report Author**  |
| Name  |  |
| Telephone Number |  |
| Email |  |
| Position |  |
| Date |  |
| Signature |  |

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| **Pathway A – there is no pre-sentence risk assessment tool. This Suitability Report is focused on the welfare needs identified by the PF, through interview and the use of an appropriate needs assessment, for example outcome star or radar chart. DfP does not deliver risk-based interventions.** |
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| **Pathway B - due to the nature of the alleged offence Justice Services do not have an appropriate pre-sentence risk assessment tool to identify the potential risks and intervention/treatment needs that may be required to safely manage the potential risks in the community. This Suitability Report is focused on the welfare needs identified by the PF, through interview and the use of an appropriate needs assessment, for example outcome star or radar chart. DfP does not deliver risk-based interventions.** |

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| **If SUITABLE** |
| **Interview/verification** |
| (interview details, documents referenced, verification, liaison etc.) |
| **Assessment** |
| (needs, details of alleged offence, victim attitudes, rationale etc.) |
| **Intervention Plan** |
| (activities, referrals, intervention, outcomes etc.) |
| **Indicative Timescale** |
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| **DfP – assessed as unsuitable – choose one option and provide detail** |
| **Person refused – state evidence** (contact made but they did not engage with the DfP process or has explicitly stated they do not wish to participate) |
| **Unable to make contact – state evidence** (social work has been unable to make contact with them despite the following attempts) |
| **Agency assessment indicates unsuitability – state evidence** (the person cannot be appropriately dealt with by Local Authority) |
| **Other – state evidence**  |