PROCEDURE

REPORTING PROCEDURE

Under the:

Harassment and Discrimination Prevention and Response Policy

Contact Officer

Provide the position title rather than the name of a person

| Purpose | This is the procedure under the Harassment and Discrimination Prevention and Response Policy for reporting information about Discrimination, Harassment, Reprisals or Systemic Discrimination in the University’s living, learning or working environment so it can be appropriately addressed by the University.

Individuals who allege that they have experienced Discrimination, Harassment or Reprisal do not file Reports, but should refer to the Harassment & and Discrimination Complaints Procedure or the Alternative Resolution provisions of the Policy.

If a matter relates to Sexual Harassment or another form of sexual violence (as defined in the Policy on Sexual Violence Involving Queen’s University Students), and involves a student, a Report under this Procedure should not be filed; rather, the procedure set out in the Policy on Sexual Violence Involving Queen’s University Students must be followed.

Capitalized terms in this Procedure are defined in the Policy. |
| Procedure | 1. All members of the University Community are encouraged to make a Report when they witness Discrimination, Harassment or Reprisal, or are aware of a policy, process, or other circumstance giving rise to Systemic Discrimination.

2. Persons of Authority shall make a Report when they witness or otherwise become aware of Workplace Discrimination, Harassment or Reprisal, or, of a policy, process, or other circumstance giving rise to Systemic Discrimination. |
### Where, how and when to submit a Report

3. Reports shall be directed to the University Secretary. When the University Secretary receives a Report, the University Secretary will assemble the appropriate Intake Assessment Team promptly to determine whether the matter will be referred for investigation and if so, to determine the appropriate Receiving Office.

4. A Report must contain a detailed account of all facts alleged and must attach any documents that the person Reporting feels are relevant and to which they have access.

5. A Report should be made using the appropriate form available on the University Secretariat and Legal Counsel website.

6. A Report should be made as soon as possible after the person Reporting witnesses or becomes aware of the incident(s) to which their Report relates.

### Report intake and streaming

7. Subject to applicable law that might require an investigation, the Intake Assessment Team may decline to refer a Report for investigation if:
   a. it is about a matter or issues not governed by the Policy;
   b. the Report does not contain sufficient information. The Chair of the Intake Assessment Team may appoint a member of the Team to make appropriate follow-up inquiries and to report back to the Team to determine if the Report, amended with additional information, should be referred for investigation.
   c. the Report is made more than one year after the incident(s) to which the Report relates;
   d. the Respondent is no longer a member of the University community; or,
   e. the allegations, if proven to be true, would not constitute Harassment, Discrimination, or a Reprisal.

8. If the Intake Assessment Team decides not to refer a Report for investigation, the University Secretary will, on behalf of the Intake Assessment Team, advise the person(s) Reporting in writing:
   a. of the reasons(s) that the Intake Assessment Team decided not to refer the Report for investigation;
   b. that the Intake Assessment Team will reconsider its decision if the person(s) Reporting submit significant new information; and,
   c. about appropriate alternative(s) for seeking recourse or advice.

9. The Intake Assessment Team’s decision is otherwise final and is not subject to appeal.

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1 If the Report concerns conduct of employees in the office of the University Secretariat and Legal Counsel the Report shall be made to the Office of the Principal and the procedure below will be adjusted with the role of the Chair of the Intake Assessment Team being fulfilled by an individual appointed by the Principal.

2 If the Report alleges conduct that, if proven to be true, would constitute a violation of another policy, the Intake Assessment Team may refer the matter to the appropriate Office to be addressed by the applicable policy and its procedures.
10. Reports that the Intake Assessment Team refers for investigation will normally be referred as follows:
   a. to the Non-Academic Misconduct Intake Office ("NAMIO"), if the Report involves an alleged perpetrator(s) who is a student;
   b. to Human Resources or Faculty Relations, as appropriate, if the Report involves an alleged perpetrator(s) who is an employee;
   c. if the Report involves an alleged perpetrator(s) who is both a student and an employee, the Intake Assessment Team will determine which Office (i.e. Human Resources, Faculty Relations or Student Conduct) will be the lead office for investigation and the Report will be referred to that Office;
   d. to Campus Security and Emergency Services, if the Report involves an alleged perpetrator(s) who is a visitor;
   e. to the Office of the Associate Dean (Postgraduate Medical Education), if a Report involves a Complainant(s) or Respondent(s) who is a Resident in the Department of Postgraduate Medical Education; and,
   f. to the appropriate Vice-Principal, with a copy to the Associate Vice-Principal (Human Rights, Equity, Inclusion) and to the University Ombudsperson, if the Report involves an allegation concerning Systemic Discrimination.

11. The University Secretary will keep a record of all Reports for the purpose of administering the Policy and this Procedure and for the purpose of reporting on statistics and trends.

12. The Receiving Office will report back to the University Secretary as to the disposition of the matter.

13. The Receiving Office will create an investigation file that will include all related communications, memoranda, reports, statements, and evidence.

14. The Receiving Office is responsible for securing the file and all documentation in the file and for the retention and disposition of the file in accordance with its processes and document retention schedule(s).

15. Investigations of a Report will follow the processes referenced in Section 7 of the Complaint Procedure, with necessary adjustments, taking into account that there will not necessarily be an individual “Complainant” involved in the process but rather, the University will be considered the Complainant and the “Respondent(s)” is the alleged subject(s) of the Report.

16. All individuals involved in the investigation process will be advised of their duty to maintain the confidentiality of all information disclosed to them or by them, including any personal information disclosed to them.

17. The Person who makes a Report about individual Discrimination or Harassment is not normally entitled to information with respect to the outcome of the investigation unless they are involved in the investigation report will be shared with the other Office(s) to determine if any corrective action will be taken under those offices’ policies, procedures or any applicable collective agreement(s).

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3 The investigation report will be shared with the other Office(s) to determine if any corrective action will be taken under those offices’ policies, procedures or any applicable collective agreement(s).
implementation of that outcome.

18. If a Report of Systemic Discrimination was referred to a Vice-Principal, the Vice-Principal or their designate will conduct an inquiry, in consultation with the Associate Vice-Principal (Human Rights, Equity and Inclusion) and the University Ombudsperson, and will report back to the University Secretary, providing a copy of the to the Associate Vice-Principal (Human Rights, Equity and Inclusion) and the University Ombudsperson.

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<th>Date Approved</th>
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<tr>
<td>Approval Authority</td>
<td>Senior Leadership Team</td>
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<td>Date of Commencement</td>
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<tr>
<td>Amendment Dates</td>
<td>List the dates the policy has been amended (Year Month Day)</td>
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<td>Date for Next Review</td>
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<td>Related Policies, Procedures and Guidelines</td>
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