



## Executive Committee Report

<b>Date of meeting</b>		7 September 2016							
<b>Report title</b>		Prevent Policy							
<b>Author(s) name and title</b>		Chrissie Bacon NEW Devon CCG Associate Designated Nurse Safeguarding Children and Delia Gilbert South Devon and Torbay CCG Designated Nurse Adults							
<b>Supporting Executive(s) name and title</b>		Lorna Collingwood- Burke, Chief Nursing Officer							
<b>Supporting Executive Approval Date:</b>		30 August 2016							
<b>Purpose of Report</b> (please ✓)	<b>Decision</b>	✓	<b>Does this document place individuals in the centre</b>	<b>Yes</b>	<b>No</b>				
	<b>Assurance</b>			✓					
	<b>Information</b>								
<b>Actions/Recommendations Requested</b>		The Committee are asked to review the Policy and approve or make suggestions for amendment							
<b>Which other committees has this item been to?</b>		None							
<b>Reference to other documents</b>		N/A							
<b>Have the legal implications been considered?</b>		Yes							
<b>Quality and Equality Impact Assessment</b>									
<b>Who does the proposed piece of work affect? Yes✓ No X</b>		<b>Staff</b>		<b>Patients</b>		<b>Carers</b>		<b>Public</b>	
								<b>Yes✓</b>	<b>No X</b>
1. Will the proposal have any impact on discrimination, equality of opportunity or relations between groups?									x
2. Is the proposal controversial in any way (including media, academic, voluntary or sector specific interest) about the proposed work?									x
3. Will there be a positive benefit to the users or workforce as a result of the proposed work?								✓	

4. Will the users or workforce be disadvantaged as a result of the proposed work?		X
5. Is there doubt about answers to any of the above questions (e.g. there is not enough information to draw a conclusion)?		X

If the answer to any of the above questions is yes (other than question 3) or you are unsure of your answers to any of the above you should provide further information using **Quality and Equality Impact Assessment** available from Corporate Services

If an equality assessment is not required briefly explain why and provide evidence for the decision.

### 2016/17 NEW Devon CCG Strategies Priorities and Core Objectives

Strategic Priorities	Does this report support the strategic priority/core objective	
	Yes✓	No X
Be financially sustainable – Turnaround and Success Regime		X
Match resources explicitly to local need – ‘Strategic Systems Leadership	✓	
Deliver integrated, personalised response – ‘Progress Partnership Working & Integration’	✓	
Be focused on quality of outcomes – namely care that is safe, that is clinically and cost effective and provides experience for individuals accessing services – ‘Improve Performance’	✓	
Deliver measureable results – ‘CCG Assurance Status restored’	✓	
Make clear the roles and responsibilities of people in maintaining and improving their own wellbeing – ‘Progress the Prevention Agenda’	✓	
Maximise CCG effectiveness by harnessing our most important asset – our staff	✓	

NEW Devon CCG and South Devon and Torbay CCG have made every effort to ensure this policy does not have the effect of discriminating, directly or indirectly, against employees, patients, contractors or visitors on grounds of race, colour, age, nationality, ethnic (or national) origin, sex (gender, gender reassignment), sexual orientation, marital status, religious belief or disability; pregnancy and maternity or those protected under the Health and Social Care Act 2012 and Human Rights legislation. This policy will apply equally to full and part time employees. All NEW Devon CCG and South Devon and Torbay CCG policies can be provided in large print or braille formats if requested, and language line interpreter services are available to individuals of different nationalities who require them.

This is a controlled document. Whilst this document may be printed, the electronic version is maintained on the NEW Devon CCG and South Devon and Torbay CCG website.

Please consider the environment before you print this document and where possible copies should be printed double-sided.

Please also consider setting the page range in the print properties, when relevant to do so, to avoid printing the policy in its entirety.



