



PREVENT POLICY

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1. INTRODUCTION

CONTEST

The Government's national counter terrorism strategy – CONTEST – aims to reduce the risk to the United Kingdom and its interests overseas from international terrorism, so that people can go about their lives freely and with confidence. This strategy is set out in the HM Governments Prevent Duty Guidance 2015. These forms of terrorism include:

- Far Right extremist
- AL-Qaida influenced groups
- Environmental Extremists
- Animal Rights Extremists

CONTEST has four work streams:

1. Pursue: to stop terrorist attacks
2. Protect: to strengthen our protection against terrorist attack
3. Prepare: where an attack cannot be stopped, to mitigate its impact
4. Prevent: to stop people becoming terrorists or supporting terrorism (Appendix 8)

Prevent

Prevent is a Government strategy and is led by the Home office. (DoH Cm8092, 2011) Prevent focuses on working with individuals and communities who may be vulnerable to the threat of violent extremism and terrorism. Supporting vulnerable individuals and reducing the threat from violent extremism in local communities is priority for the health service and its partners.

The overall aim of the Prevent strategy is to prevent people becoming terrorists or being involved in supporting terrorism or violent extremism. In order to achieve this aim, there are 5 national strategic objectives as follows:

1. Challenge the ideology behind violent extremism and support mainstream voices.
2. Disrupt those who promote violent extremism and support the places where they operate.
3. Support individuals who are vulnerable to recruitment or have already been recruited by violent extremists.
4. Increase the resilience of communities to violent extremism.
5. Address grievances that ideologies are exploiting.

The Prevent strategy supports the reduction of racism and inequalities and promotion of cohesion.

The health sector is a key strategic partner in Prevent and, by working with other public sectors, it can help protect vulnerable individuals and those around them from exploitation or harm.

The main principle of Prevent is to improve health and well-being through the delivery of health care while safeguarding vulnerable individuals. Health care staff may meet and treat people who are vulnerable to radicalisation. Therefore, as part of the health sector contribution, where staff have concerns around the safety of a vulnerable individual there is a framework in place to enable concerns to be raised, which will also assist in identifying the risk to the vulnerable individual and / or staff and the organisation. This in turn will ensure that those who are at risk or have been influenced by violent extremists will receive help and support from those partners best placed to meet the identified need. (Appendix 6)

This can be achieved by employing appropriate and safe information sharing processes as well as building on existing partnerships with other Prevent partners. (Appendix 7)

There is a need to balance clinical, professional, individual and organisational responsibilities and staff will need to work within:

- The appropriate codes of conduct on confidentiality.
- Organisational governance and risk structures and mechanisms.
- Multi- professional / multiagency case management of vulnerable individuals.
- Relevant legislation.

It is necessary to make it more difficult for violent extremists to use the health environment as a recruiting ground. Health care organisations are expected to:

- Assess the risk and vulnerability within their own organisation and will need to put in place policies and procedures that make it harder for radicalisers to recruit individuals within the organisation.
- Identify whether there are any structural inequalities or discrimination in the course of service delivery that may contribute to genuine grievances among vulnerable communities, patients and staff. (Appendix 9)

2. SCOPE

This policy applies to all staff employed within the Trust or Trust Apprentices either directly or indirectly, and to any other person or organisation that uses Trust premises for any purpose.

3. AIM

The purpose of this policy is to identify how staff and Trust Apprentices will be supported to develop an understanding of the Prevent Strategy and how they can utilise their existing knowledge and skills to recognise that someone may have been or is being radicalised. The policy will build on existing safeguarding policies and procedures which are already in place within the Trust.

Prevent Strategy Key Objectives are:

- Challenge the ideology that supports terrorism and those who promote it.

- Prevent vulnerable individuals from being drawn into terrorism and ensure that they are given appropriate advice and support.
- Work with sectors and institutions where there are risks or radicalisation.

Health sectors are expected to be involved in delivering objectives 2 and 3 only.

4. ROLES AND RESPONSIBILITIES

This policy applies to all staff employed within the Trust, either directly or indirectly, and to any other person or organisation that uses Trust premises for any purpose.

Preventing someone from becoming a terrorist or supporting terrorism is no different from safeguarding vulnerable individuals from other forms of exploitation. Therefore, this policy sits along the Trust's Safeguarding policy.

