Sussex and East Surrey Commissioners

NHS

Sussex and East Surrey Sustainability and Transformation Partnership (STP)

Prevent Policy

APPROVED BY:	Approved by the Quality and Governance Committees November 2018
EFFECTIVE FROM:	November 2018
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This policy must be read in conjunction with the following policies:

Adult and Child Safeguarding Policy
Safeguarding Supervision
Serious Incident Assurance Policy

Sussex Safeguarding Adult Policy and Procedures

Version:	1
Summary:	This policy aims to ensure that Clinical Commissioning Groups (CCGS) within Sussex and East Surrey STP and member practices are clear in relation to their duties under Prevent strategy and should be read in conjunction with Safeguarding Adults and Safeguarding Children Policies
Ratified by:	Quality and Governance Committees
Date ratified:	21/11/2018
Name of originator/author:	Designated Nurse Adult Safeguarding East Sussex CCGs
Name of responsible committee/individual:	Naomi Ellis Head of Safeguarding and Looked After Children for Sussex and East Surrey STP
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Target audience:	All staff employed within Sussex NHS Clinical Commissioning Groups and their member practices. East Surrey CCG will adopt Surrey-wide policy

Document History
Revisions:

Version	Created by	Date	Main Changes/Comments
0.1	Head of Safeguarding and Looked After Children for Sussex and East Surrey STP	September 2018	Initial version
0.2	Governance and Policy Officer	October 2018	Formatting review
0.3	Managing Director	November 2018	Committee review
1	Quality and Governance Committees	21/11/2018	No changes

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1. INTRODUCTION.

1.1. This policy aims to make clear the duties of the STP CCGs employees and members practices in relation to PREVENT and should be read in conjunction with the Safeguarding Adults and Children Policy and Sussex Safeguarding Policy and Procedures.

1.2. The PREVENT Strategy is part of the Government's counter-terrorism strategy CONTEST and aims to stop people becoming terrorists or supporting terrorism. It is described as the only long term solution to the threat we face from terrorism. PREVENT focuses on all forms of terrorism and operates in a pre-criminal space, providing support and re-direction to vulnerable individuals at risk of being groomed into terrorist activity before any crimes are committed. Radicalisation is comparable to other forms of exploitation; it is therefore a safeguarding issue that staff working in the health sector must be aware of.

1.3. Intelligence suggests that the United Kingdom (UK) is currently "highly likely" to be subject to a terrorist attack. This is not necessarily from foreign nationals, but also from individuals born and bred in the UK. The recent terror attacks in Westminster, Manchester Arena and Borough Market and the increased concern regarding right wing extremism have raised the profile of the radicalisation agenda within the UK and central government has reviewed the processes that are in place to help minimise the radicalisation of vulnerable people within the UK.

1.4. The threat of the use of violence for extremist ends can be from a range of sources, including extreme political, religious and "rights" groups. PREVENT is not about denying the civil freedom to hold radical views that do not lead to the use of violence, instead it is one of the Government's responses to the terrorist threat in the UK.

1.5. Raising awareness of the health sector contribution to the Prevent strategy amongst healthcare workers is crucial. We are one of the best placed sectors to identify individuals who may be groomed into terrorist activity as the NHS deals with over 1 million patients every 36 hours (according to the NHS Confederation 2017: NHS statistics, facts and figures). Staff must be able to recognise signs of radicalisation and be confident in referring individuals who can then receive support in the pre-criminal space. To this end, the Prevent Training and Competencies Framework have been developed in order to encourage a consistent approach to training and competency development in respect of Prevent.

1.6. Where a healthcare worker encounters someone who may be in the process of being radicalised, it is vital that the individual is appropriately supported. It is therefore important that the crucial relationship of trust and confidence between patient and clinician is balanced with the clinician's professional duty of care and their responsibility to protect wider public safety.

If you require further information please contact your CCG Prevent Lead as detailed on the staff intranet sites.

2. CONTEXT AND LEGAL FRAMEWORK.

2.1. 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 with healthcare organisations helping to 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.

2.2. 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.

2.3. "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. See Appendix 2.

2.4. Prevent Duty Guidance for England and Wales. This is guidance for specified authorities in England and Wales on the duty mentioned in the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism.

2.5. 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 **Section 5** for CCG's PREVENT Duties Responsibilities.

3. POLICY STATEMENT.

3.1. Sussex and East Surrey STP has the ambition to improve population health and wellbeing by working together as an STP footprint. Integration of mental and physical health is at the core of wider strategic thinking. Safeguarding including Prevent is a core underpinning principle of our work

3.2. The Prevent agenda is relevant to all staff within the CCGs and their member practices, in particular those who directly work in or commission services for vulnerable people.

