



Tower Hamlets GP Care Group (THGPCG) CIC PREVENT Policy

Date Issued	28 th March 2015
Date to be reviewed	Periodically or if statutory changes are required
Title	PREVENT Policy
Supersedes	All previous Policies
Description of Amendment(s)	Policy for employees
This policy will impact on	All staff
Financial Implications	No change
Policy Area	Governance
Version No	1
Issued By	Governance Team
Author	Governance Team
Document Reference	
Effective Date	01/04/2015
Review Date	01/01/2016

APPROVAL RECORD

	Committees / Groups / Individual	Date
Consultation	Ops Group	
Approved by		



INTRODUCTION

Context

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. These forms of terrorism include:

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

CONTEST has four 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

Prevent Strategy

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 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.



Health Engagement and the Prevent Strategy 2011

The health sector is a key strategic partner in Prevent and by working with other public sector; 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 the 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.

This can be achieved by employing appropriate and safe information – sharing process as well as building on existing partnerships with other Prevent partners i.e. Barts Health, East London Foundation Trust and the London Borough of Tower Hamlets.

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, patient and staff.

PURPOSE

The purpose of this policy is to identify how staff will be supported to develop an understanding of the Prevent Strategy and how they can utilize their existing knowledge and skills to recognize that someone may have been or is being radicalised. The policy

will build on existing safeguarding policies and procedure which are already in place within the Organisation and the constituent GP Practices.

Prevent Strategy Key Objectives

1. Challenge the ideology that supports terrorisms and those who promote it.
2. Prevent vulnerable individuals 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 or radicalisation.

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

DEFINITIONS

Vulnerable Adult	A person over the age of 18years who 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. (NO Secrets 2000)
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(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	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 or different beliefs and faiths. Also included are extremism calls for death or members of the arm forces. Weather 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 in to terrorism or supporting terrorism at a point in time.

Duties

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

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

- **Chief Executive and THGPCG Board**

The Chief Executive (when appointed) and THGPCG Board have ultimate accountability for actions and inactions in relation to this policy.

- **Safeguarding Leads**

To ensure that the aims of this policy are implemented across the Organisation. Provide support and professional advice to all staff, managers and executive team on matters regarding safeguarding and the Prevent strategy.

- **Care Group Manager/s, Lead Nurse**

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

- **Service Manager, Department Manager**

Be familiar with policy and aware off their own responsibilities. Ensure that staff undertakes Prevent training as required. 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.

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 3).

Should any member of staff develop concerns arising from changes in an individual's behaviour which indicates that they may be drawn in to violent extremism, they will need to take in to 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 on line, 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 Organisation premises.
- External groups using the Organisation premises for meetings, distributing violent extremist materials.

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.

THGPCG 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 Organisation 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 organisation 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 on-going initiative and designed to become part of the everyday safeguarding routine for NHS staff.

The Safeguarding Public Protection Lead has been identified as the Single Point of Contact (SPOC) for *Prevent* and will work in partnership with Safeguarding colleagues across the Organisation.

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 Quality and Safety Committee and the THGPCG Board.

Raising Prevent Concerns

Patients

In the event that a member of 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, the primary point of contact will be the THGPCG Safeguarding Vulnerable Adults Lead /*Prevent* Lead (Dr Kamaldeep Tamber) who will manage such enquires with support from the Quality and Safety Committee and the Executive Board.

All concerns should be escalated, clearly identifying the precise nature of the concerns. This should be discussed where-ever possible with the member of staff's line manager or supervisor prior to referral. (Appendix1)



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

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

Radicalisation and Children

Health care professionals may meet and treat people who are vulnerable to radicalisation including children. Working **Together to Safeguard Children 2010* 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 in to criminal activity and has the potential to cause significant harm*”

Escalating Concerns In Relation to 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 organisation needs to be aware of and have processes within which to manage any concerns e.g. disciplinary action.

Where any employee expresses views, brings material into the organisation, uses or directs patients to extremist websites or acts in other ways to promote terrorism, the organisation will look to use non-safeguarding processes in order to address the 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 concerns with the Prevent *Lead* and Human Resources Lead in the first instance.