<b>Document Status:</b>	Prevent Policy
<b>Version:</b>	V2.0

<b>DOCUMENT CHANGE HISTORY</b>		
<b>Version:</b>	<b>Date:</b>	<b>Comments (i.e. viewed, or reviewed, amended, approved by person or committee)</b>
V1.0	July	Draft Policy Written
V1.2	August	Delia's Comments Added
V2.0	August	Amendments Made and Formatted
<b>Authors:</b>	Chrissie Bacon NEW Devon CCG Associate Designated Nurse Safeguarding Children / Prevent Lead  Delia Gilbert South Devon and Torbay CCG Designated Nurse Safeguarding Adults / Prevent Lead	
<b>Scrutinised by: (name &amp; title)</b>		
<b>Date:</b>		
<b>Document Reference:</b>		
<b>Review date of approved document:</b>	September 2018	



**NHS**  
*South Devon and Torbay  
Clinical Commissioning Group*

**NHS**  
Northern, Eastern and Western Devon  
Clinical Commissioning Group

# Prevent Policy

## Table of Contents

1	Introduction	Page 7
2	Purpose and scope	Page 7
3	Policy Statement	Page 8
4	Roles and Responsibilities	Page 8
5	Understanding and recognising risks and vulnerabilities of radicalisation	Page 9
6	Training	Page 10
7	How to recognise those a risk of being radicalised	Page 10
8	What to do if you are concerned	Page 10
9	Quality Assurance and Monitoring	Page 11
10	Appendix 1	Page 13
11	Appendix 2	Page 16

<b>Linked strategies, policies and other documents</b>	<p>Safeguarding Adults Policy</p> <p>Safeguarding Children Policy</p> <p>Mandatory Training Policy</p> <p>HR002 Whistleblowing</p> <p>HR006 Recruitment, selection and DBS</p> <p>HR 012 Disciplinary</p> <p>HR025 Professional Registration Policy</p> <p><u>Department of Health :Building Partnerships Staying Safe 2011</u></p> <p><u>3799_Revised_Prevent_Duty_Guidance__England_Wales_V2-Interactive</u></p> <p><u>Counter-Terrorism and Security Act 2015</u></p>
--	--

	<p><u>Prevent strategy 2011 - Publications - GOV.UK</u></p> <p><u>Care Act 2014</u> <u><a href="http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted">http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted</a></u></p> <p><u>CCG Prevent Duties Responsibilities</u> <u><a href="http://www.bexleyccg.nhs.uk/Downloads/Safeguarding%20adults/CCG%20prevent%20duty%20responsibilities.pdf">http://www.bexleyccg.nhs.uk/Downloads/Safeguarding%20adults/CCG%20prevent%20duty%20responsibilities.pdf</a></u></p> <p><u>Prevent Training and Competencies Framework -</u> <u><a href="https://www.england.nhs.uk/wp-content/uploads/2015/02/train-competnc-frmwrk.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/02/train-competnc-frmwrk.pdf</a></u></p>
--	--

---

## 1. Introduction

---

- 1.1 This document defines the Prevent Policy for Northern, Eastern and Western Devon Clinical Commissioning Group and South Devon and Torbay Clinical Commissioning Group, hereafter NEW Devon CCG and SDTCCG, in response to the Counter Terrorism Strategy (CONTEST) 2011 and the Counter Terrorism Act (2015).
- 1.2 Following the introduction of the Counter Terrorism Act in 2015, the revised *“Guidance for specified authorities in England and Wales on the duty in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism”* was published and came into force on 1<sup>st</sup> July 2015.
- 1.3 Prevent is part of the Government’s Counter-Terrorism Strategy (2011) CONTEST, which is led by the Home Office. The health sector has a non-enforcement approach to Prevent and focuses on support for vulnerable individuals and healthcare organisations in helping stop them from becoming terrorists or supporting terrorism.

CONTEST also includes the following elements in addition to Prevent:

- Pursue: to stop terrorist attacks.
- Protect: to strengthen our protection against a terrorist attack.
- Prepare: to mitigate the impact of a terrorist attack.

- 1.4 In order to deliver the Prevent agenda, three national objectives have been identified:
  - Objective 1: respond to the ideological challenge of terrorism and the threat we face from those who promote it.
  - Objective 2: prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support.
  - Objective 3: work with sectors and institutions where there are risks of radicalisation which we need to address.
- 1.5 “Channel” forms a key part of the National Prevent Strategy. This is a multi-agency process to identify and provide support to individuals who are at risk of being drawn into terrorism.

