NHS
Mersey Care
NHS Foundation Trust

TRUST-WIDE NON-CLINICAL and TRUST-WIDE CLINICAL POLICY DOCUMENT

PREVENT

Policy Number:	**SD43**
Scope of this Document:	**Trust wide, all staff**
Recommending Committee:	**Safeguarding Strategy Group**
Approving Committee:	**Executive Committee**
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Lead Executive Director:	**Executive Director of Nursing**
Lead Author(s):	**Safeguarding Adult Lead/Prevent Lead**

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2017 – Version 4

Quality, recovery and wellbeing at the heart of everything we do

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PREVENT

Further information about this document:

Document name	**SD43 - PREVENT POLICY**
Document summary	**To provide a framework for the implementation of the Prevent Strategy, to ensure the required actions are taken by trust staff in the event of any concerns of concerns of the potential risk to staff, service users/carers/families being drawn into extremist activities.**
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Published by Copies of this document are available from the Author(s) and via the trust's website	**Mersey Care NHS Foundation Trust** **V7 Building** **Kings Business Park** **Prescot** **Merseyside** **L34 1PJ** **Your Space Extranet: http://nww.portal.merseycare.nhs.uk** **Trust's Website www.merseycare.nhs.uk**
To be read in conjunction with	**To be red in conjuction with Merseycare NHS Foundation Trust policy for Safeguarding Adults from Abuse (SD17) and Safeguarding and Protection of Children and Young People (SD13)**
This document can be made available in a range of alternative formats including various languages, large print and braille etc	
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Version Control:

		Version History:
Consultation Draft	Policy Group	May 2015
Version 2	Executive Committee	May 2015
Version 3	Acquisition Steering Group	June 2016
Version 4		April 2017

SUPPORTING STATEMENTS

This document should be read in conjunction with the following statements:

SAFEGUARDING IS EVERYBODY'S BUSINESS

All Mersey Care NHS Foundation Trust employees have a statutory duty to safeguard and promote the welfare of children and vulnerable adults, including:

- being alert to the possibility of child/vulnerable adult abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child/vulnerable adult;

- knowing how to deal with a disclosure or allegation of child/adult abuse;

- undertaking training as appropriate for their role and keeping themselves updated;

- being aware of and following the local policies and procedures they need to follow if they have a child/vulnerable adult concern;

- ensuring appropriate advice and support is accessed either from managers, *Safeguarding Ambassadors* or the trust's safeguarding team;

- participating in multi-agency working to safeguard the child or vulnerable adult (if appropriate to your role);

- ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to Mersey Care NHS Foundation Trust policy and procedures and professional guidelines. Roles, responsibilities and accountabilities, will differ depending on the post you hold within the organisation;

- ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

EQUALITY AND HUMAN RIGHTS

Mersey Care NHS Foundation Trust recognises that some sections of society experience prejudice and discrimination. The Equality Act 2010 specifically recognises the *protected characteristics* of age, disability, gender, race, religion or belief, sexual orientation and transgender. The Equality Act also requires regard to socio-economic factors including pregnancy /maternity and marriage/civil partnership.

The trust is committed to equality of opportunity and anti-discriminatory practice both in the provision of services and in our role as a major employer. The trust believes that all people have the right to be treated with dignity and respect and is committed to the elimination of unfair and unlawful discriminatory practices.

Mersey Care NHS Foundation Trust also is aware of its legal duties under the Human Rights Act 1998. Section 6 of the Human Rights Act requires all public authorities to uphold and promote Human Rights in everything they do. It is unlawful for a public authority to perform any act which contravenes the Human Rights Act.

Mersey Care NHS Foundation Trust is committed to carrying out its functions and service delivery in line the with a Human Rights based approach and the FREDA principles of **F**airness, **R**espect, **E**quality **D**ignity, and **A**utonomy

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1. PURPOSE AND RATIONALE

The purpose of this policy is to provide a framework for implementation of the Government PREVENT Strategy, and the required action to be by Mersey Care staff in the event of any concerns about the potential risk to staff & vulnerable service users/carers/families being drawn into extremist activities.

This guidance will ensure that all Mersey Care NHS Foundation Trust staff, are aware of how to safeguard & support vulnerable individuals, whether staff or service users, who they feel may be at risk of being radicalised by extremists.