The *Prevent* Lead will assess and manage any related safeguarding risks and, where appropriate, the Police *Prevent* Lead will be contacted. The Human Resources Lead will lead on advising the line manager in relation to the disciplinary process should this be appropriate.

Partnership Working

It should be stressed that there is no expectation that the Organisation 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 endeavor

The Prevent Lead will engage with partner organizations (Barts Health, East London Foundation Trust, and London Borough of Tower Hamlets) and other partner organizations, with the responsibility to share concerns raised within the organisation including the Police Prevent Steering Group.



The Prevent Lead will represent the Organisation on Local Prevent Steering Groups and inter-agency meetings.

Information Sharing

In providing care, the organisation 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 organisation, the Caldicott Guardian is the Clinical Director.

TRAINING

Mandatory Training

Training required to fulfil this policy will be provided in accordance with the organization's Training Needs Analysis. Management of training will be in accordance with the organisation's Statutory and Mandatory Training Policy.

It is essential that frontline direct care staff have an understanding of the Prevent and respond to vulnerable individuals who may be being radicalised.

The Department of Health (DH) has developed a training package called Health WRAP to equip healthcare workers in meeting the Prevent related challenges.

All new staff will receive information on Prevent during the Induction process.

Non clinical staff will receive training by attendance at Safeguarding Level 1 training. Training and awareness of the Prevent agenda for frontline staff will be delivered through the mandatory Safeguarding Training (Level 2 Training)

MONITORING COMPLIANCE WITH THIS DOCUMENT

This document has been designed to support the organisations effort to promote Equality and Human Rights in the work place. It is considered to be compliant with current equality legislation and to uphold the implementation of Equality and Human Rights in practice.

REFERENCES AND BIBLIOGRAPHY

"Building Partnerships, Staying Safe", The health sector contribution to HM Government Prevent Strategy: guidance for healthcare organisations. (Department of Health November 2011).

Contest, HM Government Counter – Terrorism Strategy.

"No Secrets", Department of Health, 2000

Prevent Strategy, Cm 8092, HM Government June 2011

RELATED THGPCG POLICY

Mental Capacity Act Policy



Policy for Safeguarding Children (Child Protection)

Safeguarding Adults Policy

Risk Management Strategy and Policy

Guidance for Staff Raising Issues of Concern

Statutory and Mandatory Training Policy

Information Governance policy

Data Protection

Internet Acceptable Usage Policy



Prevent Safeguarding **(protecting children and young people from** **Radicalisation and Extremism.)**

Making Referrals in Tower Hamlets

February 2015

Training on recognising and responding to the risk of Radicalisation and Extremism and the role of professionals is available from

the Prevent Project Manager , Nojmul Hussain,
nojmul.hussain@towerhamlets.gov.uk tel 020 7634 4691

or from the Support for Learning Service, contact Liz Vickerie,
liz.vickerie@towerhamlets.gov.uk 020 7364 6448

THE RISK

Exposure of children to extremist ideology can hinder their social development and educational attainment alongside posing a very real risk that they could support or partake in an act of violence. Currently a number of young girls and boys have been persuaded to leave the country against the wishes of their families, or behind their backs, putting themselves in extreme danger in situations of which they have little prior understanding or appreciation and from which return will be extremely difficult.

Radicalisation of young people can be compared to grooming for sexual exploitation.

“Safeguarding vulnerable people from radicalisation is no different from safeguarding them from other forms of harm.” Home Office – The Prevent Strategy

Why might a young person be drawn towards extremist ideology?

It appears a decision by a young person to become involved in violent extremism:

- may begin with a search for answers to questions about identity, faith and belonging
- may be driven by the desire for ‘adventure’ and excitement
- may be driven by a desire to enhance the self esteem of the individual and promote their ‘street cred’
- is likely to involve identification with a charismatic individual and attraction to a group which can offer identity, social network and support
- is likely to be fuelled by a sense of grievance that can be triggered by personal experiences of racism or discrimination

Recognising Extremism - early indicators may include:

- Showing sympathy for extremist causes
- Glorifying violence
- Evidence of possessing illegal or extremist literature
- Advocating messages similar to illegal organisations such as “Muslims Against Crusades” or other non-proscribed extremist groups such as the English Defence League.
- Out of character changes in dress, behaviour and peer relationships
- Secretive behaviour

The Power of Social Media / Internet Grooming



There are also very powerful narratives, programmes and networks that young people can come across online or through social media so involvement with particular groups may not be outwardly apparent and those at risk may be encouraged not to draw attention to themselves.



