

AGENCY REPORTING FORM FOR ALLEGATIONS AGAINST STAFF AND VOLUNTEERS WORKING WITH CHILDREN WITHIN THE LONDON BOROUGH OF LAMBETH

WHEN TO USE THIS FORM

This form must be filled in and sent to the Local Authority Designated Officer (LADO) in Lambeth in every case where it is *alleged* that a person working with children may have

1. behaved in a way that has *harmed* or may have harmed a child
2. possibly committed a *criminal offence* against or related to a child
3. behaved towards a child or children in a way that indicates they may pose a risk of harm to children

Whilst it may not be necessary to convene a Allegations Against Staff / Volunteers or Strategy Meeting with Social Care and the Police it should be referred to the LADO where the incident poses risk of harm to a child from a person in an employed / volunteering position of trust to children. The LADO is based in the Quality Assurance Section, Lambeth CYPS Social Care. The LADO can be contacted on 0207 926 4679.

You may be asked to provide associated relevant documentation with this referral form. Once the information has been evaluated by the LADO you will be advised re the appropriate action to be taken.

AGENCY DETAILS	
Date of referral	
Referrers name	
Referrers job title	
Place of work & address	
Tel number	
Email	
Best contact times	
Who is your Designated Manager/Child Protection Lead	
If a school please give contact details of Head and Chair of Governors	
Status of organisation e.g. LA, private, voluntary etc	
Who is your HR provider for allegations against staff?	
Has the HR provider been consulted and what was their view?	

ALLEGATIONS DETAILS				
Date of alleged incident				
Date allegation reported to referrer				
Category of Abuse Alleged – please tick	Physical	Emotional	Sexual	Neglect

Who has made the allegation e.g. child, parent, other professional etc	
How was the allegation e.g. in person, by phone, letter and to whom	
Who else has been informed regarding allegation	
Full details of allegation	
Where is it alleged the incident took place	
What action if any has been taken regarding the allegation? (NB – Must not carry out an investigation, only initial enquiries)	
Is there an allegation of an injury and if so describe the injury?	
Has a member of staff seen the injury? (If so they may be asked to complete a body map diagram)	
If an injury has been sustained, has the parent been advised to take child to GP.	
Are written incident reports available and if so by whom? Please supply them.	
Are there witnesses to the alleged incident? Please give details	
If there has been a delay in reporting the allegation please state why?	
Are the parents/carers of the child aware of the allegation? State when and their views.	
If appropriate, is the child aware of the referral and what are their views?	
Did an allegation of physical abuse follow an authorised restraint?	Yes No If yes - please send copy of Incident Report and Behaviour Management Plan.
If allegation relates to restraint has staff member had team teach or similar training and when?	

Details of person/s subject to the allegation (please repeat box if more than one person)	
Person subject to allegation known/unknown	
First name	
Surname	
Title	
Job title	
DOB	
Home address	
Ethnicity	
Length of employment	
Date of last DBS / State any convictions / safeguarding trace for the subject	
Details of references taken?	
What is the status of the employment e.g. f/t, p/t, agency, volunteer etc	
If agency etc. please give contact details?	
Have they been subject to previous allegations and if so provide full details?	
Are there any other concerns/issues of relevance re this person?	
Does this person work in any other capacity with children either paid/unpaid?	
Does this person have children of their own?	
Has the person been suspended?	

Details of potential victim/child (please repeat box if more than one child)	
Alleged victim known or unknown/no victim	
First name	
Surname	
DOB	
Gender	
Ethnicity/Religion	
Home address/tell	
Parent's/carers names/contact details	
Who has parental responsibility?	

Are there issues of disability / communication / literacy for child or parent/carer?	
Any other family members / significant persons for this child?	
Has the child made a previous allegation and if so give details?	
If this a looked after child, or a child subject to a child protection plan or a child in need plan?	
Are there other professionals working with this child?	
GP details	
Are there any known concerns about this child's home life?	

Please give details of any other information of relevance

Action Taken:

How long did the investigation take from the point of allegation until conclusion?	
1 Month	
3 Months	
12 Months	
12 Months +	

Next Steps:

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Referrer's name:

Referrer's signature:

(Please add electronically if referring by email)

Date:

Please return to – LADO@lambeth.gov.uk

And to the Duty Manager helpandprotection@lambeth.gov.uk (unsecure)
help.protection@lambeth.cjsm.net (secure)

02079263100

The referral form should be completed and returned within 24 hours (1 working day) of incident occurring.

LADO: Andrew Zachariades – Tel: 0207 926 4679