Ensure appropriate systems are in place within the Trust for staff to raise concerns if they think this form of exploitation is taking place

Promote and operate safe environments where extremists are unable to operate

Employees need to know the appropriate actions to take in order to protect individuals whether staff or service users from being radicalised by extremist groups/individuals. This policy has been developed to describe the responsibilities of employees for the recognition and prevention of possible radicalisation of individuals and clarify the actions to take when this is suspected or identified.

2. OUTCOME FOCUSED AIMS AND OBJECTIVES – WHAT IS PREVENT?

2.1   The Prevent strategy, published by the government in 2011, is part of the overall counter-terrorism strategy, CONTEST. The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism.

2.2   Section 21 of the Counter-Terrorism and Security Act 2015 (the Act) places a duty on certain bodies, listed in Schedule 3 to the Act, to have "due regard to the need to prevent people from being drawn into terrorism". This guidance is issued under s24 of the Act. The Act states that the authorities subject to the provisions must have regard to this guidance when carrying out the duty.

2.3   The Office for Security and Counter Terrorism (OSCT) in the Home Office is responsible for providing strategic direction and governance on CONTEST.

2.4   PREVENT is one of the 4 key principles of the CONTEST strategy, which aims to stop people becoming terrorists or supporting terrorism.

2.5   CONTEST, which is primarily organised around four key principles/ programmes, each with a specific objective:
- PURSUE: to stop terrorist attacks
- **PREVENT: to stop people becoming terrorists or supporting terrorism**
- PROTECT: to strengthen our protection against a terrorist attack
- PREPARE: to mitigate the impact of a terrorist attack.

2.6   The Health Service is a key partner in PREVENT principle of this strategy in line with all parts of the NHS, charitable organisations and private sector bodies which deliver health services to NHS patients. It refers to anyone (staff, patients or visitors).

2.7   PREVENT has 3 specific strategic objectives:

1: respond to the ideological challenge of terrorism and the threat we face from those who promote it

2: prevent 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 which we need to address

2.8   This policy takes into account the change in the revised Government Prevent Guidance (2015) and the Counter-Terrorism and Security Act 2015.

3. SCOPE

3.1   Every member of staff has an individual responsibility for the protection and safeguarding of adults/children. All levels of management must understand and implement the Trust Prevent Policy. These procedures are for all staff working within Mersey Care NHS Foundation Trust. Staff seconded to Mersey Care NHS Foundation Trust, are expected to follow these procedures. Any volunteers, students / trainees employed by Mersey Care NHS Foundation Trust must identify their status when talking about clients to professionals in other agencies.

4. DEFINITIONS (Glossary of Terms)

4.1   The overall principle of health is to improve the health and wellbeing through the delivery of healthcare services while safeguarding those individuals who are vulnerable to any form of exploitation. Prevent is also about protecting individuals. Prevent aims to protect those who are vulnerable to exploitation from those who seek to get people to support or commit acts of violence. Healthcare staff are well placed to recognise individuals, whether patients or staff, who may be vulnerable and therefore more susceptible to radicalisation by extremists or terrorists. It is fundamental to our 'duty of care' and falls within our safeguarding responsibilities. Every member of staff has a role to play in protecting and supporting vulnerable individuals who pass through our care. Healthcare staff will be required to attend the relevant bespoke Home Office HealthWRAP training, which is facilitated by accredited facilitators within the Trust.

4.2   All terrorist groups whose pose a threat, seek to radicalise people to their cause. But the percentage of people who are prepared to support violent extremism in this country is very small. It has been identified that this is significantly greater amongst young people (PREVENT Strategy 2011).

DEFINITION OF CHILDREN & YOUNG PEOPLE

4.3   "every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier" (Article1, Convention on the rights of the Child, 1989).

4.4   "a child is defined as anyone who has not yet reached their 18th birthday" (Working Together to Safeguard Children, 2015).

DEFINITION OF ADULT SAFEGUARDING

4.5 The Care Act 2014 redefined safeguarding duties as applying to an adult who:
- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect.

Therefore this may be applied to service users/staff/carers/families

4.6 There are many terms and expressions used in this Prevent Policy. The glossary listed below sets out what is meant by some of the more contentious or heavily used terms. These definitions relate to PREVENT and are not always authoritative in any wider context. We draw particular attention to the way in which this document uses the terms extremism, radicalisation and terrorism.

4.7 **Extremism** is 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. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

4.8 **Pre-Criminal Activity/Space** this refers to supporting and protecting those who might be susceptible to radicalisation, to be drawn away from becoming involved in 'criminal activities'; by offering advice/guidance and support. Multi-agency working to ensure that individuals are diverted away before any crime is committed.

4.9 **Radicalisation** refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

4.10 **Terrorism** the current UK definition of terrorism is given in the Terrorism Act 2000 (TACT 2000). In summary this defines terrorism as an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

4.11 There is no single profile of a terrorist; there is no checklist of traits to look out for. This is not about race, religion or ethnicity; it is about the exploitation of vulnerable people.

5. DUTIES

5.1 **TRUST BOARD**
5.2 The Board has ultimate responsibility for ensuring that there are guidance and procedures in place and complied with to protect adults under the Government 'Prevent Strategy' (2011). The Board will assure its self of compliance with this policy through the accountability arrangements delegated to the Quality Assurance Committee and via consideration of an annual report prepared by the Deputy Director of Nursing and Quality
5.3 The Board has ultimate responsibility for ensuring that an effective system for managing any risks associated with safeguarding adult/children exists within the Trust and that all staff working in the Trust are aware of, and operate within the policy. The Board will assure its self of compliance with this policy through the accountability arrangements delegated to the Quality

Assurance Committee and via consideration of an annual report prepared by the Safeguarding Adult Lead/Prevent Lead.

5.4   DIRECTOR OF NURSING

5.5   The Director of Nursing is the Trust Board member with individual responsibility for ensuring that a policy and procedure for effective safeguarding of adults (staff and service users) and children exists; that it is implemented effectively; that all staff are aware of and operate within the requirements of the policy and that systems are in place for the effective monitoring of the standards contained within the policy.   The Prevent strategy sits within the framework of safeguarding adults and children and therefore the Trust has a responsibility to meet its statutory and non-statutory obligations in respect of maintaining required standards in relation to Prevent, privacy and confidentiality of staff, service users and carers.

5.6   QUALITY ASSURANCE COMMITTEE

5.7   The Quality Assurance Committee is an established part of the governance structures of the Trust which has the responsibility to ensure that safeguarding of adults and children arrangements are managed appropriately across the organisation. The Committee ensures that it receives assurances in relation to compliance with the requirements of this policy through receipt of reports, audit activity and from the review mechanisms established by the Director of Nursing.

5.8   LOCAL ADULT AND CHILDREN SAFEGUARDING BOARDS

5.9   The Local Authorities covered by Mersey Care's NHS Foundation Trust services have established Local Prevent Coordinator's. The Liverpool Prevent Coordinator is a member of the Merseyside NHS Prevent Leads Forum and continues to provide guidance, assistance and support in the delivery of the Trust HealthWRAP training programme.

5.10   DEPUTY DIRECTOR OF NURSING AND QUALITY

5.11   The Deputy Director of Nursing and Quality reports directly to the Director of Nursing and has overall responsibility for the strategic delivery of the policy arrangements within the Trust. This post holder is the Trust's link to the respective Adult and Children Safeguarding Boards and ensures that the strategic direction provided by the Boards is translated into practice in the form of effective multi-agency working and strong local procedural arrangements.

5.12   SAFEGUARDING ADULT/PREVENT LEAD

5.13   The Safeguarding Adult Lead is the nominated Prevent Lead for Mersey Care NHS Foundation Trust and is responsible for:

- The development of Prevent guidance and structures in line with Trust Adult Safeguarding structures
- Liaising with the Deputy Director of Nursing and Quality to manage the Prevent Strategy and that this is communicated across the Trust
- The implementation and operation of the Prevent Strategy
- Submitting quarterly Prevent monitoring reports
- Contributing to locality Adult Safeguarding Partnership at regional and local level relating to Prevent
- Contribute to Local Authority Channel Panels on request
- Lead the coordination of training and awareness events to ensure all relevant staff identified in the training needs analysis can access Levels 1-4 of Prevent awareness training and HealthWRAP sessions (see appendix 1)
- Liaise with the HealthWRAP facilitators to plan and implement a HealthWRAP training and awareness programme within the Trust

