**LADO Contact / Referral Form**

**All new LADO related information/referrals, including advice and guidance must be included on this contact / referral form. The form must then be completed and returned to the email address below before any consultations with LADO will take place.**

Please email completed referrals forms to:

 email: LADO@dcstrust.co.uk

If you are concerned that a child may be at risk of immediate harm do not wait for a response from the LADO and contact Doncaster Children’s Services Trust, Office hours 01302 737777, Out of Hours 01302 796000 or Police phone 101 or in an emergency 999

**For reporting allegations against staff, carers and volunteers working with children within Doncaster Metropolitan Borough Council**

This form must be completed WITHIN 24 HOURS and sent to the Local Authority Designated Officer (LADO) in Doncaster Children’s Service Trust in every case where it is *alleged* that a person working with children has

* Behaved in a way which has harmed a child, 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 which indicates that he/she is unsuitable to work with children\*.

\*In relation to teachers and staff (including volunteers) in a school or FE college that provides education for children under 18, the third bullet point should be amended to read ‘behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children’ as outlined in the **DfE ‘Keeping Children Safe in Education' – Statutory Guidance for Schools and Colleges**.

Procedure for Allegations Against Staff, Carers and Volunteers can also be applied if;

• A complaint or an allegation is made against a person in relation to his/her work with adult service users, which causes concern about the welfare of an adult service user’s children or if the person also has another role working with children

• A complaint or an allegation is made against a person in relation to a matter that may indicate that the person may not be suitable to work with children.

Doncaster Safeguarding Children Board (DSCB) Procedure for Allegations Against Staff, Carers and Volunteers can be found at:

<http://doncasterscb.proceduresonline.com/chapters/p_alleg_staff_vols.html?printMe.x=13&printMe.y=8&printMe=Print+this+Page>

|  |
| --- |
| **Section 1.** |
| **Date referrer became aware of the concerns:** | **Date referral received by LADO:** |
|  |  |
| **Name of person making the referral:** | **Referrer’s job title:** |
|  |  |
| **Name of Agency/organisation:** | **Place of work & address:** |
|  |  |
| **Telephone:**  | **E-mail (secure if possible):** |
|  |  |
| **Please attach any relevant incident reports to this form** |
| **Before making this referral, who else has been consulted?****e.g. HR advisor, your organisation’s own safeguarding advisor or any other relevant person/organisation** |
|  |
| **Section 2.** **PLEASE NOTE - The accused adult must not be informed of the allegations before consideration has been given to the implications this may have on any subsequent investigation** |
| **When considering the allegation, which of the following best describes the way the accused adult may have acted?** (Please tick whichever is relevant) |
|  | Behaved in a way which has harmed a child, 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 which indicates that he/she is unsuitable to work with children |
|  | A complaint or an allegation has been made against a person in relation to his/her work with adult service users, which causes concern about the welfare of an adult service user’s children or the person also has another role working with children |
|  | A complaint or an allegation is made against a person in relation to a matter that may indicate that the person may not be suitable to work with children. |
| Category of Abuse Alleged **–** (Please tick whichever is relevant)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Physical | Emotional | Sexual | Neglect | Conduct |
|  |  |  |  |  |

 |
| **Who has made the allegation? e.g. child, parent, other professional etc.**  |
|  |
| **Give full details of the allegation. If there is an allegation of an injury please describe** |
|  |
| **What action if any has been taken regarding the allegation?**  |
|  |
| **Are written incident reports available and if so by whom? Please supply if available.**  |
|  |
| **If there has been a delay in reporting the allegation (more than 24 hours), please state why** |
|  |
| **Who else has been informed regarding the allegation?** |
|  |
| **If necessary has any immediate action been taken to safeguard any child or a referral made to either Children’s Social Care and/or the Police.**  |
|  |

|  |
| --- |
| **Section 3. Details of person/s subject to the allegation** (please repeat box if more than one person) |
| First name |  |
| Surname |  |
| Title |  |
| Job title |  |
| Place of work |  |
| Date of birth |  |
| Home address |  |
| **If agency etc please give contact details** |
|  |
| **If this person works in any other capacity with children either paid/unpaid please give details** |
|  |
| **Does this person have children of their own (less than 18yrs old)? If so please give their details**  |
|  |
| **Has any action been taken regarding the accused adult in relation to suspension, or alternatives to suspension? If so please give details.**  |
|  |
| **Other information of relevance re the accused adult and the allegation** |
|  |

|  |
| --- |
| **Section 4. Details of potential victim/child** (please repeat box if more than one child) |
| First name |  |
| Surname |  |
| Date of birth |  |
| Gender |  |
| Home address |  |
| **Please summarise any disability, communication or mental health difficulties the child may have** |
|  |
| **Does the child have an allocated social worker or other key professional working with them? If so please give their name, contact details (tel No. & email) and role.**  |
|  |
| **Other information of relevance re this child/young person and the allegation** |
|  |

|  |
| --- |
| **What steps are you taking to obtain any missing information on this form and when will this be available?** |
|  |

**Please give details of any other information of relevance**

|  |
| --- |
|  |

**Referrer’s signature:**

(Please add electronically if referring by email if possible)

**Please return to:** Email: LADO@dcstrust.co.uk