

# Managing Allegations Policy

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## Managing Allegations Procedure at Illuminate AP

In the event of an incident or allegation concerning a member of staff or representative of **Illuminate AP**, the following actions will be taken:

#### Notification:

 Details of the allegation will be given to either the Operations Manager or Operations Director. A completed and signed incident report form will be required.

## **Immediate Suspension:**

 Depending on the nature of the allegation, the member of staff/representative of the company may be suspended with immediate effect pending an investigation. Advice will be sought from the Local Authority Designated Officer (LADO).

#### **Initial Meeting:**

A meeting will be held between the designated Manager (or a member of the management team if the Manager is unavailable), a member of Illuminate
Management, and the individual against whom the allegation has been made. This meeting will allow the individual the opportunity to address and respond to the allegation.

#### **Outcome and Review:**

The results of the meeting will be reviewed and shared with the LADO, and a decision will be made regarding the return to work.

# **Concerns Regarding Child Welfare or Safety:**

If any **Illuminate AP** staff member or representative is concerned for the welfare or safety of a child in their care, the following actions must be taken:

# **Discreet Discussion:**

 Contact the Operational Manging Director or Director discreetly to discuss concerns.

### Record-Keeping:

 Record the details of the concern on paper, ensuring a clear and accurate account of the events leading to the suspicions is made. This record must be signed and dated.

#### Seeking Advice:

In all cases of concern, advice will be sought from the Local Authority.

### Monitoring:

 Based on the advice received, the relevant Director (or member of the management team if the Director is unavailable) will monitor the situation and escalate the concern if necessary.

# **Urgent Situations:**

 In urgent cases where same-day action is required (e.g., physical abuse or recent allegations of sexual abuse), ensure the young person is safe while you take immediate action (e.g., seeking medical attention). The **Operational**



**Manging Director** or **Director** must be informed immediately, and they will contact the Police, Social Services, or the relevant referral authority.

#### **Documentation:**

 Record the date, time, and details of the events as soon as possible, ensuring the record is signed and witnessed where possible.

# Referral to Local Authority:

If a child appears to be suffering harm to their emotional or physical health, the **Designated Safeguarding Lead** or appropriate Director will refer the matter to the **Local Social Services team** or the **Police Child Protection team** if Social Services are unavailable.

# **Record Keeping of Allegations:**

In line with **Data Protection** guidelines, all records relating to allegations must be kept as follows:

- Adequate and Relevant: Records must be adequate, relevant, and not excessive for the purpose(s) for which they are held.
- Accurate and Up to Date: Ensure records are accurate and kept up to date.
- Retention: Records must only be kept for as long as necessary.
- **Purpose of Records**: Clearly understand the reason for keeping records (e.g., child protection concerns) and assess how long they need to be retained.
- **Destruction**: Have a plan in place for how and when records will be destroyed.

### **Keeping Personal Information Secure:**

- File Management: Compile and label files carefully.
- **Confidentiality**: Files containing sensitive or confidential data should be kept secure and access granted on a 'need to know' basis.
- Access Logs: Maintain a log of who has accessed confidential files, when they accessed them, and the titles of the files.
- **Electronic Security**: All electronic documents must be password-protected and accessible only to authorised individuals.
- CPOMS System: Implement the CPOMS system where available. CPOMS Staff Safe must be used in the case of allegations.

### **Informing Children and Adults:**

Children and adults involved in our services or activities will be informed about:

• What records are held, why we hold them, and who they might be shared with (e.g., as part of a multi-agency child protection team).



• For child protection reasons, consent from the individuals concerned is not necessarily required when keeping such records.

#### **Relevant Contact Details**

If you would prefer to contact the LADO directly, or to discuss a concern that the LADO is already aware of, then please contact **01305 221122 or LADO@dorsetcouncil.gov.uk** 

Annex 1:

Process for raising concern for Dorset Council Children.

#### Introduction

Anyone who has concerns about a child's welfare can make a referral to Children's Social Care. Referrals can come from the child themselves, practitioners such as teachers, early year's providers, the police, probation service, GPs and health visitors as well as family members and members of the public.

Contacts from practitioners to Children's Social Care usually fall into three categories:

- Requests for information from Children's Social Care.
- Provision of information such as notifications about a child or their family.
- Requests, for services for a child, which will be in the form of a referral.

Children's Social Care has the responsibility to clarify with the referrer the nature of the concerns and how and why they have arisen.

The local <u>Pan-Dorset Continuum of Need</u> provides guidance about the criteria for making and receiving referrals.

The child must be seen by a qualified social worker as soon as possible following a referral and the child's needs and safety remain paramount at all times.

