PREVENT PROTOCOL

The Prevent Strategy 2011 was updated in April 2015 under Section 26 of the Counter-terrorism Security Act 2015, making it a statutory responsibility for the healthcare sector in England, Wales and Scotland. The duty stated that the health centre had to demonstrate "due regard to the need to prevent people from being drawn into terrorism"

CONTEST, the Government's national counter terrorism strategy, 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.

The strategy has four main work streams:

- Pursue: to stop terrorist attacks
- Protect: to strengthen our protection against terrorist attack
- Prepare: where an attack cannot be stopped, to mitigate its impact
- Prevent: to stop people becoming terrorists or supporting terrorism

The Department of Health (DH) has worked with the Home Office to develop guidance for healthcare organisations to implement Prevent Locally; this is called "***Building Partnerships Staying Safe***". With more than 1 million consultations a day by the NHS it is an area that the DH needs to highlight to all NHS workers.

The Prevent Strategy addresses all forms of terrorism, including extreme right wing views, but continues to prioritise according to the threat posed to our national security.

The aim of Prevent is to stop people from becoming terrorists or supporting terrorism and operates in the pre-criminal space before any criminal activity has taken place. At present, the majority of effort is focused on stopping people from joining or supporting such groups as Al-Qaida and its related groups, and other extremist organisations actively recruit.

The three key objectives of the Prevent Strategy are to:

1. Challenge the ideology that supports terrorism and those who promote it.
2. Prevent vulnerable people from being drawn into terrorism and ensure that they are given appropriate advice and support.
3. Work with sectors and institutions where there are risks of radicalisation

(Health Organisations are expected to be involved in delivering objectives 2 and 3, only).

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.

In general, the requirements set out in the contract are in line with those in the Prevent Duty - 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.
- To participate in the development of local multi-agency safeguarding quality indicators and/or planning (if requested to take part).
- Include in the Prevent Policy and Procedures a programme to raise awareness of Prevent as per the NHS England Prevent Training and Competencies.
- Include a WRAP delivery plan (***Workshop to Raise Awareness of Prevent***) in the Prevent Policy and Procedures (see *NHS England Prevent Training and Competencies Framework link)*

Why must Health organisations engage in the Prevent Strategy?

The Department of Health is a key strategic partner in the Prevent Strategy as Healthcare professionals may meet and treat people who are vulnerable to radicalisation. People with mental health issues or learning disability may be more easily drawn into terrorism.

NHS England and Safeguarding

NHS England has incorporated Prevent into its own arrangements for patient safeguarding awareness. This means that Prevent awareness and other relevant training is available to all staff providing services to NHS patients.

The **Chief Nursing Officer** in NHS England is responsible for safeguarding - a safeguarding lead for the Director of Nursing will be responsible for the overview and management of embedding the Prevent programme into safeguarding procedures across the NHS.

Each of the NHS regional teams will have a **Head of Patient Experience** who will lead on safeguarding. They have responsibility for delivery of the Prevent strategy within their region and for their **Regional Prevent Co-ordinators (RPCs)**, who will be able to offer advice and guidance for Prevent leads in healthcare organisations.

Within each NHS area, the RPCs are responsible for promoting Prevent to providers and commissioners of NHS services, and supporting organisations to embed Prevent into their policies and procedures, as well as delivering training.

'People Prevent' is an ongoing initiative and designed to become part of the everyday safeguarding routine for NHS staff.

It does not need new structures to be created but does require that members of staff are informed and have awareness of the Prevent Agenda and how to refer concerns.

There is a prevent lead for NICS Dr Nicki Mantel- Cooper, and any issues must be addressed to her, who will then discuss it with the Directors. Contact her on Nics.admin@nhs.net

Supportive documents

This protocol should be used alongside existing Policies and Procedures that already govern the NHS and General Practice.

Resources

Safeguarding for adults
Safeguarding Policy (For Children and Young Persons)
Whistleblowing Policy [*]
Serious Untoward Incidents (Handling Of) Protocol
Data Protection Act 1998
Human Rights Act 1998
Terrorism Act 2006
Equality Act 2010
No Secrets 2000 Guidance

Further Information

NHS England Prevent Training and Competencies Framework: http://www.england.nhs.uk/wp-content/uploads/2015/02/train-competnc-frmwrk.pdf
Building Partnerships Staying Safe
https://www.gov.uk/government/publications/building-partnerships-staying-safeguidance-for-healthcare-organisations
NHS England Prevent information; www.england.nhs.uk/ourwork/safeguarding/our-work/prevent
Prevent Duty; https://www.gov.uk/government/publications/prevent-duty-guidance

NHS England Regional Prevent Co-ordinators England.londonprevent@nhs.net

(Definition of terms used in the Prevent protocol on the next page)

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.

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 exiting 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 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".

The local CCG should have policies in place and should advise practices of their obligations; however it is up to practices to decide when an issue needs to be reported on in the same way as Safeguarding Adults, Children and even Domestic violence.

Patient confidentiality is always key and so disclosing fears and suspicions have to be taken in a responsible manner, weighing up the evidence and the person of concern.