

## **Policy on Sexual Misconduct, Harassment and Unacceptable Behaviours**

### **Appendix C1: Precautionary Measures Referral Form**

This appendix is to be used for the procedures for implementing precautionary measures under IFG's **Policy on Sexual Misconduct, Harassment & Unacceptable Behaviours**. Precautionary measures are emergency actions taken to safeguard individuals and uphold the integrity of investigations following allegations of misconduct.

This form is designed for use by staff who are initiating a referral for risk assessment or consideration of precautionary measures due to a potential breach of the policy.

**This form should be completed electronically and emailed to:**

**[m.addison@intfoundationgroup.co.uk](mailto:m.addison@intfoundationgroup.co.uk)**

#### **Referral for Consideration of Precautionary Measures**

Confidential – To be sent to Academic Director (CEO) (or delegated senior officer)

##### **Section 1: Referring Staff Member**

Full Name: \_\_\_\_\_

Job Title / Role: \_\_\_\_\_

Department / Area: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

##### **Section 2: Student of Concern**

Full Name: \_\_\_\_\_

Programme of Study / Department: \_\_\_\_\_

Year of Study / Level: \_\_\_\_\_

### Section 3: Reason for Referral for Imposition of Precautionary Measures

Please provide a brief summary of the concern, including the nature of the alleged conduct and any known context.

(Note: This form is not to be used for formal reporting or investigation but to support risk management and safeguarding protocols.) Please refer to the Policy on Sexual Misconduct, Harassment & Unacceptable Behaviour definitions for guidance on behaviours that may trigger precautionary measures.

**Summary of Concern** (where details are recorded on a Disclosure Report Form, please indicate this):

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Date concern was received or became known: \_\_\_\_\_

### Section 4: Risk Indicators (tick all that apply)

- ☐ Alleged risk of harm or harassment to another student/staff/third party
- ☐ Alleged risk of harm to self
- ☐ Concern about ongoing contact or repeated incidents
- ☐ Alleged breach involves specific spaces, services, or residences
- ☐ Responding student is in a position of influence/power
- ☐ Potential safeguarding risk
- ☐ Previous concerns known or recorded (e.g. other reports)
- ☐ Other (please specify): \_\_\_\_\_

## Section 5: Immediate Risks or Requested Measures

Are there any urgent risks or recommendations for precaution at this stage?  
(e.g. no-contact, limitation on access, etc.)

- ☐ Recommend temporary no-contact condition
- ☐ Recommend limiting access to [specify area/service]: \_\_\_\_\_
- ☐ Urgent risk of interference with investigation or parties
- ☐ Other: \_\_\_\_\_

Details / Notes:

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## Section 6: Supporting Evidence/Attachments

- ☐ Copy of complaint / Disclosure Report Form (if available)
- ☐ Written statement from referring staff (attached separately)
- ☐ Other documentation (please specify): \_\_\_\_\_

## Section 7: Declaration

I confirm that the information provided in this form is, to the best of my knowledge, accurate and shared in good faith under the institution's duty of care, safeguarding, and risk management responsibilities.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

For Office Use Only — CEO / Delegated Officer Section

Date received: \_\_\_\_\_

Initial risk screening completed:\*\* ☐ Yes ☐ No

Risk Assessment required:\*\* ☐ Yes ☐ Already in progress ☐ No

Immediate action taken:\*\* \_\_\_\_\_

Disclosure Investigation Officer: \_\_\_\_\_

Staff member this case assigned to: \_\_\_\_\_

Precautionary measures considered/implemented:

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Period Precautionary Measures in place for (not more than 21 days in first instance):

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Effective from (Date student notified in writing): \_\_\_\_\_

PRECAUTIONARY MEASURES AGREED AND AUTHORISED BY (Name & Role):

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Date: \_\_\_\_\_

Due date for review of Precautionary Measures \_\_\_\_\_

Record entered into Safeguarding / Case Management System if applicable: ☐ Yes

**This form is to be stored securely and managed in accordance with IFG data protection and other relevant policies.**