

## Management of Allegations Outcome Record

Name of Adult	Name of Adult		Setting/Role				
against whom the							
allegations have							
been made							
Outcomes - the o	(please s	ise state)					
the allegation was			1				
Substantiated	Unsubstantiated	Deliberately		False	Unfounded		
		Invented o	or				
		Malicious					
A substantiated	An unsubstantiated allegation			There is	There is no		
allegation is one	is not the same as a false	This implies a		sufficient	evidence		
which is	allegation. It simply means that	deliberate		evidence	or proper		
supported or	there is insufficient identifiable	intention to		to	basis to		
established by	evidence to prove or disprove	deceive. A		disprove	support		
evidence or	the allegation. The term,	malicious		the	the		
proof.	therefore, does not imply guilt	allegation may be		allegation.	allegation.		
	or innocence.	made by a child					
		following an					
		altercation with a					
		member of staff or					
		a parent who is in					
		dispute wi					
		organisatio					
		an allegati					
		classified a					
		malicious,					
		be necessa	•				
		have evide					
		which proves this intention.					
		intention.		l			
Reasoning							

Please provide full reasoning for making the decision above (this section must be completed).

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## Lessons Learnt

Please provide detail of changes in practice / procedure that have been actioned as a consequence of this matter

Was the person Yes suspended? No		if yes please provide dates of suspension					
Were formal disciplinary proceedings taken?	Yes No	If yes please provide summary and disciplinary sanction					
Date matter was concluded by employer (either return to work date or dismissal date).							
Return to work date	Dismissal date						
Criteria met to refer to Disclosure and Barring Service? https://www.gov.uk/government/collections/dbs-referrals-guidance2							
Yes (person dismissed / removed from regulated activity)		No (person returned work / remained work, if person longer in employment pl give reasoning not disclosing t	ed in is no lease for	)			
If referral to Disclosure and Barring Service made, please provide date and reference number / copy of DBS acknowledgement.	Date of Referral						
	DBS Reference No.						
	Acknowledgement attached?	Yes		No			

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Referred to Regulatory Body (e.g. GMC / HCPC / TRA/NMC	Yes	If yes please provide details and date sent		
	No			
Has the parent and child been informed of the outcome	Yes	If yes please provide details and date		
	No			

LADO Response or Challenge if required: