



Northern, Eastern and Western Devon
Clinical Commissioning Group

PREVENT POLICY

Document Status:	Ratified
Version:	V1.2
Date Ratified	20/08/15
Review Date	August 2016

DOCUMENT CHANGE HISTORY		
Version:	Date:	Comments (i.e. viewed, or reviewed, amended approved by person or committee)
V1.1	July 2015	Minor amendments following consultation
V1.2	20/08/15	Ratified by Quality Committee
Authors:	Tamsin Banks	

NEW Devon CCG has 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, sexual orientation, marital status, religious belief or disability. This policy will apply equally to full and part time employees. All NEW Devon 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 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.

CONTENTS

Section	Page
1. Introduction	5
2. Purpose and scope	5
3. Understanding and recognising the risks and vulnerabilities of radicalisation	6
4. Training	6
5. What to do if you are concerned	6

Linked strategies, policies and other documents	<p>Safeguarding Adults Policy (Draft) Safeguarding Children Policy (Draft) Allegation Policy (Draft) Prevent Duty Guidelines for England and Wales 2015</p> <p>Counter-Terrorism and Security Act 2015 Prevent strategy 2011 - Publications - GOV.UK</p>
--	--

1. Introduction

1.1 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.

1.2 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.

1.3 "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.

1.4 Prevent Duty Guidance for England and Wales: 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 has been published and the Prevent Duty came into force on 1st July 2015. [Prevent Duty Guidance for England and Wales](#)

1.5 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. See Appendix 1 for CCG Prevent Duties Responsibilities.

2. Purpose and Scope

2.1 This policy outlines Northern, Eastern and Western Devon Clinical Commissioning Group's (CCG) approach to supporting the Prevent agenda.

2.2 The policy applies to all staff working within the CCG whether employed, contracted or on a voluntary basis.

2.3 The NEW Devon CCG Prevent Lead is the Head of Safeguarding Susan Baldwin Telephone: 07826892445 who's responsibility it is to ensure all CCG staff have an awareness of the Prevent agenda and that all members of staff

who have contact with members of the public receive Health WRAP training.

3. Understanding and Recognising Risks and Vulnerabilities of Radicalisation

- 3.1 There is no such thing as a 'typical extremist' and those involved in extremism come from a range of backgrounds and experiences.
- 3.2 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.
- 3.3 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
- 3.4 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.
- 3.5 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.

4. Training

- 4.1 The Safeguarding Team have three staff members who are Home Office approved to facilitate workshops to Raise Awareness of Prevent (WRAP) NEW Devon CCG will ensure that all staff receive basic Prevent awareness during corporate updates and staff who have contact with members of the public receive Health WRAP training provided by the CCG Safeguarding Team trainers.

5. What to do if you are Concerned

- 5.1 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.

- 5.2 Once information has been received, the Prevent lead will determine if it meets the threshold for it to be considered for submitting to a formal multi-agency process. Within Devon this is currently managed through a formal Channel process although this is not consistent across England.
- 5.3 There are currently no thresholds in place as to what level of concerns require a Channel process; this is determined locally by the Prevent Team.
- 5.4 Safeguarding children referral and safeguarding adult alerts may be considered necessary.

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 engage 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 Chanel 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 mange 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.

