

TRUST PREVENT POLICY

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	V1	August 2015	Jane O'Daly- Miller Trust Safeguarding Lead	Statutory Duty re prevent enactment 2015
	V 2	November 2018	Jane O'Daly- Miller Trust Safeguarding Lead	Following Trust merger
<b>Intended Recipients:</b> All Staff				
<b>Training and Dissemination:</b> e-learning packages and policy available via the intranet				
<b>To be read in conjunction with:</b> Trust Safeguarding Adults & Children Policies and the Managing Allegations Policy				
<b>In consultation with and Date:</b> Trust Safeguarding Committee, Trust Safeguarding Operational Reference Group				
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stage Two		Completed No		
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<b>Contact for Review</b>			Trust Safeguarding Lead	

<b>Executive Lead Signature</b>	Executive Chief Nurse & Director of Patient Experience
<b>Approving Executive Signature</b>	Cathy Winfield

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## 1. Introduction

This policy describes the organisational responsibilities of UHDB as a specified authority, arising from the Counter-Terrorism and Security Act 2015 and the Government Contest Strategy, to have due regard to the need to prevent vulnerable people being drawn into extremist and terrorist activities by identifying vulnerable individuals who are at risk of being radicalised

CONTEST is the strategy created to protect the UK from international terrorism and is led by the Office for Security and Counter Terrorism at the Home Office.

There are four strands to the strategy:

Pursue	to stop terrorist attacks
Prevent	to stop people becoming terrorists/supporting violent extremism
Protect	To strengthen our overall protection against terrorist attacks
Prepare	where we cannot stop an attack, to mitigate its impact

The Department of Health has been identified as a key strategic partner in the Prevent strand. Prevent focuses on working with individuals and communities who may be vulnerable to the exploitation of violent extremism and terrorists. This policy applies to all staff employed by the Trust, either directly or as part of a contracted service.

## 2. Purpose and Outcomes

Every member of staff has a role to play in protecting and supporting vulnerable individuals who use our services and the implementation of the Prevent agenda is fundamental to our duty of care to such individuals

The policy identifies action required by the Trust and it's employees. Additionally it identifies the level of Prevent training required by members of the workforce to equip them to be able to respond appropriately.

## 3. Useful Terms

<b>Terrorism</b>	Actions of individuals or groups who seek to bring about social or political change through actions intended to cause serious harm, loss of life or raise attention through fear and/or damage to property to cause loss of life, disruption or raise attention by fear and/or damage to property.
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<b>Prevent Case Management (PCM)</b>	Prevent Case Management includes co-ordination of multi-agency Prevent activity at a local and regional level and linkages to national oversight of Prevent activity and includes information sharing, referral mechanisms and risk management processes.
<b>Radicalisation</b>	Refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.
<b>Extremism</b>	Prevent strategy defines as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.
<b>Non-violent extremism</b>	Extremism as defined above, which is not accompanied by violence.
<b>Prevent Competencies Framework</b>	Developed to provide clarity on level of training required for healthcare workers. Supports NHS providers to meet contractual obligations in relation to Safeguarding as set out in NHS standard Contract.
<b>Interventions</b>	Projects intended to divert people being drawn into terrorist activity. Includes mentoring, counselling, theological support, civic engagement, developing support networks or providing mainstream services.
<b>Prevention</b>	Reducing or eliminating risk of individuals becoming involved in terrorism. Prevent includes but is not confined to the identification and referral of those at risk of being drawn into terrorism into appropriate interventions.
<b>Safeguarding</b>	Process of protecting vulnerable people, whether from crime, other forms of abuse or (in context of this policy document) from being drawn into terrorist related activity.
<b>Vulnerability</b>	The condition of being capable of being injured; difficult to defend; open to moral or ideological attack. Within Prevent, word describes factors and characteristics associated with being susceptible to radicalisation.
<b>WRAP</b>	Workshop to Raise Awareness of Prevent (WRAP)
<b>Channel</b>	Channel panels form a key part of the <i>Prevent</i> strategy. The process is a multi-agency approach to identify and provide support to individuals who are at risk of being drawn into terrorism.