---

## 2. Purpose and Scope

---

- 2.1 The purpose of this policy is to enable NEW Devon CCG and SDTCCG to demonstrate how they meet their corporate accountability in meeting the Duties under the Counter Terrorism Act 2015, to demonstrate that they follow national guidance and promotes best practice in relation to Prevent and Channel processes, and to reflect effective inter-agency working between NEW Devon CCG and SDTCCG and their partner agencies.
- 2.2 It is expected that all providers of health services should have their own Prevent Policy. All provider organisations should demonstrate compliance with contractual requirements

relating to Prevent. It is the responsibility of the contract manager to monitor compliance and inform the Designated Nurses of any risks or challenges.

- 2.3 The principles in this document will provide support, advice and guidance to NEW Devon CCG and SDTCCG in discharging their full Counter Terrorism (Prevent) duties and responsibilities. It will alert staff to their Prevent responsibilities through early identification and appropriate information sharing and referral. As such this policy should be read by *all staff* and will be referred to in Level 2.
- 2.4 The policy applies to all staff working within the two Clinical Commissioning Groups (CCGs) whether employed, contracted or on a voluntary basis.

---

### **3. Policy Statement**

---

- 3.1 This policy describes how NEW Devon CCG and SDTCCG will:
  - Meet and monitor its statutory duty to Counter Terrorism including Prevent and Channel as part of its Safeguarding Duties
  - Assure effective Prevent arrangements in the services it commissions
  - Work with Local Safeguarding Adult and Children Boards, Devon and Cornwall Police, NHS England, Local Authorities and other key partners to develop and improve Prevent practices across the whole health economy
  - ensure Prevent is included within Safeguarding Adult and Children responsibilities for CCGs.

---

### **4. Roles and Responsibilities**

---

- 4.1 CCGs not specifically captured in either the Prevent Duty Guidance or the Channel Guidance however they have responsibilities as result of their role within the health system. As these roles include partners to Channel Panels, commissioners of health services and to provide governance and oversight NHS England strongly recommends CCGs to engage in local partnerships. See Appendix 1 - CCG Prevent Duties Responsibilities.
- 4.2 The Strategic lead roles for Prevent is undertaken by Designated Nurses within both CCGS
  - NEW Devon CCG Prevent Lead is the Associate Designated Nurse Safeguarding Telephone: 07717541437 Generic Email: [D-CCG.squardchild@nhs.net](mailto:D-CCG.squardchild@nhs.net)
  - South Devon and Torbay CCG Prevent lead is the Designated Nurse for Safeguarding Adults Telephone: reception on 01803 652500
- 4.3 Prevent Leads have responsibility for:



- Collating and providing returns for NHS England and providing assurance via the assurance framework.
- Working with contract managers for of providers and seeking assurance they are meeting their statutory requirements.
- Governance and strategic overview of the health compliance and interface with the Prevent Agenda
- Attendance at local Channel Panels as required
- Advising contract and commissioning teams of Prevent requirements and inclusion quality schedules
- Ensuring Prevent is included in Human Resources policies and procedures, giving consideration to NHS employees.
- Ensuring Prevent is linked to both adults and children’s safeguarding
- Considering Prevent in quality and safety, including serious incidents and complaints.
- Ensuring all CCG staff have an awareness of the Prevent agenda and that all members of CCG staff requiring Level 3, 4 or 5 Safeguarding Adults or Children training receive WRAP training.

---

## **5. Understanding and Recognising Risks and Vulnerabilities of Radicalisation**

---

- 5.1 There is no such thing as a ‘typical extremist’ and those involved in extremism come from a range of backgrounds and experiences. This risk will vary greatly and can change rapidly but no area, institution or body is risk free. Whilst the type and scale of activity that will address the risk will vary, all specified authorities will need to give due consideration to it. (Section C Revised Prevent Duty guidance)
- 5.2 Adults at risk can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a person at risk of being drawn into criminal activity and has the potential to cause significant harm.
- 5.3 The risk of radicalisation is the product of a number of factors and identifying this risk requires that staff exercise their professional judgement, seeking further advice as necessary. It may be combined with other vulnerabilities or may be the only risk identified.
- 5.4 Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include exposure through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a young person at risk of being drawn into criminal activity and has the potential to cause significant harm.
- 5.5 Children and young people are vulnerable to exposure to, or involvement with, groups or individuals who advocate violence as a means to a political or ideological end. Safeguarding children and young people from radicalisation is no different from safeguarding them from other forms of harm.

