

CQC Position statement on the Prevent Strategy

As the regulator of health and social care services in England, CQC believe it is important to clarify our position on the Prevent Strategy and what it means for us.

The Prevent Strategy

The Prevent strategy, published by the Government in 2011, was part of the overall counter-terrorism strategy, CONTEST. The aim of the *Prevent* strategy was to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. In June 2018 the UK Government republished the CONTEST strategy which replaces the previous CONTEST and supersedes the Prevent Strategy, both published in 2011.

The CONTEST strategy has specific strategic objectives:

- Tackle the causes of radicalisation and respond to the ideological challenge of terrorism
- Safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support
- Enable those who have already engaged in terrorism to disengage and rehabilitate

These objectives will be delivered through the Prevent Delivery model:

- Working online and offline to empower communities and individuals
- Using safeguarding principles provide tailored multi-agency support to those identified as most at risk to radicalisation
- Providing support to those already engaged to disengage and rehabilitate

Duty to prevent people being drawn into terrorism: specified authorities (Prevent duty)

Section 26 of the Counter-Terrorism and Security Act 2015 (the Act) places a duty on certain bodies (“specified authorities” listed in Schedule 6 to the Act), in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”. The Act states that the authorities subject to the provisions must have regard to this guidance when carrying out the duty.

Prevent Duty Statutory Guidance here

<https://www.gov.uk/government/publications/prevent-duty-guidance>

[Channel Duty Guidance](#) here

<https://www.gov.uk/government/publications/channel-guidance>

CONTEST Strategy

<https://www.gov.uk/government/collections/contest>

CQC is **not** a specified authority under the Act and therefore has no statutory duty to respond or take action.

However, a number of bodies and institutions that CQC works with are specified authorities:

- Local Authorities
- Schools (excluding higher and further education)
- The health sector
- Prisons and probation
- The police

These bodies have specific responsibilities under the Act:

A risk-based approach to the *CONTEST*

To comply with the duty, all specified authorities should demonstrate an awareness and understanding of the risk of radicalisation in their area, institution or body. The duty acknowledges that this risk will vary greatly and can change rapidly. However, no area, institution or body is risk free

Leadership

For all specified authorities, those in leadership positions should:

- establish or use existing mechanisms for understanding the risk of radicalisation;
- ensure staff understand the risk and build the capabilities to deal with it;

Working in partnership

Prevent work depends on effective partnership. To demonstrate effective compliance with the duty, specified authorities must demonstrate evidence of productive co-operation, in particular with local and regional Prevent co-ordinators, the police and local authorities, and co-ordination through existing multi-agency forums, for example Channel Panels, Community Safety Partnerships and CONTEST Boards.

Capabilities

- Frontline staff who engage with the public should understand what radicalisation means and why people may be vulnerable to being drawn into terrorism as a consequence of it. They need to be aware of what we mean by the term “extremism” and the relationship between extremism and terrorism.
- Staff need to know what measures are available to prevent people from becoming drawn into terrorism and how to challenge the extremist ideology that can be associated with it. They need to understand how to obtain support for people who may be being exploited by radicalising influences.
- Staff understand who the Prevent Lead for their organisation is and how to make an enquiry or referral where they feel there may be concerns around radicalisation or vulnerability for both staff and service users.

All specified authorities subject to the duty will need to ensure they provide appropriate training for staff involved in the implementation of this duty. Such training is now widely available.

Information sharing

Specified authorities may need to share personal information to ensure, for example, that a person at risk of radicalisation is given appropriate support (for example on the Channel programme). Information sharing must be assessed on a case-by-case basis and is governed by legislation.

Contractual

Alongside statutory duty, NHS organisations have a Service Condition (SC32) in their contracts around Prevent. The provider must:

- nominate a Prevent Lead
- include in its policies and procedures, and comply with, the principles contained in the Government Prevent Strategy and the Prevent Guidance and Toolkit; and
- include in relevant policies and procedures a programme to raise awareness of the Government Prevent Strategy among Staff and volunteers in line with the NHS England Prevent Training and Competencies Framework; and

What this means for CQC

The health sector is most relevant to CQC as regulator of health and care services. The specified authorities for Prevent are NHS Trusts (including ambulance trusts), NHS Foundation Trusts and NHS England who hold a statutory responsibility. General Practice, Independent sector and other health providers are not specified and do not hold a statutory responsibility.

NHS England has a key lead role in oversight and management of the health sector response to Prevent. For example:

- The Chief Nursing Officer in NHS England has responsibility for all safeguarding, and a safeguarding lead, working to the Director of Nursing, is responsible for the overview and management of embedding the *Prevent* programme into safeguarding procedures across the NHS.
- Each regional team in the NHS has a Head of Patient Experience who leads on safeguarding in their region. They are responsible for delivery of the *Prevent* strategy within their region and the health regional *Prevent* co-ordinators (RPCs) are expected to have regular contact with *Prevent* leads in NHS organisations to offer advice and guidance.
- NHS England has incorporated *Prevent* into its safeguarding arrangements, so that *Prevent* awareness and other relevant training is delivered to all staff who provide services to NHS patients.

CQC does not wish to duplicate existing established governance processes around Prevent by also holding NHS providers to account.

CQC's role

As part of our Assessment framework we consider the competencies of health staff in safeguarding children and adults and that this is in line with national guidance, which includes the Prevent Strategy.

Within our Children's Services single agency review and multi-agency inspection work we will look at the effectiveness of Prevent if our case tracking identifies a child, young person or parent/carer who has been or should have been identified and referred into the local Prevent arrangements. Depending on identified key lines of enquiry we may also examine health's contribution to the local Prevent arrangements at a strategic level.

CQC will introduce training on Prevent for all staff to raise awareness.