REPORTING

The safeguarding policy of a school or other institution or organisation should include clear procedures that staff should follow to raise concerns if they think a child is at risk from extremist narratives or being radicalised.

These should involve reporting to the **Designated Child Protection lead** as they would for any other child protection issue. But unlike other CP issues, the external reporting of Prevent concerns is usually to the **Social Inclusion Panel** rather than IPST. This is because Prevent interventions are voluntary and preventative.

How to respond?

If you have concerns about a child or group of children being violent, or being drawn into violent extremism, or being vulnerable to this, you should respond as we would to all vulnerable children and follow the procedures below.

1. Talk to the family and other professionals working with the young person about the concerns and get their views. (Unless the family is implicated in potential extremism in which case you would contact the Social Inclusion Panel first).
2. Seek consent to complete a Common Assessment Framework form to get a holistic perspective on the situation. Determine if there are additional needs and if so how these could be met.
3. Contact other relevant agencies and engage them in a Team Around the Child (TAC) approach to supporting the young person and their family with a diversionary programme of support.
4. If the concerns persist and the TAC approach does not seem to be having a positive impact, or if you need advice or it appears the young person is already exposed to or involved with extremist organisations, refer the case to the **Social Inclusion Panel** (SIP) using the CAF form.

If in doubt: REFER to SIP

In Tower Hamlets the SIP is the panel which performs the function of “Channel” for those under 18 (Channel is the multi-agency discussion and planning for cases requiring Prevent interventions).

The Chair of SIP is Liz Vickerie liz.vickerie@towerhamlets.gov.uk tel 020 7364 6448.



For Adults (those 18 or over), cases should be referred to the Safeguarding Adults Panel (SAP). Contact the Prevent Project Manager , Nojmul Hussain, nojmul.hussain@towerhamlets.gov.uk tel 020 7634 4691

If at any stage you are concerned that a child or young person is at imminent risk of harm you should also contact the Child Protection Duty Line / IPST / MASH on 020 7364 3444.

If you suspect someone is actually engaged in terrorist activity, you should also contact the police or the anti-terrorist hotline immediately on 0800 789 321

Referral route for safeguarding concerns related to Radicalisation or Extremism

- Showing sympathy for extremist causes
- Glorifying violence
- Evidence of possessing illegal or extremist literature/videos
- Advocating messages similar to extreme organisations; e.g. Muslims Against Crusades or EDL
- Changes in behaviour, dress, social groups, interests e.g. withdrawing from previous friendships/activities/ being secretive

Any member of staff with concerns about a student's vulnerability to extremism or risk of radicalisation should make a clear written record of the concerns they have heard and/or witnessed.

They should speak to the **Designated Lead for Safeguarding** in their organisation

The issue should be discussed with the family and a Common Assessment Framework (CAF) form should be completed (unless the family are implicated in the issue or to do so might put the child at risk).
 Explore the concerns and context: sources of information, friendship groups, interests, access to IT and other relevant background and protective factors.

Low level concerns can be managed by your organisation and the family.
 Record of concerns and actions logged securely (using CAF review form for reviews.) Regular discussion with **Designated Safeguarding Lead** until resolved or referred on.

Concerns either require advice or additional support or are not responding to previous actions or are cases where parents /family are implicated.
 Use the CAF* to refer to the **Social Inclusion Panel (SIP)**
020 7364 1965
IF IN DOUBT REFER

Imminent risk of harm to the child - contact **Children's Social Care / IPST**
020 7364 3444
 as well as **SIP**

Imminent threat of harm to others – contact **Police 999** or **Terrorist Hotline**
0800 789 321

**Although involving the family is best practice, you may share information (using a CAF) with other agencies (e.g. SIP) without consent and, if necessary, without the family's participation under the Crime and Disorder legislation which allows for information sharing to prevent crime..*

If in doubt SHARE and REFER to SIP.

The **Social Inclusion Panel (SIP)** will advise on next steps and provide interventions.

PREVENT interventions are voluntary so the family will be consulted and involved prior to further action.