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- Coordinate the collation of HealthWRAP training data and providing reports to the Regional Prevent Co-ordinator as required
- Report annually on Prevent activity within the Trust to the Trust Board via Annual Safeguarding Report

5.14 NAMED NURSE FOR SAFEGUARDING CHIDREN

5.15 The Named Nurse for Safeguarding Children is responsible for liaising and notifying with the Trust Prevent Lead for any incidences reported. Support staff in any concerns involving children and reporting these through appropriate child safeguarding processes.

5.16 HEALTHWRAP FACILITATORS

5.17 Prevent HealthWRAP facilitators will lead and support in the delivery of training for all Trust staff and act as Trust resources to provide information, advice and support for staff where required and maintain their own competence and knowledge base in order to deliver an effective training programme. Attend update or refresher meetings / training as required under the NHS England Prevent Training and Competence Framework (2014), (see Appendix 1) Ensure dates are planned in advance and liaise with the Prevent Lead to record staff attendances or of any non attendances or concerns expressed by staff.

5.18 ALL STAFF

5.19 The duties contained within this policy apply to contracted, substantive, temporary, seconded and volunteer staff. All members of staff have a duty and a personal responsibility to share concerns of a safeguarding nature in relation to children and adults. All members of staff have responsibility for raising any concerns relating to Prevent standards and reporting these through the Prevent governance reporting flow chart (see Appendix 2). Implementation of the requirements of Prevent guidance and associated procedures via Trust's Adult & Children Safeguarding Policy and Procedures.

5.20 All staff have a duty to access all relevant Prevent awareness training (Level 1-4), commensurate to their role and responsibility. Ensuring line managers are aware of any non attendances or difficulties. Alerting Safeguarding Adult Lead/Prevent Lead of any incident reported and submission of Datix/Ulysses incident form for all cases identified. Seek advice and additional support through Safeguarding Adult Lead/Prevent Lead or HR (or on call manager during out of hours) for any part of this process or as required.

5.21 Notify Human Resources of any staff related incident after discussion with the Prevent Lead and follow advice given by them. Ensure full confidentiality and sensitivity is maintained during the reporting, Investigation and management of any Prevent related incidents will be the decision of the HR dept in line with the Trust Prevent, Safeguarding, Dignity and Respect at Work Policy, Data Protection and Information Governance Policy. Liaison between the Trust HR department, Prevent Lead and Local Authority Channel Lead will then inform a formal decision of what actions will be taken.

5.22 Seek advice and support from their line manager (in the first instance) of any on-going support /training required following any incident reported. Document actions taken using the appropriate safeguarding process and Prevent flow chart. Contribute to discussions following any live event or complex incident to support positive review and reflect cases in order for any lessons to be learnt and/or improvements to be made.

6. PROCESS

6.1 Concerns that an individual may be vulnerable to radicalisation does not mean that you think the person is a terrorist, it means that you are concerned they are prone to being exploited by others, and so the concern is a safeguarding concern.

6.2   **Vulnerability Factors**

Use of extremist rationale (often referred to as 'narrative')

Radicalisers usually attract people to their cause through a persuasive rationale contained within a storyline or narrative that has the potential to influence views. Inspiring new recruits, embedding the beliefs of those with established extreme views and/or persuading others of the legitimacy of their cause is the primary objective of those who seek to radicalise vulnerable individuals

6.3   **What Factors Might Make Someone Vulnerable**

In terms of personal vulnerability, the following factors may make individuals susceptible to exploitation. None of these are conclusive in themselves and therefore should not be considered in isolation but in conjunction with the particular circumstances and any other signs of radicalisation:

• **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

• **Grievances** - The following are examples of grievances which may play an important part in the early indoctrination of vulnerable individuals into the acceptance of a radical view and extremist ideology:
•   a misconception and/or rejection of UK foreign policy
•   a distrust of Western media reporting
•   perceptions that UK government policy is discriminatory (e.g. counter-terrorist legislation)