#### **4. Key Responsibilities/Duties (See Appendix 1 for Training Matrix)**

##### **4.1 Safeguarding Adult Boards & Safeguarding Children Boards**

Safeguarding Adult Boards are required to lead adult safeguarding arrangements across its locality and oversee and coordinate the effectiveness of the safeguarding work of its member and partner agencies.

The Trust is required, as a partner agency, to attend the Board and its sub-groups; participate in the work of the Board to achieve its aims and submit the findings of the Safeguarding Adult Assurance Framework (SAAF) to the relevant forum at the SAB.

Safeguarding Children Boards oversee, monitor and coordinate all safeguarding activity by organisations in their local area. The Trust is required to attend meetings of the Boards and their subgroups and participate in audit and performance reporting activities including s11 Children Act 2004 compliance audit

##### **4.2 Clinical Commissioning Groups (South Derbyshire Clinical Commissioning Group (SDCCG) and NHS East Staffordshire (ESCCG))**

The South Derbyshire Clinical Commissioning Group (SDCCG) and NHS East Staffordshire (ESCCG) monitor Trust performance in safeguarding in regular meetings with the Trust.

##### **4.3 Regional Prevent Coordinator**

The role of Regional Prevent Coordinators is to oversee implementation of Prevent across the region and to coordinate and verify appropriately trained trainers are in post across relevant organisations. The Trust is required to report data quarterly on Prevent on Prevent activity in relation to performance across a range of measures

##### **4.4 Executive Chief Nurse**

The Executive Lead accountable to the Trust Board for ensuring compliance with this policy in all parts of the Trust. The Executive Lead, or their nominated deputy, is a member of the Safeguarding Boards.

##### **4.5 Trust Designated Adult Safeguarding Manager**

The Trust DASM is an identified HR representative of sufficient seniority to ensure that a strategic overview is taken of issues relating to staff performance and management of allegations against staff in relation to safeguarding children and adults including Prevent. The Trust Safeguarding Lead works with the Trust DASM in an advisory capacity in such cases. The Trust DASM is responsible for overseeing response in specific cases and that where necessary referrals are made to the Police / Channel / Disclosure and Barring Service and for ensuring that safer working practices in relation to safeguarding are coordinated and monitored.

#### 4.6 **Trust Safeguarding Lead**

The Trust Lead for Safeguarding is also the Trust Prevent Lead and is responsible for alerting the Trust Safeguarding Committee and Lead Executive Officer to any concerns or shortfalls in safeguarding practice within the Trust, advising with regard to the impact of relevant policy, enquiries or legislation; for development or review of Safeguarding and Prevent training; Trust Policy and Procedures for Safeguarding Adults and children. The Trust Safeguarding Lead is also responsible for advice and support of staff and teams within the Trust and for reporting data quarterly to the Regional Prevent Coordinator

#### 4.7 **Trust Safeguarding Team**

The Trust Safeguarding Team is responsible for provision of training, advice and supervision to Trust staff and facilitating liaison with the appropriate Local Authority Social Care Departments and police services;

#### 4.8 **Trust Safeguarding Committee**

Should ensure that national developments regarding safeguarding adults / children and Prevent are incorporated into Trust policies and processes and advise the Trust Safeguarding Lead and Lead Executive regarding any issues with implementation in their area of responsibility accordingly. They also receive reports and monitor the implementation of adult / children safeguarding processes throughout the Trust, agree assurance / escalation reports to the Trust Quality Review Group, Quality Committee and Trust Board

#### 4.9 **Trust Safeguarding Operational Reference Group**

Meets quarterly and acts as a reference and consultation group for policies and procedures and escalation of issues from front-line practice which can impact on delivery of safeguarding best practice.

#### 4.10 **Business Units, Ward Sisters/Charge Nurses, Nursing and medical staff, On-call Managers will**

- Ensure that they are aware of the relevant policies and processes; undertake mandatory training and any refresher training required.
- Escalate concerns and communicate alerts to social services and send copies to the Trust Safeguarding Team.
- Must enter any safeguarding incident where it is alleged that it has been caused by hospital employees / processes into the Datix Incident reporting system.
- Have a responsibility to respond sensitively to a disclosure of abuse / concern and act in a professional manner and take appropriate action.
- Departmental managers and Senior Sisters/Charge Nurses will undertake initial investigations where allegations are made against the Trust.
- Ensure that concerns about individual cases are escalated where appropriate to the safeguarding team.

