

**Outcomes
First
Group.**

USE OF ALLEGATION PROTOCOL POLICY

**(CHILDREN &
YOUNG PEOPLE)**

USE OF ALLEGATION PROTOCOL POLICY

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1.0 POLICY STATEMENT

Outcomes First Group is committed to ensuring that children and young people are effectively safeguarded in all services we provide.

Safeguarding and child protection must always be the highest priority and at the forefront of everything we do. A whole-setting approach is required to ensure safeguarding and child protection are embedded in all decisions, planning, policy and day-to-day operations and activities.

It is essential that everybody working within the Outcomes First Group understands their safeguarding responsibilities.

This policy outlines the expectations of the internal process when using an allegation protocol when a child or young person makes numerous repeat allegations. This is to ensure that all appropriate and accountable colleagues are alerted to and have oversight of allegations, safety and welfare of children and young people in our care.

This policy does not replace any current safeguarding policies or formal notification process, rather it is intended to run alongside current internal and external safeguarding arrangements. All relevant policies must be followed and referred to, in particular:

- Safeguarding Policy
- Guide to dealing with Allegations and Safeguarding Concerns
- Managing Allegations Against Employees Procedure

2.0 REPEAT ALLEGATIONS THAT REQUIRE A PROTOCOL

2.1 Repeat allegations can be defined as occasions where the same child or young person makes numerous allegations against various or the same staff whilst in our care. Whilst each allegation must be taken seriously and further explored in line with the Managing Allegations Against Employees Procedure, there may be times where the use of an allegation protocol is required to protect all involved due to the high number of allegations being made by a child or young person, where a full independent investigation is not always required and LADO/equivalent/Local Authority thresholds are not always met.

However, it must be emphasised this does not replace any existing policy or process and can only be used in exceptional circumstances, ie where several allegations are being made on a daily basis. A protocol is not

suitable for all types of allegations and each allegation must be reviewed case by case, for example where a child has an injury alleged to be caused by staff a protocol must not be used.

The **child's voice must remain paramount**, and each allegation must be explored with the child/young person and relevant colleagues and agencies.

A protocol can form part of the care and safety planning for a child.

Allegations must be recorded and collectively overseen by the Registered Manager, LADO/SSSC/CIW equivalent, Social Worker and/or IRO (where there is one).

Due to the scope of the group and working with numerous local authorities where some approve the use and some don't approve the use of protocols, there may be times where a protocol is not agreed by the LADO/SSSC/CIW equivalent, or the Local Authority, in these circumstances a protocol must not be used.

Allegation Protocols may be used in care settings only.

A protocol is not permanent and not for long term use. If in use for longer than six weeks, the Regional Director/Director of Care will need to be notified and approve.

3.0 THE PROTOCOL

3.1 The protocol must be agreed by the following:

- The Registered Manager
- The Regional Manager
- The Regional Director/The Director of Care
- The Responsible Individual
- The allocated Social Worker (Local Authority) or Parent/Guardian if not open to Social Care
- The LADO/SSC/CIW equivalent
- The IRO (for a child who is looked after)
- Regulator ie Ofsted/SSSC/CIW

3.2 The protocol must be SMART (Specific, Measurable, Achievable, Relevant and Time bound) the content must be clear. The document must be signed and dated by all parties and kept on the child's file.

3.3 The protocol document and content must be reviewed weekly by the registered manager, LADO/SSSC/CIW equivalent, SW/Local authority/IRO (where there is one) to ensure each allegation has oversight and to determine any themes, patterns or actions.

3.4 The review must be recorded, dated and signed. If allegations are no longer being made, then with collective agreement (persons listed above) the protocol must cease.

3.5 The attached form is to be used. It is intended to provide a succinct overview of the allegation and actions taken to date and provide a record of the incident and actions taken.

APPENDIX 1

Allegation Protocol Form

Name:

Date Created:

Last Review Date:

Name of Child/Young Person	
Date Of Birth	
Legal Status of Child	
Home Local Authority	
Host Local Authority	
Name of Care Home	
Reason for protocol:	
Provide a headline and summary of the need for a protocol:	
Frequency and method of review of plan:	
Details of protocol:	
Include: what needs to happen, the child's voice, staff support	
Supporting Information:	
Updates:	
Summary - including any patterns, themes, triggers, actions etc	
Access:	
Has the completed protocol form been recorded on Access or equivalent electronic recording system?	

Agreed With:	
Insert Name and signature	ie: The Registered Manager The Regional Manager The Regional Director/The Director of Care The Responsible Individual The allocated Social Worker (Local Authority) or Parent/Guardian if not open to Social Care The LADO/SSSC/CIW equivalent The IRO (where there is one) Parent/Guardian (If appropriate) Regulator ie: Ofsted/SSSC/CIW
Shared with:	
Insert name and role	Eg: QA lead, NCM, Clinical lead

Signature of Person Completing Form	
Date	

Allegation Review log

Review Date:	Update Information:	Action(s) & by who:	Sign/Agreed by:

We are part of the Outcomes First Group Family, by working together we will build incredible futures by empowering vulnerable children, young people and adults in the UK to be happy and make their way in the world.



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