• **Other Factors** - 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

6.4   If a member of staff feels that they have a concern that someone is being radicalised, then they should discuss their concerns with their immediate line manager and contact the Trust Safeguarding Adult Lead/Prevent Lead/Safeguarding Team. The flow chart (appendix 2) must be followed to ensure effective governance processes are being used. All discussions and outcomes to be sensitively documented on individual patient electronic records and correct Prevent codes entered

6.5   A Datix/Ulysses Incident form must also be completed and submitted using the approved processes.

6.6   Should anyone have concerns that an individual is presenting as an immediate terrorist risk to themselves, others or property then immediate action is required.
They should contact direct:
- Ring 999 Emergency Police
- Police contact or National Counter-Terrorism Hotline on 0800 789 321
- Follow Line management communication cascade

6.7   Then notify:
Safeguarding Adult/Lead Prevent Lead and On call Manager immediately

7. CONSULTATION

7.1   Consultation in compiling this policy has been undertaken with the North West Regional Prevent Co-Ordinator, Merseyside Police Channel Lead, Liverpool Local Authority Prevent Co-Ordinator and the Trust Safeguarding Strategy Group (SSG). The policy is a document to enable Trust staff to have a full awareness of their responsibilities and which signposts them to the relevant Trust procedures

8. TRAINING AND SUPPORT

8.1   The Prevent Training and Competencies Framework has been developed to provide clarity on the level of training required for healthcare workers; it identifies staff groups that require basic Prevent awareness and those who have to attend Workshops to Raise Awareness of Prevent (WRAP). This will support NHS provider organisations and organisations providing services on behalf of the NHS to meet contractual obligations in relation to safeguarding as set out in the NHS Standard Contract. (See Appendix 2).

8.2   Training has been implemented Trust wide since November 2013, and is a statutory mandatory requirement and is aligned with the UK Core Skills Training Framework 2014;
Safeguarding Adults and Children (Subject 8 and 9).

8.3   Prevent awareness Levels 1-3 are to be accessed on a 3 yearly basis, in line with the above competency framework.

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9. MONITORING

9.1 The Deputy Director of Nursing and Quality is responsible for monitoring the effectiveness of this policy and will provide an annual report detailing compliance to the Trust Board. The Safeguarding Adult Lead /Prevent Lead, will undertake reviews of practice and records based file audits to gauge compliance with the provisions of the policy. In addition, reporting arrangements and data capture enable analysis of activity in terms of Prevent concerns/referrals; advice provided and acted on; the number of strategy meetings/Channel Panels attended. The Trust's Safeguarding Strategy Group will receive quarterly reports demonstrating activity and compliance with the policy arrangements.

9.2 This policy will be formally reviewed every 3 years, or earlier depending on results of monitoring, auditing, new national/local guidance or recommended changes in practice. Monitoring of staff training will be undertaken via central Trust recording processes.

10. EQUALITY AND HUMAN RIGHTS ANALYSIS

Title: Prevent SD43
Area covered: Trust Wide

What are the intended outcomes of this work? To provide a framework for the implementation of the Prevent Strategy, to ensure the required actions are taken by Trust staff in the event of any concerns of the potential risk to staff, service users/carers/families being drawn into extremist activities
Who will be affected? Service Users/Carers/Staff/Volunteers/representatives of agencies undertaking work on behalf or within buildings of Mersey Care NHS Foundation Trust.

Evidence
What evidence have you considered? The policy
Disability (including learning disability) This policy applies to all vulnerable adults including: where an adult's needs arise from or are related to a physical or mental impairment or illness.
Sex Promotes and supports equality in relation to sex
Race The NHS Race Equality Standard requirements are identified in relation to the workforce
Age Promotes and supports equality in relation to age
Gender reassignment (including transgender)
Sexual orientation Promotes an supports equality in relation to Sexual Orientation (Also within Marriage and Civil Partnership)
Religion or belief Promotes and supports equality in relation to religion and belief
Pregnancy and maternity Promotes and supports equality in relation to pregnancy and maternity rights for parents
Carers Incapacity to give consent to share information. Where appropriate , if an individual is not considered to have the capacity to give consent , those providing a service should take account the views of the person's carer or nominated representative /advocate prior to making a decision as to whether information can be shared in

accordance with the best interests of the individual.