3.3. This policy and guidance aims to ensure that the Sussex and Surrey STP, both as commissioning organisations and via the services they commission have implemented the Prevent principles and have appropriate systems in place to ensure that:

- Staff know how to safeguard and support individuals, whether patients or staff, who they feel may be at risk of being radicalised by violent extremists.
- Staff know who to raise concerns to if they think that exploitation is taking place
- The CCG, and the health care organisations from whom services are commissioned promote and operate safe environments.

4. UNDERSTANDING AND RECOGNISING THE RISK.

4.1. There is no such thing as a "typical extremist" and those involved in extremism come from a range of backgrounds and experiences.

4.2. Adults, 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 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. Safeguarding adults from all forms of radicalisation is no different to safeguarding from other forms of harm and abuse.

4.3. The risk of radicalisation is the product of a number of factors and identifying this risk requires that staff exercise their professional judgement, it is suggested there is no single profile or indication of a person who is likely to become radicalised but factors increasing the risk can include (not exhaustive):

- Identity crisis, young people or adults who are exploring issues of cultural or religious identity and uncomfortable in their place in society.
- Personal crisis e.g. tensions within the family, separation, divorce.
- Personal circumstances e.g. unemployment.
- Criminality, may be involved in petty crime and drawn into extremist behaviour.
- Seeking further advice is necessary. It may be combined with other vulnerabilities or may be the only risk identified. Potential indicators include:
  - Noticeable behavioural changes.
  - Expression of extreme views.
  - Possession of extremist literature or symbolism.
  - Advocating violent actions and means.
  - Seeking to recruit others to an extremist ideology.

5. ROLES AND RESPONSIBILITIES.

5.1. The CCG is not specifically captured in either the PREVENT or the CHANNEL Duty; however it has responsibilities as a result of its role within the health system.

5.2. **Prevent Lead -** CCGs within the STP must have a named Prevent Lead who is responsible for:

- Implementation, monitoring and review of the Prevent strategy, delivery plan and policy documents on behalf of the CCG.
- Providing support and advice on Prevent concerns raised by staff.
- Implementing, monitoring, reviewing and ensuring access to the training provided within the CCG, ensuring it meets the national competencies contained

within Prevent Training and Competencies Framework and ensuring this training is delivered at regular intervals so all staff are able to attend as required.
- Liaising with other relevant services and sectors as required.
- Ensuring engagement and attendance at CHANNEL panel.
- Ensuring engagement and attendance at the Prevent Boards.
- Ensuring engagement at Regional and Local Prevent Forums.
- Monitoring provider trusts compliance with Prevent Duty and ensuring mental health trusts work in accordance with www.england.nhs.uk/wp-content/uploads/2017/11/prevent-mental-health-guidance.pdf

5.3. CCG Staff – All staff are responsible for:

- Reporting PREVENT related concerns to the PREVENT lead.
- Keeping themselves informed and up to date about changes to the procedural documents, particularly policy changes. This information will be provided by e-mail, and the CCG website.
- Ensuring they have undertaken PREVENT training at the appropriate level for their role Prevent Training and Competencies Framework.

5.4. Contract and Performance Management – As commissioners of services NHS Trust and Foundation Trusts named in the PREVENT duty and contract holders of a number of health organisations utilising the NHS Standard Contract, the CCG has a responsibility to provide oversight and performance management regarding implementation of the PREVENT duty within provide organisations. Key considerations for monitoring provider performance include:

- Are organisations meeting the training requirements as laid out in the Prevent Training and Competencies Framework
- Do providers have policies and procedures in place?
- Are providers identifying PREVENT concerns and making CHANNEL referrals?
- Are providers engaging with CHANNEL Panel when relevant?

This is achieved by Prevent Lead ensuring:

- Quarterly submission of prevent returns to NHS England and CCG by their provider trusts.
- Monitoring of training compliance and ensuring is linked to adult and child safeguarding training and competencies.
- Monitoring attendance at Prevent boards and Channel panels.
- CCG prevent lead reporting quarterly to committees and to Governing Bodies within the annual report and escalating any issues by exception.

6. RAISING CONCERNS.

6.1. 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.

6.2. The Prevent Lead will discuss and give advice accordingly and make a referral following local pathways for the appropriate CCG, if the Prevent Lead is unavailable

you can contact one of the other STP named **Prevent lead** or make a referral following local pathways as detailed in Appendix 1.

6.3. As with any other safeguarding concern, if a staff member suspects imminent or actual harm to an individual or individuals they must report their concern as a matter of urgency by dialling 999.

7. TRAINING AND IMPLEMENTATION.

7.1. All staff to be made aware of the Prevent Strategy and how it is being implemented within the CCG.

7.2. All staff will have access to training as laid out in the Prevent Training and Competencies Framework.

7.3. All Prevent training will be linked to adult and child safeguarding training.

8. EQUALITY STATEMENT

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, sex, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

9. MONITORING AND REVIEW

This policy will be reviewed two yearly by the STP Prevent Leads. Where review is necessary due to legislative change, this will happen immediately.

