**Appendix D – Prevent Concerns, Record of Decisions Form**

**Introduction**

Whenever a concern is raised around the behaviour, or activity, of any member of staff or student this form must be completed and forwarded to the Prevent Co-ordinator.

Initial concerns in relation to an individual’s safety or wellbeing should be raised with their line manager/HR (for Staff) or Student Support (for students).

Where the concern is that they may be vulnerable to exposure to terrorist or extremist influences a record of the discussion and action taken must be recorded on this form, reported after stage 1 and updated after each subsequent phase where applicable. This is necessary to monitor all Prevent related activities and comply with the University’s [Prevent Duty Policy](https://www.abdn.ac.uk/staffnet/documents/policy-zone-information-policies/Prevent-Duty-Policy-1.0-July-2020.pdf).

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| **Basic Data Required** | **Response** | **Guidance** |
| Name of Individual |  | In the order: First name, middle name(s) and surname. |
| Primary contact / person completing this form. |  | Name of Line manager, tutor or other person with knowledge of the individual’s case. |
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| Member of Staff or Student |  | If student indicate if UG, PGR etc. |
| School or Department |  |  |
| Age |  | Years of age is adequate |
| Gender |  | Delete as applicable as defined by: *how the individual identifies themselves* / *by physical appearance.* |
| Ethnicity |  | Delete as applicable as defined by: *how the individual identifies themselves* / *by physical appearance.* |
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| **Information Required (guidance)** | **Response**  |
| Date when concern was raised |  |
| Nature of the Initial Concern (Brief details as raised / reported) |  |

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| **Stage 1 (Mandatory)** |  |
| Date when the concern was discussed with the individual |  |
| Outcome of the discussion (agreed actions or “no further action required”) |  |
| Referral to next stage? (Yes/No) |  |

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| **Stage 2 (where applicable)** |  |
| Date when the concern was discussed (with the Head of School / Section) |  |
| Outcome of the discussion (agreed actions or “no further action required”) |  |
| Referral to next stage? (Yes/No) |  |

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| **Stage 3 (where applicable)** |  |
| Date when the concern was referred to the University Secretary |  |
| Date when it was discussed at the Safeguarding Panel  |  |
| Outcome of the discussion (agreed actions or “no further action required”)  |  |
| Referral to next stage? (Yes/No) |  |

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| **Stage 4 (where applicable)** |  |
| Date of the Prevent Multi Agency Panel (PMAP) |  |
| Outcome of the discussion (agreed actions or “no further action required”) |  |
| Recommendations made by the panel(if yes, record in the action plan below). |  |

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| **Action Plan** **(where applicable)** |
| **Recommendations** | **Person Responsible** | **Target Date** | **Date Completed**  |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

**Note:** This information will be retained for the academic year in which any stage of the referral process takes place and any action in the action plan is in progress, plus 1 year.

After that year only anonymised statistical information will be retained.

However, where appropriate, information may be shared with shared parties in line with the institution's Data Protection Policy.