There is no legal duty to share information with carers, but carers should wherever possible be listened to and supported.

Staff should always seek the service users consent to share information with his/her carer, if they are able to give it.

Other identified groups

Asylum seekers, traveller families

Cross Cutting

This policy applies to all

Human Rights	Is there an impact? How this right could be protected?
Right to life (Article 2)	*Use not engaged if Not applicable*
Right of freedom from inhuman and degrading treatment (Article 3)	*Use supportive of a HRBA if applicable*
Right to liberty (Article 5)	Human Rights based approach supported
Right to a fair trial (Article 6)	Human Rights based approach supported
Right to private and family life (Article 8)	Human Rights based approach supported
Right of freedom of religion or belief (Article 9)	Human Rights based approach supported
Right to freedom of expression Note: this does not include insulting language such as racism (Article 10)	Human Rights based approach supported
Right freedom from discrimination (Article 14)	Human Rights based approach supported

Engagement and Involvement
Trust reference/Safeguarding strategy group
External stakeholders including local adult safeguarding boards/Prevent Co-ordinator
Input from the Trust's local and secure divisions

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No 'People Participation' input

Summary of Analysis *This highlights specific areas which indicate whether the whole of the document supports the trust to meet general duties of the Equality Act 2010*

Eliminate discrimination, harassment and victimisation
The policy sets out clear requirements in relation to HR practice.
Links into other HR policies.

Advance equality of opportunity
N/A

Promote good relations between groups
N/A

What is the overall impact?
This policy intended to have a positive impact on the service users/carers and staff

Addressing the impact on equalities
As part of reporting there should be monitoring in relation to equality issues.

Action planning for improvement

See below in action plan

For the record
Name of persons who carried out this assessment:
Leigh Tindsley - Safeguarding Adult Lead/Prevent Lead
Denis Cullen - Head of Social Care/Strategic Lead and Operational Lead for Safeguarding.
Lindsey Devine - Specialist Safeguarding & Prevent Practitioner
Date assessment completed: 13th April 2017

Name of responsible Director: Executive Director of Nursing

Date assessment was signed: 13th April 2017

Action plan template

This part of the template is to help you develop your action plan. You might want to change the categories in the first column to reflect the actions needed for your policy.

Category	Actions	Target date	Person responsible and their area of responsibility
Monitoring	Monitor for equality issues in relation to the Protected characteristics.	Bi - annually	Safeguarding Team Corporate Division
Involvement and consultation	When the policy is due for review consultation to be made with the People Participation group.	2020	Safeguarding Team Corporate Division

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11. REFERENCE DOCUMENTS/BIBLIOGRAPHY

Care Standards Act (2000)

Channel Guidance, HM Government (2015

Counter-Terrorism and Security Act (2015)

Building Partnerships, Staying Safe, The health sector contribution to HM Government's Prevent strategy: guidance for healthcare workers Department of Health, (2011)

Equalities Act (2010)

Prevent Duty Guidance HM Government, (2015)

Prevent Strategy HM Government, (2011)

Prevent Strategy: Equality Impact Assessment HM Government, (2011)

Prevent Training and Competences Framework, NHS England (2015)

Safeguarding Adults National Framework ADSS, (10/2000)

Safeguarding Adults from Abuse Mersey Care NHS Foundation Trust Policy & Procedure (2017)

Safeguarding and Protection of Children and Young People Mersey Care NHS Foundation Trust Policy & Procedure (2016) SD13

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12. APPENDICES

Appendix 1

Basic Prevent Awareness Training – Level 1 & 2

Staff Groups
Staff requiring Level 1 safeguarding training - All staff working in the health sector Staff requiring Level 2 safeguarding training - All non-clinical and clinical staff who have any contact with adults, children and young people and/or parents/carers including: administrators for looked after children and safeguarding teams, health care students, clinical laboratory staff, phlebotomists, pharmacists, dentists and dental care practitioners, audiologists, optometrists, contact lens and dispensing opticians, adult physicians, surgeons, anaesthetists, radiologists, allied health care professionals and all other adult orientated secondary care health care professionals including technicians and GP receptionists.