10. REFERENCE AND FURTHER READING

10.1. Government Publications

Building Partnerships, Staying Safe: Guidance for healthcare Organisations and Managers. www.gov.uk/government/publications/building-partnerships-staying-safe-guidance-for-healthcare-organisations

CHANNEL guidance. www.gov.uk/government/publications/channel-guidance

CONTEST counter terrorism strategy. www.gov.uk/government/collections/contest

Counter Terrorism and Security Act 2015. www.legislation.gov.uk/ukpga/2015/6/contents

PREVENT duty guidance for England and Wales. www.gov.uk/government/publications/prevent-duty-guidance

PREVENT Strategy. www.gov.uk/government/publications/prevent-strategy-2011

PREVENT Training and Competencies Framework (October 2017) www.england.nhs.uk/publication/prevent-training-and-competencies-framework/

Sussex Safeguarding Adults Policy and Procedures sussexsafeguardingadults.procedures.org.uk/

10.2. NHS Publications

NHS Confederation: NHS statistics, facts and figures. www.nhsconfed.org/resources/key-statistics-on-the-nhs

NHS England: Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework. www.england.nhs.uk/wp-content/uploads/2015/07/safeguarding-accountability-assurance-framework.pdf

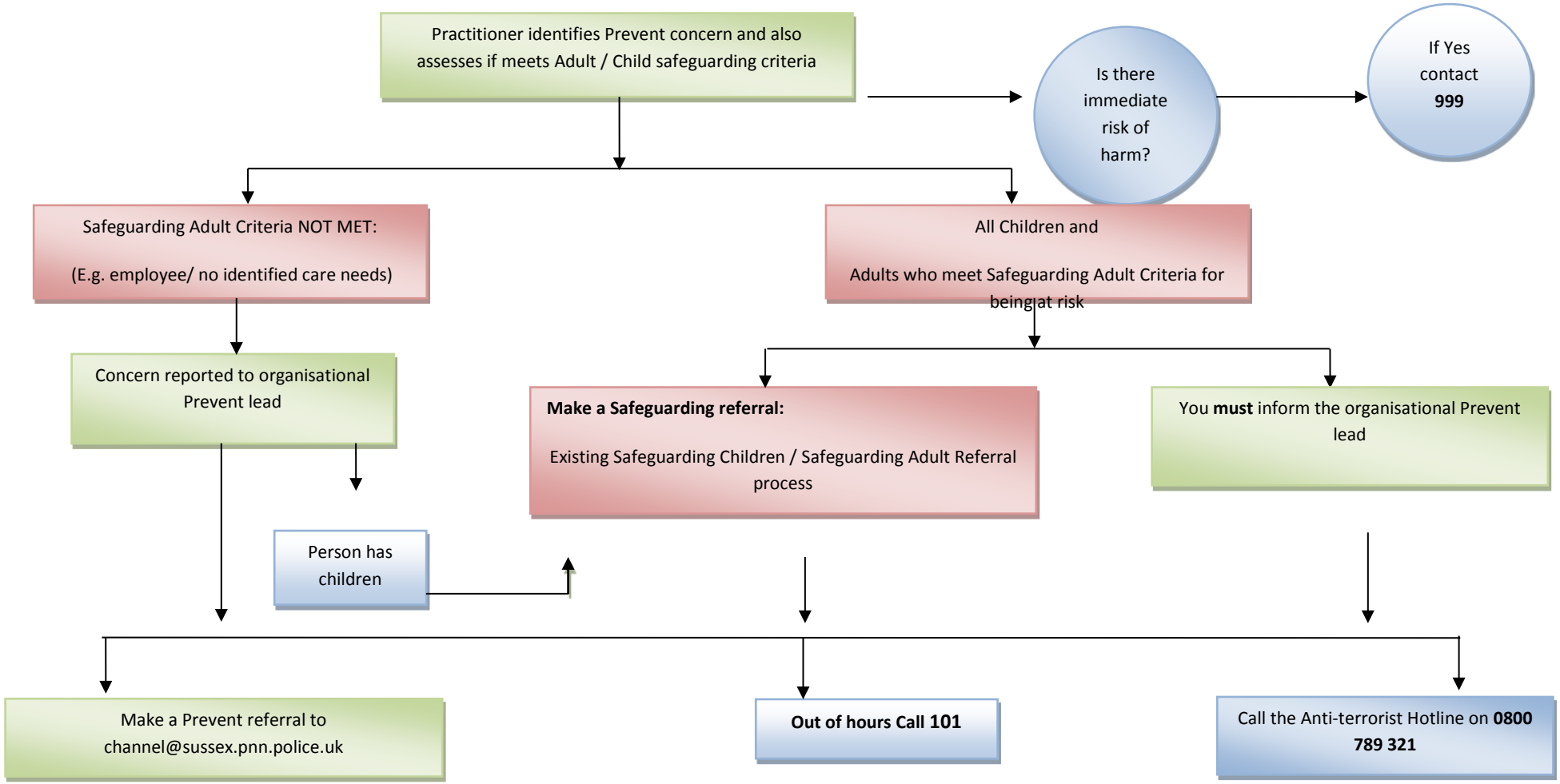
NHS England CCG Improvement and Assessment Framework. www.england.nhs.uk/commissioning/ccg-assess/

