

 **Managing Allegations About Adults Working with Children & Young People**

**Referral/Consultation form for the Local Authority Designated Officer (LADO)**

The referral form must be completed and emailed to the Duty Local Authority Designated Officer (LADO) if there are concerns/allegations that a person who works with children has:

* Behaved in a way that has harmed, or may have harmed, a child,
* Possibly committed a criminal offence against, or related to, a child,
* Behaved towards a child or children in a way that indicates they may pose a risk of harm to children; or
* behaved or may have behaved in a way that indicates they may not be suitable to work with children.

The manager should make the referral to the LADO within 1 working day to the email address below. You may be asked to follow up a telephone call with a written referral if the case is complex.

Email: LADO@southend.gov.uk(ensure information is sent securely)

Tel **01702 534591**

Do not assume that the form has been received – telephone Allison Francis, LADO, or Sharon Langston, Safeguarding Advisor, on the above number

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|  For child protection enquiries that are not related to an allegation about a professional, please call 01702 215007 or email c-spoc@southend.gov.uk If you think a child is at immediate risk of significant harm, call the Police. |

When receiving an allegation:

* Treat it seriously and keep an open mind
* **Do not** investigate
* **Do not** make assumptions or offer alternative explanations
* **Do not** promise confidentiality
* Record the details using the child/adult’s own words
* Note time/date/place of incident(s), persons present and what was said
* Sign and date the written record
* Do not tell the member of staff/volunteer if this might place the child at risk of significant harm or jeopardise any future investigation.
* Refer to the SET Child Protection Procedures [Downloads – Children | Safeguarding Southend Partnership](https://safeguardingsouthend.co.uk/downloads-children/)

Allegations Management

Please ensure that initially details annotated with \* are completed – other detail can follow later.

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| Referral date:\* |

## Key Dates/times\*

|  |  |
| --- | --- |
| *Complete as appropriate* |  |
| Date of initial discussion with LADO or the name of the person you spoke to.\* |  |
| Date and time the allegation/concern was **reported** to Designated Senior Manager for allegations\* |  |
| Date and time of alleged incident\* |  |
| If historic allegation, approximate date, or year of incident/s\* |  |

## Details of adult who is the subject of the allegation or concern

|  |  |
| --- | --- |
| Full name\* |  |
| Gender\* |  |
| Role/job title\* |  |
| Name and address of the setting/employer where the adult works/volunteers. \* |  |
| Home address |  |
| Date of birth\* |  |
| Ethnicity |  |
| Adult’s relationship with your setting\*(e.g. employee, volunteer, contractor) |  |
| How long employed/volunteering? |  |
| Are there any pre-existing capability concerns regarding this member of staff (not necessarily safeguarding related)? |  |
| Does this person work with children or vulnerable adults in any other capacity? *Please give details.* |  |
| Does this person have children of their own?*Please give details*  |  |
| Have there been any previous allegations or concerns regarding this person?*Please give details*  |  |
| Is the adult aware that an allegation or concern has been raised? |  |
| What immediate safeguards have you put in place?\* |  |

## Details of the child/young person subject to the allegation or concern

*If more than one child/young person involved, please give details in further notes section*

|  |  |
| --- | --- |
| Full name\* |  |
| Gender\* |  |
| Date of birth\* |  |
| Home address |  |
| Ethnicity  |  |
| Parents’/carers’ names and contact details |  |
| Who has parental responsibility for the child/young person? |  |
| Has this child/young person made any previous allegations? |  |
| Are other professional/agencies working with this child/young person? *Please give details* |  |

## Agencies and Departments aware of the allegation

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| --- | --- |
| Have any other agencies such as Police, Social Care, HR, been informed\* *please provide full contact details.* |  |

## The allegation or concern/complaint

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| Please **summarise** the allegation or concern below:\* |
|   |
| How did the allegation/concern emerge? e.g. child disclosed/parent complained/concerned professional, etc?\* |  |
| Does the child/young person have an injury? If so, describe the injury\**If the injury has not been seen, describe what has been disclosed* |  |
| Was the alleged incident witnessed*? If so, please give details\** |  |
| Have parents/carers of the child been informed? Give details, including reasons if not informed at this stage\* |  |

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| **Further notes:** Please use this space to expand on any of the questions above or give other relevant information. You may also attach other relevant documents if required. |

## Referrer’s details:

|  |  |
| --- | --- |
| Name\* |  |
| Role\* |  |
| Name of setting\* |  |
| Contact details (Tel)\* |  |
| Contact details (E-mail)\* |  |
| Name of **Designated Senior Manager** for allegations if different from above\* |  |

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| --- | --- |
| Referrer’s signature\**When sending by e-mail please use electronic signature if available* |  |