Competencies
Knowledge • The objectives of the Prevent strategy and the health sector contribution to the Prevent agenda; • What their professional responsibilities are in relation to the safeguarding of vulnerable adults, children and young people; • Understand vulnerability factors that can make individuals susceptible to radicalisation or a risk to others; and • Who to contact and seek advice from if they have concerns a vulnerable individual is being groomed in to terrorist activity. Skills • Able to recognise potential indicators that an individual might be vulnerable to radicalisation or at risk of involvement in acts of terrorism; • Understand the impact of influence on vulnerable individuals (direct or internet); • Know what action to take if they have concerns, including to whom you should refer your concerns and from whom to seek advice; and • Have an understanding of the importance of sharing information (including the consequences of failing to do so).

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Knowledge • The objectives of the Prevent strategy and the health sector contribution to the Prevent agenda; • What their professional responsibilities are in relation to the safeguarding of vulnerable adults, children and young people; • Understand vulnerability factors that can make individuals susceptible to radicalisation or a risk to others; and • Who to contact and seek advice from if they have concerns a vulnerable individual is being groomed in to terrorist activity. Skills • Able to recognise potential indicators that an individual might be vulnerable to radicalisation or at risk of involvement in acts of terrorism; • Understand the impact of influence on vulnerable individuals (direct or internet); • Know what action to take if they have concerns, including to whom you should refer your concerns and from whom to seek advice; and • Have an understanding of the importance of sharing information (including the consequences of failing to do so).

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Prevent Awareness Training – Level 3, 4 & 5

Staff groups
Level 3 staff groups

All clinical staff working with adults, children and young people and/or their parents/carers including: GPs, forensic physicians, urgent and unscheduled care staff, mental health staff (adult and CAMHS), child psychologists, learning disability staff, learning disability nurses, specialist nurses for safeguarding, looked after children's nurses, health professionals working with substance misuse services, ambulance staff, nurses working in community services (including Practice nurses), court and prison based health staff, youth offender team staff, offender and forensic community health clinicians and practitioners, School college and university nurses and practitioners, paediatric allied health professionals, sexual health staff, safeguarding children's nurses, health visitors, all children's nurses, midwives, obstetricians, all paediatricians, paediatric radiologists, paediatric surgeons, lead paediatric anaesthetists for safeguarding, paediatric intensivists and paediatric dentist, People providing services to migrants or asylum seekers, Practitioners working in adult acute services, Practitioners working in children's acute services, Practitioners working in adult community services with adults of a working age, Practitioners working in children's community services with young people, People providing patient transport services, Health staff in secure children's settings, chaplaincy staff.

Level 4 staff groups

Named professionals (named doctors, named nurses named health visitors, named midwives (in organisations delivering maternity services), named health professionals in ambulance organisations and named GPs for Organisations commissioning Primary Care)

Level 5 staff groups

Designated Professionals (designated doctors and nurses, lead paediatricians, consultant/lead nurses, Child Protection Nurse Advisers (Scotland). |

Competencies
As outlined for Levels 1 and 2, and in addition:
• How to support and redirect vulnerable individuals at risk of being groomed into a terrorist related activities; and
• How to share concerns, get advice, and make referrals into the Channel process and Prevent Case Management.

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Staff groups

Level 3 staff groups

All clinical staff working with adults, children and young people and/or their parents/carers including: GPs, forensic physicians, urgent and unscheduled care staff, mental health staff (adult and CAMHS), child psychologists, learning disability staff, learning disability nurses, specialist nurses for safeguarding, looked after children's nurses, health professionals working with substance misuse services, ambulance staff, nurses working in community services (including Practice nurses), court and prison based health staff, youth offender team staff, offender and forensic community health clinicians and practitioners, School college and university nurses and practitioners, paediatric allied health professionals, sexual health staff, safeguarding children's nurses, health visitors, all children's nurses, midwives, obstetricians, all paediatricians, paediatric radiologists, paediatric surgeons, lead paediatric anaesthetists for safeguarding, paediatric intensivists and paediatric dentist, People providing services to migrants or asylum seekers, Practitioners working in adult acute services, Practitioners working in children's acute services, Practitioners working in adult community services with adults of a working age, Practitioners working in children's community services with young people, People providing patient transport services, Health staff in secure children's settings, chaplaincy staff.