---

## **6. Training**

---

- 6.1 NEW Devon CCG and SDTCCG ensure all staff receives the appropriate level of training on Prevent as per NHS England Prevent Competency Framework. Those requiring awareness training will receive this as part of safeguarding children /adults training. Those requiring Levels 3, 4 and 5 safeguarding training will receive separate Home Office WRAP training.
- 6.2 NEW Devon CCG and SDTCCG safeguarding children and adult teams have staff members who are Home Office registered to deliver WRAP training.

---

## **7. How to recognise those at risk of being radicalised**

---

- 7.1 Indicators may include:
- graffiti symbols, writing or artwork promoting extremist messages or images
  - Patients / staff accessing terrorist-related material online, including through social networking sites.
    - Inappropriate content includes speeches calling for racial or religious violence or videos glorifying terrorists who have committed atrocities, inciting racial hatred.
    - There is a dedicated internet page where inappropriate content can be reported.
    - Visit the site at [www.direct.gov.uk/reportingonlineterrorism](http://www.direct.gov.uk/reportingonlineterrorism) for further information.
  - parental/family reports of changes in behaviour, friendships or actions and requests for assistance
  - partner healthcare organisations, Local Authority services' and police reports of issues affecting patients in other healthcare organisations
  - patients/ staff voicing opinions drawn from terrorist-related ideologies and narratives
  - use of extremist or hate terms to exclude others or incite violence

---

## **8. What to do if you are concerned**

---

- 8.1 If a member of staff has concerns that a member of the public or another member of staff has been or is in the process of being radicalised then the Prevent Lead must be contacted, following discussion with your line manager. If the Prevent Lead is not available please contact the Regional Prevent/ Channel lead (South) on 01392 226514 or

email [prevent@devonandcornwall.pnn.police.uk](mailto:prevent@devonandcornwall.pnn.police.uk) and copy in the CCG Prevent Lead in. Follow Prevent referral flow chart on Appendix 2.

- 8.2 Children, adults at risk or adults with children identified as being vulnerable to radicalisation should be referred to the relevant Local Authority safeguarding team for triage. (Follow the relevant CCG / Local Authority Safeguarding Policies)  
<http://www.newdevonccg.nhs.uk/>  
<http://www.southdevonandtorbayccg.nhs.uk/>
- 8.3 Staff members who think they may have cause for concern should always seek further advice and guidance. The guiding principle should always be to report concerns through normal procedures so that an informed judgement can be made within the context of all available information.
- 8.4 Once a referral has been made via the Police referral mechanism, a multi-agency channel panel will determine if it meets the threshold for it to be considered for submitting to a formal multi-agency process. Within the South West the multi-agency channel panel is a pilot process that is not consistent across England.
- 8.5 There are currently no thresholds in place as to what level of concerns require a channel process; this is determined on an individual basis by the pilot multi-agency Channel Panel.
- 8.6 Further information can be obtained from Prevent Tragedies website  
<http://www.preventtragedies.co.uk/>

---

## **9. Quality Assurance and Monitoring**

---

### **9.1 Commissioned Services**

- NEW Devon CCG and SDTCCG have systems for quality assuring the safeguarding processes, including Prevent of the provider organisations from which they directly commissions services. These include Operating Principles / Standards embedded where appropriate within provider contracts, which set out explicit expectations for training, supervision and audit. Providers must evidence compliance through the Contract Review Meetings, and contracts leads should seek the advice of the Prevent Leads if they have any concerns regarding compliance. Providers are also expected to submit Quarterly Prevent returns to the relevant CCG.

### **9.2 Reporting and Policies**

- NEW Devon CCG and SDTCCG are expected to meet their statutory duties in respect of Safeguarding Adults and Children and Prevent.

- An annual report based on Safeguarding Adult and Children Arrangements will be presented to the CCG Governing Body, with assurance reports provided through the individual CCG assurance process.
- The Prevent Policy will be reviewed every two years by the Prevent Leads or sooner if there is significant local or national legislative change.