Chief Executive and the Trust Board

The Chief Executive and Trust Board have ultimate accountability for actions and inactions in relation to this policy.

Head of Safeguarding and Prevent Lead

The Head of Safeguarding and Prevent Lead must ensure that the aims of this policy are implemented across the Trust, provide support and professional advice to all staff, Trust Apprentices, managers and executive team on matters regarding safeguarding and the Prevent strategy.

Directors, Assistant Directors and Heads of Service

- Be familiar with policy and aware of their own responsibilities.
- Ensure that staff undertake Prevent training.
- Have an understanding of the referral process regarding Prevent and who are the key contacts to seek advice and support from.

Senior Managers for all areas of the Trust

- Be familiar with policy and aware of their own responsibilities.
- Ensure that staff and Trust Apprentices undertake *Prevent* training.
- Have an understanding of the referral process regarding *Prevent* and who are the key contacts to seek advice and support from.

Human Resources Director/ Managers

- Be familiar with policy and aware of own responsibilities.
- Ensure that recruitment and induction arrangements operate in accordance with relevant regulations for the conduct and vetting of staff.
- Provide management information on staff training, and compliance.

All Staff

- Be familiar with policy and awareness of own responsibilities.

5. DEFINITIONS

Vulnerable Adult - A person over the age of 18 years who is or may be in need of community care services (including health care) by reason of mental or other disability, age or illness, and who is or may be unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation.. The Care Act 2014 uses eligibility criteria to determine an adult's needs to function fully as an adult with or without care and support but does not define an adult as vulnerable.

Safeguarding Children – Child / Children, the definition of child is “anyone who has not yet reached their 18th birthday” (Children’s Act 1989 & 2004).

Terrorism - Is defined in the Terrorism Act 2000 (as amended in the Counter Terrorism and Securities Act 2015) as an action that endangers or causes serious violence to a person or people or causes serious damage to property or seriously interferes or disrupts an electronic system. The use of threat must be designed to influence the government or to intimidate the public and is made for the purpose of political, religious or ideological gain.

Radicalisation - Refers to the process by which people come to support terrorism and forms extremism leading to terrorism.

Extremism - Is vocal or active opposition to fundamental values including democracy, the rules of law, Individual liberty and mutual respect and tolerance of different beliefs and faiths. Also included are extremism calls for death to members of the armed forces, whether in this country or overseas.

A Prevent Concern - Does not have to be proven beyond reasonable doubt, however it should be based on something that raises concern which is assessed using existing professional judgement from health or social care staff.

Vulnerability and Prevent - A person who is susceptible to extremist’s message and is at risk of being drawn into terrorism or supporting terrorism at a point in time.

6. ABBREVIATIONS

All abbreviations within the policy are written in full.

7. POLICY PROCESS

Exploitation

Evidence suggests that there is no obvious profile of a person who is likely to become involved in a terrorist-related activity, or single indicator of when a person might move to support extremism.

However, the increasing body of information indicates that factors thought to relate to personal experiences of vulnerable individuals affect the way in which they relate to their personal environment and may make them susceptible to exploitation or supporting terrorist

activities. Vulnerable individuals who may be susceptible to radicalisation can be patients, carers and / or staff (Appendix 9).

Should any member of staff develop concerns arising from changes in an individual's behaviour which indicates that they may be drawn into violent extremism, they will need to take into consideration how reliable or significant these indicators are.

Indicators of concern

Indicators that staff may observe or identify regarding individuals' behaviour or actions may include:

- Graffiti symbols, writing or artwork promoting violent extremist messages or images.
- Patients/staff accessing violent extremist material online, including social networking sites.
- Parental / family reports of changes in behaviour, friendships or action and requests for assistance.
- Patients voicing opinions drawn from violent extremist ideologies and narratives.
- Use of extremist or hate terms to exclude others or incite violence.
- Harmful influences on vulnerable individuals from staff, colleagues, volunteers, parents, spouse, family members, friends, external groups of other patients.
- Inappropriate use of the internet on Trust premises.
- External groups using the Trust premises for meetings, distributing violent extremist materials.

(Appendix 9)

The Internet and Prevent

Vulnerable individuals may be exploited in many ways by radicalisers and this could be through direct face to face contact, or indirectly through the internet, social networking or other media.