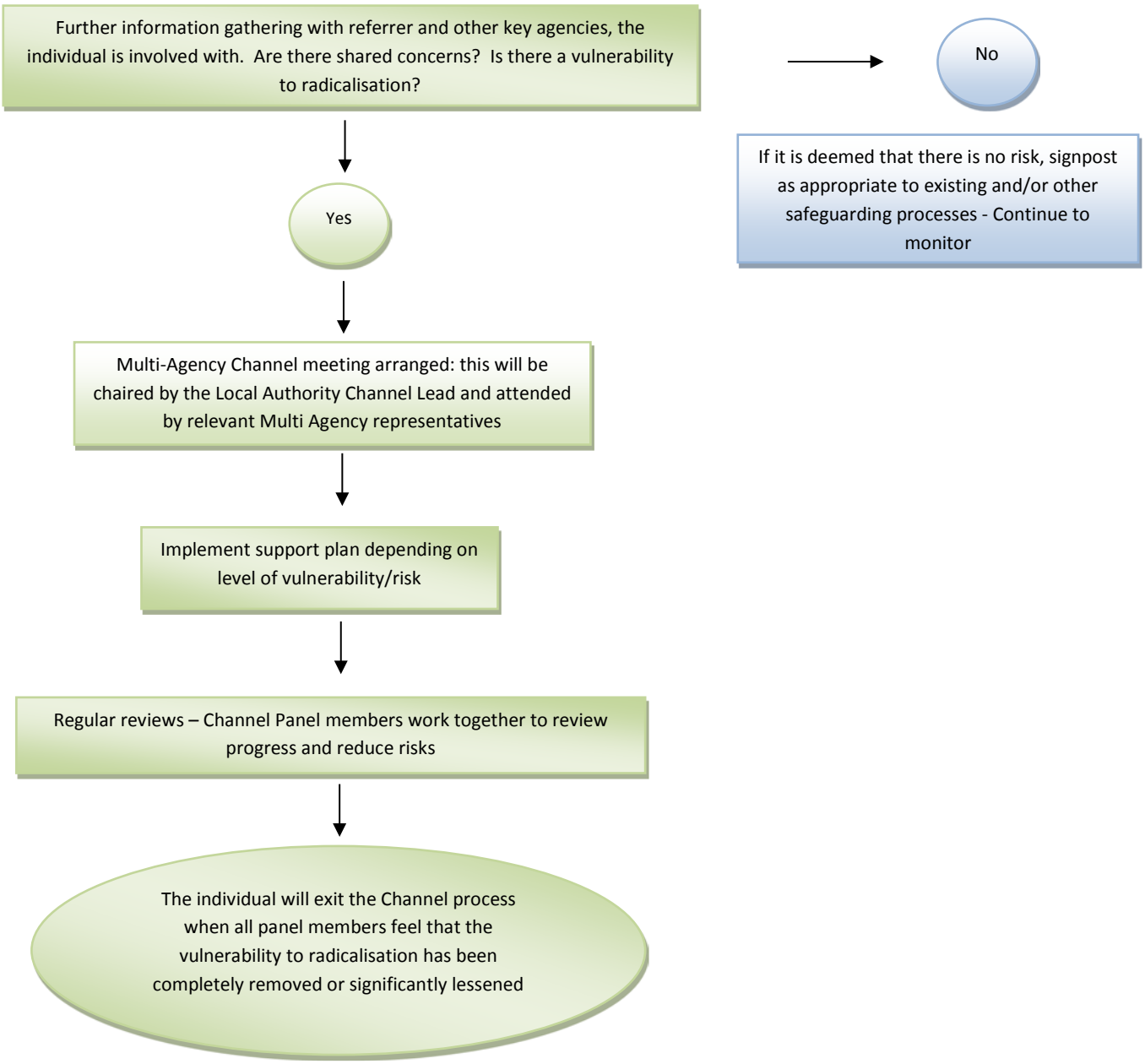
NHS England PREVENT Training and Competencies Framework. www.england.nhs.uk/publication/prevent-training-and-competencies-framework/

NHS Standard Contract. www.england.nhs.uk/nhs-standard-contract/

Appendix 1 - Prevent Referral Flow Chart

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.



Appendix 2 - Channel 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.