---

## 10. Appendix 1

---

**The Duty as it applies to CCGs** (taken from NHS England CCG Prevent Duties Responsibilities published July 2015) CCGs are not specifically captured in either the Prevent or the Channel Duty, however they have responsibilities as result of their role within the health system.

### **Contract and Performance Management**

As commissioners of services from NHS Trusts and Foundation Trusts named in the Prevent duty and contract holders of a number of health organisations utilising the NHS Standard Contract, CCGs have a responsibility provide oversight and performance management regarding implementation of the Prevent duty within provider organisations.

As Statutory partners of Safeguarding Boards for both adults and children, CCGs are among the organisations that need to provide oversight to the implementation of the duty in the system.

As part of the NHS CCG Assurance Framework, CCGs are required to ensure they are demonstrating they are a well led organisation, including meeting statutory requirements places upon them and that they are meeting NHS performance requirements, including safeguarding standards. NHS England will seek assurance from CCGs regarding how they undertake these duties and fulfil their requirements.

### **Key Considerations for monitoring provider performance**

- Are providers meeting the training requirements in the NHS Training and Competencies Framework? Prevent awareness in line with Safeguarding levels 1 and 2 and 85% WRAP 3 for relevant staff.
- Do providers have policies and procedures in place?
- Are providers identifying Prevent concerns and making channel referrals?
- Are providers engaged with Channel Panel when relevant?

### **Governance Oversight**

CCGs will need to ensure they have in place robust governance systems that provide both internal and wider system assurance that the statutory duties are being implemented and organisations are meeting their requirements to safeguard individuals at risk or radicalisation.

### **Partnership Working**

As partners to Channel panels, CCGs can facilitate information sharing to ensure all relevant health partners are both providing relevant input into panel and that panel is sharing information to assist partners manage and support patients.

CCGs as the commissioners of health services for their local population are also well placed to provide advice to panel members regarding the health partners that should be

bought into discussions and the health services that are available that may be appropriate to an individual's support package.

There is no statutory requirement for CCGs to engage with partners in local Prevent forums, to feed into Counter Terrorism Local Profiles and to work with health partners regarding Prevent. However, in order to have governance and oversight regarding provider performance, NHS engagement in Channel Panel and local risks and strategies it is strongly recommended that CCGs engage in these local partnerships.

### **CCG Internal Training**

In order to undertake the responsibilities as outlined above CCGs and individual staff within the CCG will need to understand what Prevent is, how it impacts the organisation and how it applied to different job roles.

Consideration should be given too:

- Providing returns for NHS England and providing assurance via the assurance framework.
- Contract management of providers and seeking assurance they are meeting their statutory requirements.
- Governance and strategic over view, what are the groups and boards that will provide this, and who will the CCG board assure themselves of system compliance with the duties.
- Linking contracts and commissioning teams, is Prevent part of the quality schedule?
- Including Prevent in HR policies and procedures, giving consideration to NHS employees.
- Ensuring Prevent is linked to both adults and children's safeguarding
- Considering Prevent in quality and safety, including serious incidents and complaints.

### **Prevent in the NHS Standard Contract**

The NHS Standard Contract 2015/16 outlines specific Prevent requirements under the Safeguarding and Safety section specifically SC32 Safeguarding, Mental Capacity and Prevent.

The requirements set out in the contract are generally in line with those detailed in the Prevent Duty which includes:

- Protecting individuals from abuse and improper treatment.
- Nominating a Prevent Lead.
- Developing a Prevent Policy and Procedure.

