

## Prevent Violent Extremism and Radicalisation Policy

<b>CATEGORY:</b>	Policy
<b>CLASSIFICATION:</b>	Governance
<b>PURPOSE</b>	To set out the principles and framework for the identification and management of the risk of radicalisation and terrorism
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## 1. Policy Statement

- 1.1 The purpose of this policy and its associated documents is to assist University Hospitals Birmingham NHS Foundation Trust (the Trust) staff in effectively meeting their duties to minimise risk under the Government Prevent Agenda.
- 1.2 Prevent is part of the government's counter-terrorism strategy, CONTEST. Its aim is to stop people becoming terrorists or supporting terrorism.
- 1.3 This policy will help ensure information sharing is appropriate for the purpose of preventing an individual from being drawn into terrorism. The objectives of this policy are to support the Prevent Strategy in:
  - 1.3.1 Responding to the ideological challenge of terrorism and threat we face from those who promote it;
  - 1.3.2 Preventing people from being drawn into terrorism safeguarding and protecting them from exploitation and radicalisation; and
  - 1.3.3 Working with sectors and institutions where there are risks of radicalisation.

## 2. Scope

- 2.1 This policy applies to all areas and activities of the Trust and to all individuals employed by the Trust including contractors, volunteers, students, locum, bank and agency staff and staff employed on honorary contracts.
- 2.2 This policy applies to all patients, adults and children receiving inpatient care or using outpatients or day services managed by the Trust (whether those services are supplied within the hospital sites, community, domiciliary or off site clinics).

## 3. Framework

- 3.1 This section describes the broad framework for the Prevent Policy. Detailed instructions are provided in the associated procedural documents.
- 3.2 The Chief Nurse shall approve all procedural documents associated with this policy, and any amendments to such documents, and is responsible for ensuring that such documents are compliant with this policy.
- 3.3 Definitions

Channel	Channel forms a key part of the national Prevent strategy. This is a multi- agency process to identify and provide support to Individuals who are at risk of being drawn into Terrorism.
Channel Panel	Channel Panels provide a mechanism for supporting individuals who may be vulnerable to terrorist related activity by assessing the nature and extent of the potential risk, agreeing and providing an appropriate support package tailored to an individual's needs. Channel is a multi-agency panel and the local Channel lead is located within the Police or Local Authority.
Extremism	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. This includes the definition of extremism calls for the death of members of our armed forces, either in this country or overseas.
People/Individual	For the purpose of this procedure the terms 'People' and 'Individual' apply to children as well as adults whether they are patients, visitors or staff.
Prevent Concern	A Prevent Concern does not have to be proven beyond reasonable doubt; however it must be based on something that raises concern which is assessed by using existing professional judgement of a member of staff.
Radicalisation	Radicalisation in this procedure refers to the process by which people come to support terrorism and forms of extremism leading to terrorism.
Terrorism/Terrorist	Terrorism is defined in the <i>Terrorism Act (2000)</i> as an action that; endangers or causes serious violence to a person or people, causing 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.
Vulnerability	Vulnerability in the context of Prevent is a person who is susceptible to extremist messages and is at risk of being drawn into terrorism or supporting terrorism at a point in time.

3.4 The Prevent Strategy focuses on the prevention of people entering into or supporting terrorism and is designed to support and protect people who may be susceptible to radicalisation, diverting them before a crime is committed. It also provides the escalation process for raising concerns and referrals to outside agencies to reduce the risk of any patient or staff member becoming drawn into terrorism.

3.5 Confidentiality, information sharing and disclosures

3.5.1 Trust staff must ensure they share information appropriately both professionally and legally when there is a safeguarding concern and in line with current data protection legislation General Data Protection Regulation 2016 (GDPR), Data Protection Act 2018 (DPA) and NHS Code of Practice, as well as relevant local information sharing protocols. Save for the exceptions outlined in 3.5.2 and 3.5.3 below, this would require the taking of consent from the person whose personal data will be shared.

3.5.2 In exceptional circumstances, where seeking consent prior to referral would cause immediate significant harm to the vulnerable individual and/or where the vulnerable individual lacks capacity to give consent, a referral may be made without consent in their best interests.

3.5.3 Where there is concern or evidence that an individual is actually engaged in the planning or undertaking of terrorist acts, or staff are concerned for their safety or welfare, then consent is not required to share any information that may be required to assess and manage the risk of a serious criminal offence occurring. In these cases the individual must not be informed that information is being shared without multi-agency agreement of what is required, to ensure the safety of others. If staff are not sure on information sharing or consent issues, they must seek advice from the Trust Safeguarding Team or Caldicott Guardian.

#### **4. Duties**

4.1 Chief Nurse

The Chief Nurse is the Lead Executive Director and is responsible for the development of the policy for Prevent and its implementation. The Executive Chief Nurse will delegate this operational responsibility to the Trust Prevent Lead.

4.2 Lead Nurse Adult Safeguarding and Trust Security Management Specialist (Trust Prevent Leads)

The Lead Nurse Adult Safeguarding and Trust Security Management Specialist, as Trust Prevent Leads, are responsible for:

- 4.2.1 Sending referrals to Channel;
- 4.2.2 Ensuring reporting on Prevent referrals and training to the Department of Health through the Regional Prevent Coordinator;
- 4.2.3 Reporting to the Channel coordinator if a vulnerable individual is known to the Trust;
- 4.2.4 Assisting the Channel coordinator in developing a care package for the vulnerable individual where appropriate;
- 4.2.5 Investigating incidents which fall under this Policy; and
- 4.2.6 Managing the local database.