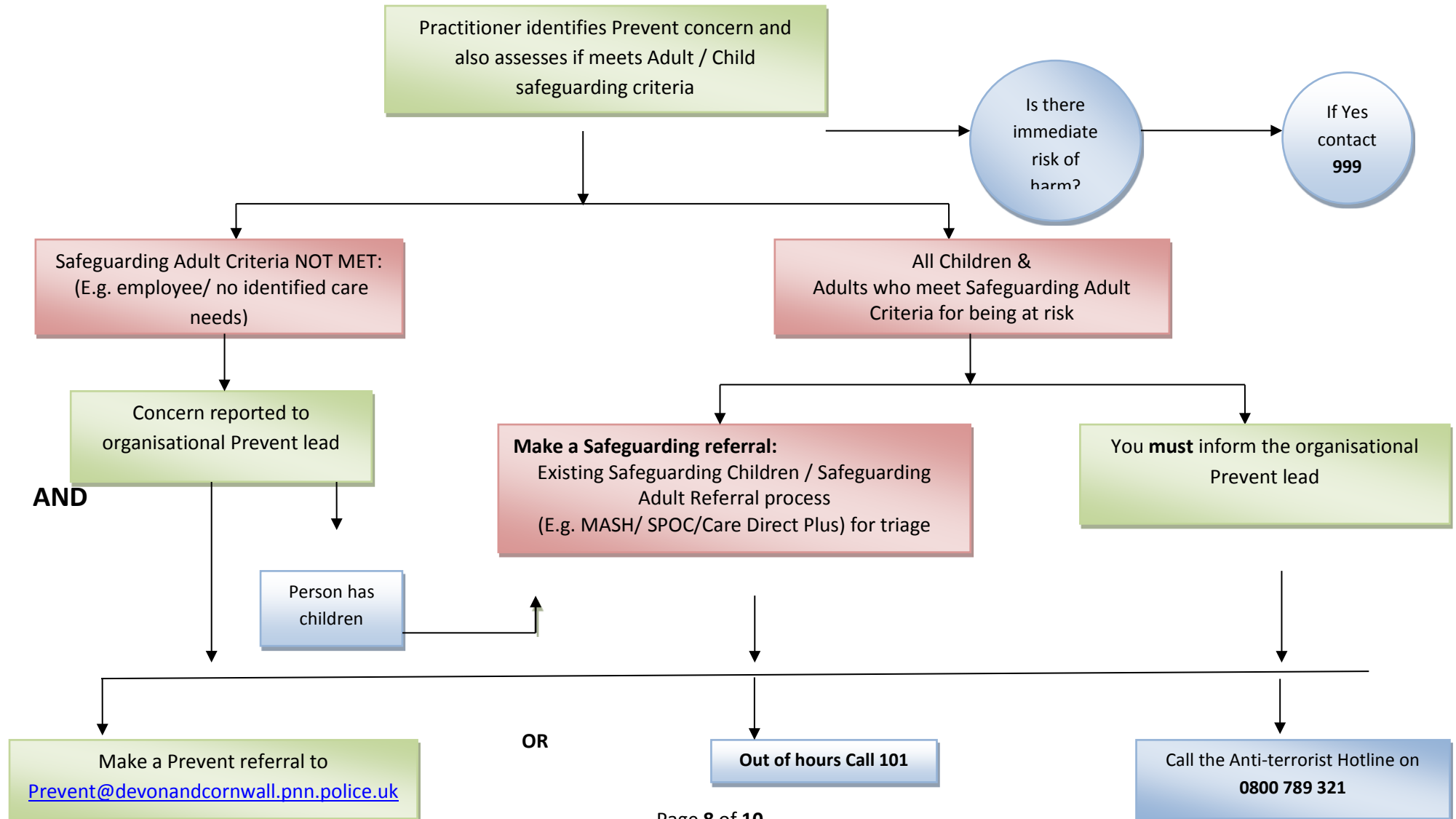
The requirements set out in the contract are generally in line with those detailed in the Prevent Duty. Which include:

- 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

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.



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.

Further information gathering with referrer and other key agencies, the individual is involved with. Are there shared concerns? Is there a vulnerability to radicalisation?

Yes

Multi-Agency Channel meeting arranged: this will be chaired by the Local Authority Channel Lead and attended by relevant Multi Agency representatives

Implement support plan depending on level of vulnerability/risk

Regular reviews to be conducted to ensure the individual will exit the Channel process when all panel members feel that the vulnerability to radicalisation has been completely removed or significantly lessened

No

If it is deemed that there is no risk, signpost as appropriate to existing and/or other safeguarding processes - Continue to monitor