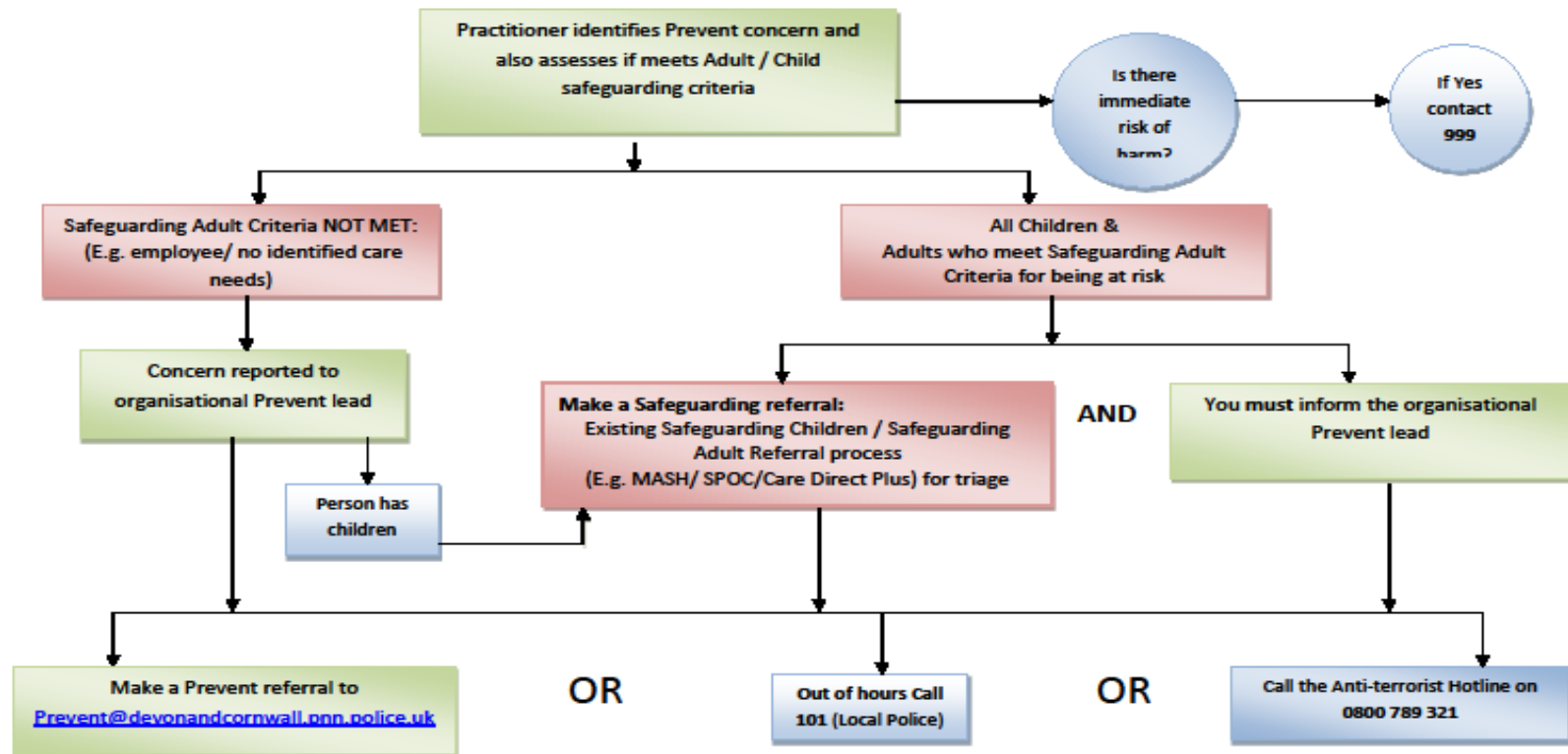
In addition the NHS Standard Contract requires commissioned services to;

- Provide evidence of addressing any Safeguarding concerns through multiagency reporting systems, which would include Prevent concerns.
- If requested participate in the development of local multi-agency safeguarding quality indicators and/or plan.

- Include in the Prevent Policy and Procedures a programme to raise awareness of Prevent as per the NHS England Prevent training and competencies.
- Include in Prevent policies and procedures a WRAP delivery plan.