#### 4.11 **All Trust Staff including volunteers**

All staff / volunteers must

- raise concerns about the safety of any adult / child at risk of radicalization with whom they are directly or indirectly involved with and to work within the Trust safeguarding policies.
- Undertake relevant Prevent training and ensuring line managers are aware of any non-attendances or difficulties
- Ensure full confidentiality and sensitivity is maintained during the reporting, investigation and management of any Prevent related incidents

## 5. **Implementing the policy**

5.1 Healthcare staff are well placed to recognise individuals, whether patients or staff, adults or children, who may be vulnerable and susceptible to exploitation by extremists. Staff should recognise that in raising concerns they are **not** accusing someone of being a terrorist but they are recognising vulnerability to exploitation and seeking to safeguard that person appropriately

5.2 Trust Staff are expected to complete Prevent training as per Trust Training Needs Analysis –see appendix 1.

5.3 There is no expectation that staff will take on a surveillance or enforcement role as a result of Prevent. Rather, staff must work with partner organisations to contribute to the prevention of extremism by safeguarding and protecting vulnerable individuals and making safety a shared endeavour.

Where concerns exist, staff must refer to the relevant area Prevent team via the Police on telephone number 101, make a safeguarding referral to the appropriate children's or adults social care department and include the Trust Safeguarding Team in the email (uhdb.safeguarding@nhs.net )

5.4 Although there are relatively few instances of healthcare staff radicalising others or being drawn into extremist acts, and it is still a risk that the Trust needs to be aware of and have processes within which to manage any concerns. Where a staff member has a concern about a colleague, this should be raised with their line manager. The line manager will discuss the issue with HR and the Trust's Prevent Lead in the first instance and following this, the person deemed most appropriate will discuss the concerns with the individual staff member.

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 extremism, the Trust will look to use Prevent and safeguarding processes in order to address the concerns and HR process to respond to the employment issues.

## 6. Monitoring Compliance and Effectiveness

<b>Monitoring Requirement :</b>	<b>Monthly Reporting to Regional Coordinator re Training figures Referrals to Channel Panel  Reporting to Trust Safeguarding Committee bi-monthly</b>
<b>Monitoring Method:</b>	<b>Collection of statistics / data</b>
<b>Reports Prepared by:</b>	<b>Trust Safeguarding Lead / Trust Training Officer</b>
<b>Report presented to:</b>	<b>Regional Prevent Coordinator / Trust Safeguarding Committee</b>
<b>Frequency of Report</b>	<b>Quarterly</b>

### References

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/417943/Prevent\\_Duty\\_Guidance\\_England\\_Wales.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/417943/Prevent_Duty_Guidance_England_Wales.pdf)

## Appendix 1

### Safeguarding Adults and Children Training: Target Audience and Training Delivery

Level of training	Level 1 Basic Prevent Awareness  eLFH elearning package	Level 1 (Including Domestic Abuse Awareness and MCA Awareness)	Level 3 Safeguarding adults and children  (This course delivers competencies at level 3,2 & 1 of the Intercollegiate Competencies for Safeguarding children AND the Intercollegiate Competencies for Safeguarding Adults.)	Level 3 Domestic Abuse Training	Prevent (WRAP3)  Approved eLFH elearning package	Level 4
Delivery model	e-learning	E-learning (provided on mandatory induction programme and passport)	e-Learning package / Face to Face option also provided	e-learning	e-learning	Specialist safeguarding courses  External providers
Refresher / update requirement and delivery model	3 yearly	3 yearly	Yearly  e-Learning package / Face to Face option also provided	3 yearly	Yearly	3 yearly
<b>Target audience</b>						
Safeguarding Team Named Professionals				●	●	●
All clinical patient facing staff			●	●	●	
Non clinical and / or non-patient facing staff	●	●		●		
Chaplaincy, volunteers, security, facilities and All other non-clinical staff	●	●		●		
Trust Board			Board up-date 6 monthly			

Prevent Flow Chart