# 2. The Duty to Refer

All practitioners have a responsibility to refer a child to Children's social care under section 11 of the Children Act 2004 if they believe or suspect that the child:

- Has suffered significant harm.
- Is likely to suffer significant harm.
- Has a disability, developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent) under the Children Act 1989.
- Is a Child in Need whose development would be likely to be impaired without provision of services.

When practitioners make a referral to Children's social care, they should include any preexisting assessments such as an early help assessment in respect of the child. Any information they have about the child's developmental needs, the capacity of their parents



and carers to meet these within the context of their wider family and environment should also be provided as a part of the referral information.

The referrer must always have the opportunity to discuss their concerns with a qualified social worker.

Where a child or young person is admitted to a mental health facility, practitioners should consider whether a referral to local authority children's social care is necessary.

# 3. Making a Referral

For all referrals to Children's social care, the child should be regarded as potentially a child in need, and the referral should be evaluated on the same day that it was received. A decision must be made within **one working day** about the type of response that is required.

In Dorset you will no longer be asked to complete an inter-agency referral form, and all referrals will be taken following a professional discussion on the telephone. All phone calls will be confirmed in writing by the consultant social worker, but it is also best practice that you keep a record of the contact you have made, the discussion and any decisions made. You should also record whether you have obtained parental consent and if not, why not.

There are no changes to the Bournemouth, Christchurch & Poole referral process.

The referrer should provide information about their concerns and any information they may have gathered in an assessment that may have taken place prior to making the referral. The referrer will be asked for information about some of the following:

- Full names (including aliases and spelling variations), date of birth and gender of all child/ren in the household.
- Family address and (where relevant) school / nursery attended.
- Identity of those with parental responsibility and any other significant adults who may be involved in caring for the child such as grandparents.
- Names and date of birth of all household members, if available.
- Where available, the child's NHS number and education UPN number.
- Ethnicity, first language and religion of children and parents.
- Any special needs of children or parents.
- Any significant/important recent or historical events/incidents in child or family's life.
- Cause for concern including details of any allegations, their sources, timing and location.
- Child's current location and emotional and physical condition.
- Whether the child needs immediate protection.
- Details of alleged perpetrator, if relevant.
- Referrer's relationship and knowledge of child and parents.
- Known involvement of other agencies / practitioners (e.g. GP).
- Information regarding parental knowledge of, and agreement to, the referral.



The child's views and wishes, if known.

Other information may be relevant, and some information may not be available at the time of making the referral. However, there should not be a delay in order to collect information if the delay may place the child at risk of significant harm.

When sharing information about a child or family with Children's Social Care, it is good practice for practitioners to be transparent about their concerns and to seek to work cooperatively with parents or carers. Practitioners should therefore usually inform parents or carers (and the child depending on their age and level of understandings) that they are going to make a referral.

However, referrals can be made without first informing parents or carers where to do so would place a child at risk.

Where a practitioner makes a referral without informing the parents or carers this must be recorded in the child's file with reasons and confirmed in the referral to Children's Social Care.

All referrals from practitioners should be confirmed in writing, by the referrer, within 48 hours. If the referrer has not received an acknowledgement within three working days, they should contact Children's social care again.

# 4. Receiving a Referral

The social worker will discuss the concerns with the referrer and considered any previous records in relation to the child and family in their agency. The social worker will establish:

- The nature of the concerns.
- How and why, they have arisen.
- The child's views, if known.
- What the child's and the family's needs appear to be.
- Whether the family are aware of the referral and whether they are in agreement with it or not.
- Whether the concern involves abuse or neglect; and
- Whether there is any need for any urgent action to protect the child or any other children in the household or community.

A decision to discuss the referral with other agencies without parental knowledge should be authorised by a Children's social care manager, and the reasons recorded.

This checking and information gathering stage must involve an immediate assessment of any concerns about either the child's health and development, or actual and/or potential harm, which justify further enquiries, assessments and / or interventions.

Interviews with the child, if appropriate, should take place in a safe environment. All interviews with the child and family members should be undertaken in their preferred language and where appropriate for some people by using non-verbal communication methods.

The Children's social care manager should be informed by a social worker of any referrals where there is reasonable cause to consider Section 47 Enquiries and authorise the decision



to initiate action. If the child and / or family are known to other agencies or the facts clearly indicate that a Section 47 Enquiry is required, the Children's social care should initiate a strategy meeting/discussion immediately, and together with other agencies determine how to proceed.

The police must be informed at the earliest opportunity if a crime may have been committed. The police should assist other agencies to carry out their responsibilities, where there are concerns about the child's welfare, whether or not a crime has been committed.

## 5. Concluding a Referral

At the end of the referral discussion, the referrer and Children's social care should be clear about the proposed action, who will be taking it, timescales and whether no further action will be taken.