### The Channel Referral Process

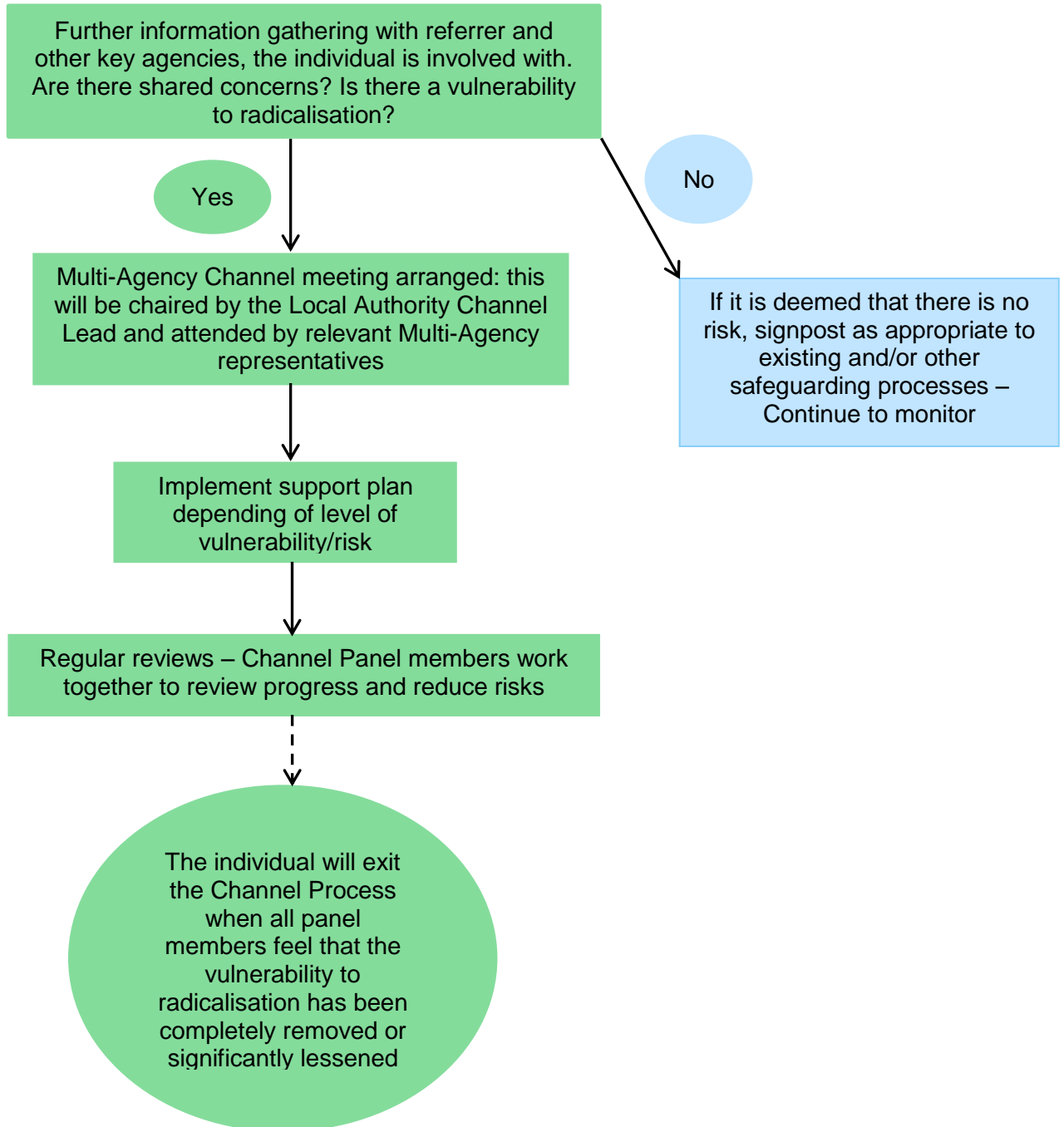
Channel is a multi agency safeguarding process and early intervention strategy aimed at identifying and supporting individuals (including children) vulnerable to the recruitment of violent extremism. It must be noted this includes all forms of extremism. It is a mechanism for ensuring that these individuals are assessed and supported by professionals using statutory safeguarding frameworks and multi-agency partnership working. Below is a flowchart which illustrates how to refer a concern of this nature.





## The Channel Referral Process

Once a referral has been made and it meets the Channel criteria, the individual/group become part of the Channel process, the Police will carry out the below process with the support of multi-agency partners working to the relevant Local Authority Lead. This process takes place in order to identify the level of risk and an appropriate support plan where necessary.



If you wish to know more about Channel please contact the Regional Prevent/Channel Lead (South)

DI Sam Norman on 01392 226514 alternatively send any questions to [prevent@devonandcornwall.pnn.police.uk](mailto:prevent@devonandcornwall.pnn.police.uk)