Level 4 staff groups

Named professionals (named doctors, named nurses named health visitors, named midwives (in organisations delivering maternity services), named health professionals in ambulance organisations and named GPs for Organisations commissioning Primary Care)

Level 5 staff groups

Designated Professionals (designated doctors and nurses, lead paediatricians, consultant/lead nurses, Child Protection Nurse Advisers (Scotland).

Competencies

As outlined for Levels 1 and 2, and in addition:
• How to support and redirect vulnerable individuals at risk of being groomed into a terrorist related activities; and
• How to share concerns, get advice, and make referrals into the Channel process and Prevent Case Management.

Competency Level for Organisational Prevent Leads

Staff Groups Organisational Prevent Leads in both commissioner and provider organisations
Competencies
In addition to the competencies of Basic Prevent awareness Training and Workshop to Raise Awareness of Prevent, a Prevent Lead will be able to demonstrate that they: • Are aware of the HM Government's Prevent strategy: Building Partnerships, Staying Safe national guidance for healthcare organisations and workers and the related organisational self- assessment toolkit; • Are able to advise staff in relation to any Prevent concerns; • Understand how to make a Prevent referral to Channel or alternative local multi-agency group and how to escalate unresolved concerns; • Understand the role of Channel panels and how to advise managers and practitioners on their participation in local panels; • Understand the Prevent Standards contained in the NHS Standard Contract and the need for compliance; • Are able to advise staff in relation to those thresholds and links to other adult and children's safeguarding and public protection processes.
Competencies
• Know who the Channel Coordinator is for their area and how to contact them; • Are aware of the HM Government's Prevent strategy: guidance for healthcare workers and the related organisational self- assessment; • Understand the role of Channel panels and how to advise managers and practitioners on their participation in local panels; • Understand the Prevent Standards contained in the NHS Standard Contract and the need for compliance; • Are able to advise staff in relation to those thresholds and links to other adult and children's safeguarding and public
Criteria for assessment
• Attendance at a minimum of two NHS England Regional Prevent Forums every financial year. • Evidence of a face to face meeting with the areas Channel Coordinator and Counter-Terrorism Unit officer(s). • Completion of Prevent related training advised by NHS England. On-going: Competence knowledge and skills should be reviewed annually as part of an individual's appraisal to ensure individuals are up to date with current policy and practice to undertake the role of organisational Prevent Lead.
Competency development options and compliance targets
Competencies of a Prevent Lead may be developed on a single organisation basis or on a partnership basis between health organisations, or on a multi-agency basis, it should include: • Participation in local or regional multi-agency Prevent Forums/Boards when required. • Attendance at local, regional, national multi-agency training events and/or Prevent conferences when required. The compliance target for organisational Prevent Leads in organisations at Level 3 is 100%.

Appendix 2

The following flow chart describes the reporting arrangements for staff reporting suspected or actual abuse

Safeguarding Adults and Children from being exploited and recruited into extremism

**Prevent – Governance Reporting
FLOW CHART**

Pre – Criminal Activity noted by staff relating to:	**Contact Adult Safeguarding Lead /Prevent Lead**	Inform Trust HR dept and follow advice if regarding concerns for a member of staff
• Any patients (in the Trust) • Staff member • Carer	0151 471 2380 / 0151 250 5203 (9–5 Mon– Fri) Decision on plan of action **Out of Hours:-** On Call Manager	

Notify Police Channel Lead
• Notify Security if poses
• immediate risk ext:
• If urgent threat dial 999

• **Alert Adult or Child Local Authority Safeguarding Team**

Notify line manager immediately of concerns
)
Evoke Trust Safeguarding Adults or Children Policy

Complete Trust DATIX/Ulysses Incident Form

Follow advice given by Local Authority Safeguarding Team and Police

Always

• Record details on patient electronic records
• Follow actions from any strategy meeting

• Follow direction from Police who will lead investigation and assist in:

- Completion of a vulnerability assessment
- Risk assessment

• Attend panel meeting to agree care package (if requested)

• Continue to update Trust Leads and Line manager

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