Referral outcomes about a child, where there may be concerns, typically fall into four categories and pathways:

- No further action, which may include information to signpost to other agencies.
- Early help referrals for intervention and prevention services.
- Child in Need services assessment to be undertaken by Children's Social Care (Section 17 CA 1989).
- Child Protection services assessment and child protection enquiries to be undertaken by Children's Social Care (Section 47 CA 1989) with active involvement of other agencies such as the police.

Whatever the outcome of a referral, it should have been assessed by a qualified social worker and a decision should have been made by the relevant line manager within the time scale of one working day about what should happen next. The Children's social care manager must approve the outcome of the referral and ensure that a record has been commenced and/or updated.

The social worker should inform, in writing, all the relevant agencies and the child, if appropriate, and family of their decisions and, if the child is a Child in Need, of the plan for providing support.

In the case of referrals from members of the public, feedback must be consistent with the rights to confidentiality of the child and their family.

If the referrer disagrees with the decisions made by Children's social care about the outcome of the referral, they may consider making a complaint under the local Complaint procedure or raise the matter under the **Escalation Policy**.

The child and parents should be routinely informed about local procedures for raising complaints, if they wish to, and local advocacy services.

Where the outcome of the referral leads to a Children's Social Care Single Assessment see **Assessment Procedure**.



Appendix B

#### Worried about a child

# You're concerned about the safety or wellbeing of a child or young person in the Dorset area

If you're worried about the safety or wellbeing of a child or young person who lives in Dorset contact our Family Support and Advice Line.

When you call us we can talk to you about confidentiality and how we are going to use any information you give us.

Speak to a practitioner today if you have any worries or concerns about a child or young person.

# **Opening hours**

Monday to Friday: 8am to 10pm

Saturday, Sunday and bank holidays: 9am to 10pm

For out of hours emergencies call: 01305 221000

# **Family Support and Advice Line**

Name: Single point of contact for safeguarding concerns

Tel: 01305 228558 Full contact details

See our adult abuse page for contact details for young people aged 18 to 25.

Find out more about child exploitation and when to report it.

# Contact your local family support team

You can speak to family support in your locality, if you are already receiving help or support from us:

## **Chesil locality**

Name: Weymouth and Portland

Email: <a href="mailto:chesillocality@dorsetcouncil.gov.uk">chesillocality@dorsetcouncil.gov.uk</a>

Tel: <u>01305762400</u> Full contact details

# **Dorchester locality**

Email: dorchesterlocality@dorsetcouncil.gov.uk

Tel: <u>01305224220</u> Full contact details

# **East Dorset locality**

Email: eastlocality@dorsetcouncil.gov.uk

Tel: 01202868224 Full contact details

# **North Dorset locality**



Email: northlocality@dorsetcouncil.gov.uk

Tel: <u>01258474036</u> Full contact details

## **Purbeck locality**

Email: <u>purbecklocality@dorsetcouncil.gov.uk</u>

Tel: <u>01929557000</u> Full contact details

## **West Dorset locality**

Email: westlocality@dorsetcouncil.gov.uk

Tel: <u>01308425241</u> Full contact details

# Localities on a map of Dorset

See a map of our localities:

# **SEND** workers within each locality

Each locality will have its own SEND team of professionals led by a SEND team manager, with a family worker and provision lead.

The SEND team supporting you will be based on where you live, not where your child goes to school.

The new SEND teams will include family support workers and educational psychologists all working together.

### The child you're concerned about has a social worker

If the child you're concerned about already has a social worker contact your locality.

The Children's Social Care teams provide a statutory social work service. This means they work with children, young people and their families who are considered in need, children who are subject to a plan for protection and a small number of children who are in care.

Social workers have legal child protection duties but they also work proactively to help prevent difficulties starting or repeating.

All our children's social care teams work closely with other professionals and agencies, including:

- early years education providers
- schools health services
- · community-based professionals

### Mental health support

Find mental health and wellbeing support for a child or young person.

### What to report

The following websites are useful for you if you're worried about a child or for children who want to speak to someone:



- NSPCC for information about the different types of child abuse and what you should do if you're worried about a child
- <u>Childline</u> for private and confidential phone calls for children up to 18 years
- Bullying UK for support for children and young people who are being bullied
- Frank for friendly, confidential advice and questions about drugs
- Anti-Bullying Alliance for information about how to stop bullying
- Think U Know for keeping children and young people safe online
- <u>CEOP</u> for developing child safeguarding policies and providing advice on making the internet safer for young people

### **Domestic abuse**

Find help if you've experienced any form of domestic abuse. This includes:

- victim support
- courses for survivors
- support for children and young people who have seen domestic abuse

# **Dorset Safeguarding Children Partnership (DSCP)**

The DSCP brings together information for:

- children
- young people
- their families
- anyone who works with children and families

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