Access to extremist material is often through leaflets and local contacts. However, the internet plays an important role in the communication of extremist views. It provides a platform for extremists to promote their cause and encourage debate through websites, internet forums and social networking. It is a swift and effective mechanism for disseminating propaganda material and is not always possible to regulate.

Trust staff should be aware of anyone making frequent visits to websites showing images such as armed conflict around the world and providing speeches and access to material from those involved in the radicalising process.

A dedicated website to report online content that may be illegal is available at www.direct.gov.uk/en/CrimeJusticeAndTheLaw/Counterterrorism/DG_183993

The Role of the Trust and Delivering the Prevent Strategy

Radicalisation is a process not an event, and there is no single route or pathway to radicalisation. Evidence indicates that those targeted by radicalisers may have doubts about what they are doing. It is because of this doubt that frontline healthcare workers need to have mechanisms and interventions in place to support an individual being exploited and to help them move away from terrorist activity. Thus, the Trust has a duty to ensure safe environments where extremists are unable to operate.

It is essential, therefore, that all the staff know how they can support vulnerable individuals (patients, carers, or members of staff) who they feel may be at risk of becoming a terrorist or supporting extremism. Prevent is an ongoing initiative and designed to become part of the everyday safeguarding routine for NHS staff.

Trust Board level leadership and responsibility for Prevent rests with the Executive Director of Quality & Patient Care. The Trust Board will receive regular reports on Prevent related matters.

The Trust's Head of Safeguarding and Prevent has been identified as the Single Point of Contact (SPOC) for Prevent and will work in partnership with Safeguarding colleagues across the Trust.

Quarterly reports on Prevent related referrals and the numbers of staff undertaking the Home Office and Department of Health Workshop to Raise Awareness of Prevent (Health WRAP) training will be reported to the Regional Prevent Co-ordinator for South Central, in line with NHS England guidance.

Anonymised information regarding Prevent related incidents, Prevent training data and Prevent related infrastructure changes / challenges will be included in the Safeguarding Lead's regular report to the Patient Safety Group.

Raising Prevent Concerns

Patients

In the event that a member of Trust staff has concerns that a patient or carer may be at risk of being drawn into terrorism, has begun to express radical extremist views, or may be vulnerable to grooming or exploitation by others for the purpose of radical extremist intent, the primary point of contact will be the Trust's Prevent Lead who will manage such enquires with support from the Assistant Director of Patient Care.

All concerns should be escalated, clearly identifying the precise nature of the concerns. This should be discussed wherever possible with the member of staff's line manager or supervisor prior to referral. (Appendix 6)

If the Prevent Lead determines that a safeguarding referral needs to be made, it will be done in accordance with local inter-agency safeguarding / Prevent national referral procedures.

The Head of Safeguarding and Prevent Lead will ensure that there is appropriate feedback to the member of staff raising the concern. The Head of Safeguarding and Prevent will advise on appropriate support for staff and the vulnerable individual.

Children

Health care professionals may meet and treat people who are vulnerable to radicalisation including children. Working Together to Safeguard Children states “*Experience suggests that young people from their teenage years onwards can be particularly vulnerable to getting involved with radical groups through direct contact with members, 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*”

Employees

Although there are relatively few instances of Healthcare staff radicalising others or being drawn into extremist acts, it is still a risk that the Trust needs to be aware of and have processes within which to manage any concerns e.g. disciplinary action.

Where any Trust employee expresses views, brings material into the organisation, uses, or directs patients to extremist websites or acts in other ways to promote terrorism, the Trust will look to use non-safeguarding processes in order to address the concerns.

Where a staff member has a concern about a colleague or an apprentice this must be raised with their line manager. HR/C10 – Whistleblowing Policy can be referenced and used for reporting concerns. The line manager will discuss the concerns with the Trust’s Head of Safeguarding and Prevent Lead and Human Resources Advisor in the first instance.

The Prevent professional will assess and manage any related safeguarding or Prevent risks and, where appropriate raise a prevent national referral and contact the relevant Police force Prevent Lead. The Human Resources Advisor will lead on advising the line manager in relation to the disciplinary process should this be appropriate.

