

Allegations against a person who works or volunteers with children

Referral / Request for Consultation

This form is to be completed on every occasion when an allegation is made against a member of staff, volunteer, or foster carer.

Form to be sent to the Local Authority Designated Officer within one working day of the allegation being reported

Please email the completed form to <u>LADO@bristol.gov.uk</u>

Details of the person completing this form										
Name										
Job Title										
Organisation										
Email address										
Telephone No.						Date				
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Details of the pr	ofessional	or volu	unteer	agains	t whom t	the alle	egatio	on or cor	ncern has	been
Full Name	Date of Birth									
Home Address						·				
Role	Length of employment									
Employer or Orga	anisation									
Place/base of wor	rk									
Does the person with children in a [provide details]										
For agency staff – please provide the name of the agency, a contact name, and a telephone number or email address Has the agency been notified?					Y / N					
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Details of the child [if the complainant is an adult raising historic concerns, please enter their details here]						
Full Name					Date of Birth	
Home Address						
Name of Parent and contact details						
Lead professional contact details i.e. social worker						
Details of any children,					ıtside of their em	nployment
Names:						
DOBs:						
Address (if different to above)						
Relationship to the professional / volunteer						
Which of the following criteria do you consider the allegation meets? tick all that apply						
Has harmed or may have harmed a child?						
Is possibly a criminal offence against or related to a child?						
Indicates the individual poses a risk of harm to children?						
Behaved in a way that indicates they may not be suitable to work with children?						
			OR:			
I am unsure and I am	seeking	advice and g	juidance			
			ncident or cor	icern		
Date and time of incid	lent:					
Location of incident:						
Summary of the inc [please provide as muce evidence of harm, any a	h inform		sible including wh	nat led up	o to the incident, an	y witnesses,

Previous concerns or allegations regarding the professional or volunteer
Information about the child or young person [How was the child behaving, have they made previous allegations, do they have a disability, SEN etc]
Any other relevant information you wish to provide

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