#### 4.3 Trust Safeguarding Team

The Trust Safeguarding team will ensure that the following takes place:

- 4.3.1 Trust Safeguarding Team discuss any concerns with a Prevent Lead who will then determine whether the case will need to be escalated to the Multi-agency Channel process for further consideration;
- 4.3.2 Trust Safeguarding Team will be responsible for receiving referrals/concerns from staff, cascading to the relevant lead.

#### 4.4 Hospital Directors of Nursing (HDON's) and Director of Midwifery

Hospital Directors of Nursing and Director of Midwifery are responsible for ensuring the implementation of the policy within their area of responsibility.

#### 4.5 Hospital Directors of Nursing/Group Managers/ Department Leads

Directors of Operations/ Group Managers/ Department Leads are responsible for ensuring the implementation of the policy and that all staff within their area of responsibility are aware of this policy and the relevance to everyday clinical practice and for ensuring that staff have received Prevent training.

#### 4.6 Associate Directors of Nursing/Lead Nurses/professional nurse advisor community team

Matrons/Lead Nurses/professional nurse advisor community team are responsible for adhering to and implementing this policy within their clinical areas.

#### 4.7 Senior Sisters/Charge Nurses/Midwives/ Senior District Nurses/Team Leaders

Senior Sisters/Charge Nurses/Senior District Nurses/Team Leaders are responsible for ensuring that staff comply with this policy and for communicating its contents to their staff.

#### 4.8 All Staff

All staff must:

4.8.1 Complete the Prevent training as per Trust Training Needs Analysis;

4.8.2 Familiarise themselves with this policy and to adhere to its processes;

4.8.3 Discuss any suspicions or concerns with their line manager:

4.8.4 Raise any suspicions or concerns regarding patients or staff that may be at risk/vulnerable to radicalisation with the Safeguarding Team; and;

4.8.5 Ensure full confidentiality and sensitivity is maintained during the reporting, investigation and management of any Prevent related incidents.

## 5. Implementation and Monitoring

### 5.1 Implementation

This policy will be available on the Trust's Intranet site. The policy will also be disseminated through the management structure within the Trust.

### 5.2 Monitoring

Appendix A provides full details on how the policy will be monitored by the Trust.

## 6. References

Crime and Disorder Act 1998

Counter Terrorism and Security Act 2015

Data Protection Act 2018

Department of Health (2011) Building Partnerships Staying Safe, London  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/215251/dh\\_131934.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/215251/dh_131934.pdf) [accessed 28.8.18]

Department of Health (2000) No secrets: guidance on developing and implementing multiagency policies and procedures to protect vulnerable adults from abuse

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/194272/No secrets guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/194272/No_secrets_guidance_on_developing_and_implementing_multi-agency_policies_and_procedures_to_protect_vulnerable_adults_from_abuse.pdf) [accessed 28.8.18]

Equality Act 2010

HM Government (2011) Prevent Strategy

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/97976/prevent-strategy-review.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/97976/prevent-strategy-review.pdf) [accessed 28.8.18]

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<http://www.official-documents.gov.uk/document/cm78/7833/7833.pdf>

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Terrorism Act 2006

<https://www.legislation.gov.uk/ukpga/2006/11/contents>[accessed 28.8.18]

Mental Health Act 1983

Prevent Duty and Guidance: for England and Wales 2015

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/445977/3799 Revised Prevent Duty Guidance England Wales V2-Interactive.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/445977/3799_Revised_Prevent_Duty_Guidance_England_Wales_V2-Interactive.pdf) [accessed 28.8.18]

Safeguarding Adults: Roles and competencies for health care staff – Intercollegiate Document 2018 [accessed 28.8.18]

## **7. Associated Policy and Procedural Documentation**

Adult Safeguarding Policy (HGS)

Consent to Examination or Treatment Policy (QEHB CD024)

Data Protection and Confidentiality Policy (QEHB CD838)

Information Governance Policy (QEHB CD477)

Mandatory and Statutory Training Policy (QEHB CD547)

Person of Trust Procedure (HGS)

Prevent Counter Terrorism and Radicalisation Procedure (QEHB CD1051)

Procedure for Consent to Examination or Treatment (QEHB CD412)

Procedure for the Management and Safeguarding of Patients Less Than 18 Years of Age (QEHB CD447)

Raising Concerns in the Public Interest (Whistleblowing) Policy (QEHB CD 153)

Risk Management Policy (QEHB CD120)

Safeguarding of Adults at Risk Policy (QEHB CD352)

Security Policy (QEHB CD146)

## Appendix A

## Monitoring

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
<p>Local arrangements for management of staff knowledge and understanding of the Prevent agenda</p> <p>Local arrangements through number/themes trends and outcomes of individual cases referred to Prevent/Channel</p> <p>New referrals made to Prevent/Channel and reports of known vulnerable individuals known to the Trust</p> <p>Training attendance</p>	Prevent Lead/s	Trust Safeguarding Ops Group (SOG)	The return is reviewed retrospectively by the SOG after being submitted as part of the Prevent return to the regional prevent coordinator	Quarterly
Compliance with the Prevent TNA and national targets (including refresher training)	Safeguarding Clinical educator	Trust Safeguarding Ops Group (SOG)	Ensuring the content of the training meets national targets. The return is reviewed retrospectively by the SOG after being submitted as part of the Prevent return to the regional prevent coordinator	Quarterly