All Prevent concerns must be discussed with / emailed to safeguarding@scas.nhs.uk

Partnership Working

It should be stressed that there is no expectation that the Trust will take on a surveillance or enforcement role as a result of Prevent. Rather, it must work with partner organisations to contribute to the prevention of terrorism by safeguarding and protecting vulnerable individuals and making safety a shared endeavour.

The Prevent Lead will engage with partnership groups with the responsibility to share concerns raised within the organisation including the Police Prevent Steering Group.

The Head of Safeguarding and Prevent Lead will represent the Trust on Local Prevent Steering Groups and inter-agency meetings.

Information Sharing

In providing care, the Trust will at times develop partnerships with other agencies to ensure an individual gets the care they need. Being influenced or radicalised by extremism relates to adverse effects upon the individual, family members, the local community and / or the potential creation of unacceptable risk to public protection.

The ultimate responsibility for information sharing in a health care organisation is with the Caldicott Guardian. In the Trust, the Caldicott Guardian is the Executive Director of Patient Care and Service Transformation.

Please see Data Protection and Confidentiality Policy.

(Appendix 7)

8. TRAINING

Mandatory Training

Training required to fulfil this policy will be provided in accordance with NHS England Prevent Training and Competencies framework 2017 and the Trust's safeguarding/ Prevent Training Needs Analysis. Management of training will be in accordance with the Trust's Statutory and Mandatory Training Policy. It is essential that frontline direct care and public facing staff have an understanding of the Prevent and respond to vulnerable individuals who may be being radicalised. This includes staff responsible for the education of apprentices and staff in the Trust.

The Home Office has developed a training package which includes Health WRAP to equip healthcare workers in meeting the Prevent related challenges. The Trust has a small number of NHS England accredited trainers, who will be responsible for delivering the face to face Health WRAP workshops across the organisation. WRAP eLearning has also been developed and this will form part of the Trusts training strategy.

All new staff will receive basic awareness training on Prevent during the Safeguarding presentation during the Trusts Induction process.

Non patient staff will receive basic awareness training by completion of the Adults Safeguarding Level 1 eLearning training.

WRAP Training and awareness of the Prevent agenda for frontline staff will be delivered through the mandatory Safeguarding Training for all safeguarding level 3 trained staff. This will also include specific teams that have a patient or public facing duty in their role.

Specific Training not covered by Mandatory Training

Not applicable to this document

9. EQUALITY AND DIVERSITY

The Equality and Impact assessment is included in appendix 3

10. MONITORING

All notifications and Training compliance will be monitored quarterly by the Head of Safeguarding and Prevent Lead via the Unify NHS England report. This will be achieved through the Safeguarding Group with an upward report to the Patient Safety Group.

11. CONSULTATION AND REVIEW

The policy will be consulted with all staff for a period of two weeks prior to approval from the Patient Safety Group followed by the Quality and Safety Group.

12. IMPLEMENTATION (including raising awareness)

The policy will be publicised in the Trusts news magazines and via PREVENT training, Safeguarding training and the Trusts Intranet and external website.

13. REFERENCES AND ASSOCIATED DOCUMENTS

HM Government PREVENT strategy 2011

The Prevent Duty Guidance for England and Wales 2021

Counter –Terrorism and Securities Act 2015 (with amendments in 2017)

NHS England PREVENT Training and Competencies Framework 2015

14. ASSOCIATED DOCUMENTATION

Safeguarding adults Policy

Safeguarding Children's policy

The Trusts Safeguarding and Prevent Training Needs Analysis

Appendix 1 – REVIEW TABLE

This policy is reviewed and changed regularly to bring it in line with new guidance from both NHS England and the Home Office and to ensure that this policy is in line with current legislation.

Appendix 2 – RAISING PREVENT CONCERNS

Prevent concerns may relate to a patient or carer, and concerns may be about an adult or a child.

Identify firstly whether the concern is Safeguarding, or Prevent.

Safeguarding concerns should be raised through the normal Safeguarding referral process.

Prevent concerns must be raised via the Safeguarding referral process, as well as raising a Prevent Referral.

The Head of Safeguarding and Prevent Lead must be alerted to any Prevent referral and is contactable at Antony.Heselton@scas.nhs.uk or 07803760616.

