

|  |
| --- |
| **LADO REFERRAL FORM - ALLEGATIONS AGAINST STAFF OR VOLUNTEERS** |
| Please contact the LADO on 01344 351572 to discuss if you are unclear about completing this form. Completed form to then be emailed to [LADO@bracknell-forest.gov.uk](mailto:LADO@bracknell-forest.gov.uk)  The LADO should be made aware of any concerns within **one working day** and will then also respond within one working day to discuss the next steps. |

|  |
| --- |
| **REFERRER DETAILS** |
| **Name of referrer:** |
| **Job title and organisation:** |
| **Contact details** *(email and*  *telephone number):* |
| **Designated safeguarding lead /**  **manager:** |
| **HR lead for allegations against staff:** |

|  |
| --- |
| **INFORMATION ABOUT ALLEGED PERPETRATOR** |
| **Name:** |
| **Address:** |
| **DOB:** |
| **Gender:** |
| **Ethnicity:** |
| **Job title:** |
| **Status of employment** *(full time/ part*  *time/ agency)****:*** |
| **Date of last DBS** *(if known):* |
| **Have they been subject to**  **previous allegations** *(if so please*  *provide details):* |
| **Does individual have children of their own:**  *(If yes please give details)* |
| **Does individual work with children**  **in any other capacity than current**  **role:**  *(If yes please give details)* |
| **Has advice been taken from HR /**  **person been suspended:** |

|  |
| --- |
| **INFORMATION ABOUT THE ALLEGATION OR CONCERN:** |
| **Date of alleged incident:** |
| **Date allegation reported to referrer:** |
| **If not reported to the LADO within**  **24 hours of the incident, reason why:** |
| **Who has made the allegation**  *(child/ parent/ other professional)****:*** |
| **Who else has been informed**  **regarding the allegation?** |
| **Please give full details of the**  **allegation:**  *(Where it occurred, details of any*  *injury, any incident reports or*  *witnesses, what actions have been*  *taken)* |
| **Have the parents / carers of the**  **child been informed?** |
| **Has the person against whom the allegation was made been informed?**  *(This will need to be undertaken, please*  *liaise with LADO around what*  *information can be shared before*  *doing so)* |

|  |
| --- |
| **INFORMATION ABOUT ANY CHILD IDENTIFIED:** |
| **Name of child/ren:** |
| **DOB:** |
| **Gender:** |
| **Ethnicity:** |
| **Address:** |
| **Parents/carers names:** |
| **Contact details:** |
| **Any issues of disability / literacy**  **for child or parents:** |
| **Please detail any other issues of**  **relevance:**  *(Any previous allegations made, other concerns held, child on Child in Need*  *or Child Protection Plan)* |

**Referrer’s signature:**

*(Please add electronically if referring by email if possible)*