The Head of Safeguarding and Prevent Lead will raise a national Prevent referral by contacting the Local Authority Prevent Lead and, if required, the Police Prevent Lead.

Appendix 3 – INFORMATION SHARING

Statutory reasons to share information without consent of the patient or individual according to the following statutory guidelines.

Listed below is the ground in which sharing information is legal:

- Prevention and detection of crime (Crime and Disorder Act 1998)
- Prevention or detection of an unlawful act (Schedule 1 part 2, Data Protection Act (DPA) 2018)
- Section 21CA of the Terrorism Act 2000 (Schedule 1 part 2 DPA 2018)
- Necessary for substantial public interest (Schedule 1 part 2 DPA 2018)
- In accordance with a Court Order
- Child Protection – disclosure to Social Services or the Police for the exercise of functions under the Children Act, where the public interest in safeguarding the child's welfare overrides the need to keep the information confidential (Schedule 1 part 2 DPA 2018)
- Right to Life, and the right to be free from torture or inhuman or degrading treatment (Human Rights Act 1998, Articles 2 and 3)

Appendix 4 – DEFINITION OF TERMS

Terrorism is defined in the Terrorism Act of 2000 (TACT 2000) as an action that endangers or causes serious violence to a person or people causes serious damage to property or seriously interferes or disrupts an electronic system. The use of threat must be designed to influence the government or to intimidate the public and is made for the purpose of political, religious or ideological gain.

Radicalisation in this protocol refers to the process by which people come to support terrorism and forms of extremism leading to terrorism.

Extremism is vocal or active opposition to fundamental values including democracy, the rule of the law, individual liberty, and mutual respect and tolerance of different beliefs and faiths. We also include our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

A Prevent Concern does not have to be proven beyond reasonable doubt; it should however be based on something that raises concern which is assessed by using existing professional judgement of a health or social care member of staff.

Vulnerability in the context of *Prevent* is a person who is **susceptible** to extremists' messages and is at risk of being drawn into terrorism or supporting terrorism at a point in time.

The definition of **vulnerable** individual from the Care Act 2014

A person who has health and social care needs, a person who is at risk of or is currently being abused, and is unable to protect themselves from that abuse and in No Secrets (2000) is "who is or may be in need of community care services by reason of mental or other disability, age or illness; **and who** is or may be unable to take care of him or herself, **or** unable to protect him or herself against significant harm or exploitation".

There is a synergy with these two definitions. "Consequently, the definition of 'vulnerable adult' may apply broadly within healthcare." (No Secrets 2000)

Appendix 5 – VULNERABILITY

Identity Crisis

Adolescents/vulnerable adults who are exploring issues of identity can feel both distant from their parents/family and cultural and religious heritage, and uncomfortable with their place in society around them. Radicalisers can exploit this by providing a sense of purpose or feelings of belonging. Where this occurs, it can often manifest itself in a change in a person's behaviour, their circle of friends, and the way in which they interact with others and spend their time.

Personal Crisis

This may, for example, include significant tensions within the family that produce a sense of isolation of the vulnerable individual from the traditional certainties of family life.

Personal Circumstances

The experience of migration, local tensions or events affecting families in countries of origin may contribute to alienation from UK values and a decision to cause harm to symbols of the community or state.

Unemployment or under-employment

Individuals may perceive their aspirations for career and lifestyle to be undermined by limited achievements or employment prospects. This can translate to a generalised rejection of civic life and adoption of violence as a symbolic act.

Criminality

In some cases a vulnerable individual may have been involved in a group that engages in criminal activity or, on occasion, a group that has links to organised crime and be further drawn to engagement in terrorist-related activity.

The following have also been found to contribute to vulnerable people joining certain groups supporting terrorist-related activity:

- Ideology and politics
- Provocation and anger (grievance)
- Need for protection
- Seeking excitement and action
- Fascination with violence, weapons and uniforms
- Youth rebellion
- Seeking family and father substitutes
- Seeking friends and community
- Seeking status and identity
- A misconception and/or rejection of UK foreign policy
- A distrust of western media reporting
- Perceptions that UK government policy is discriminatory (eg counter-terrorist legislation)

Taken from: 'Building Partnerships, Staying Safe – The health sector contribution to HM Government's *Prevent* strategy: guidance for healthcare organisations'