Policy:
NP 041 Prevent

Executive Director Lead	Executive Director of Nursing Professions & Quality	
Policy Owner	Corporate Safeguarding Team	
Policy Author	Head of Safeguarding & Named Professional for Safeguarding Adults /Prevent Lead	

Document Type	Policy
Document Version Number	4
Date of Approval By PGG	April 2025
Date of Ratification	May 2025
Ratified By	QAC
Date of Issue	April 2025
Date for Review	April 2028

Summary of policy
The policy outlines the roles and responsibilities of all staff in relation to PREVENT.

Target audience	This policy applies to all professional and clinical staff whether employed within full time, part-time, bank or fixed term contracts irrespective of their length of service.

Keywords	PREVENT, Channel

Storage & Version Control
This policy is stored and available through the Trust intranet. It replaces the previous policy and copies of the previous copies should be destroyed.

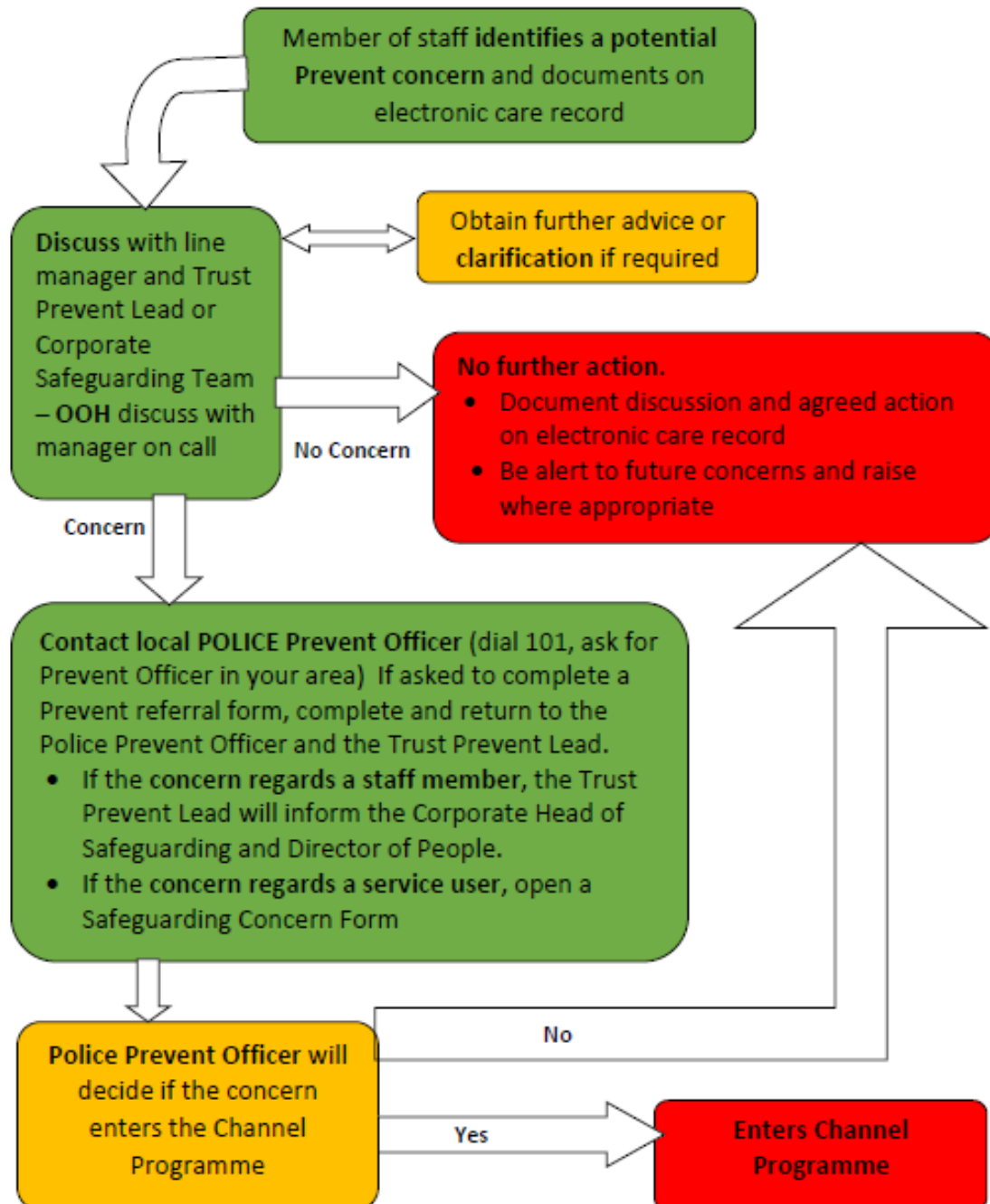**Version Control and Amendment Log (Example)**

Version No.	Type of Change	Date	Description of change(s)
2.0	Prevent Policy removed from Adult Safeguarding Policy. Now a standalone policy	12/8/2021	Information transferred from previous policy to individual template
2.1	New references and amendments/Updates to wording	23/9/2021	Additional information on national guidance and need for Prevent Policy. Revision to wording to standardise titles and reflect national and local terminology e.g. Prevent Officer, Prevent Lead, Channel Programme
2.2	Updated Flowchart	15/10/2021	Flowchart and Notice, Check and Share guidance added as appendices
3	Revision after 6 months	25/04/2022	Approved at PGG pending inclusion of a flowchart at the front of the policy
3.1	Flowchart included	25/05/2022	Flowchart added to policy and published
3.2	Policy reviewed. Updates to roles and titles made. Information added around the process of exploitation	03/04/2025	Multiple staff and role changes reflected in the update. Additional information added regarding the process of exploitation following consultation in Section 5.
4	Amendments made to the other SHSCFT polices referenced within the policy. Equality Impact Assessment also reviewed.		The list of associated policies have now been reviewed to reflect up to date SHSCFT policies. Equality Impact Assessment also reviewed.

Contents

RAISING A PREVENT CONCERN

IF THERE ARE ANY CONCERNS REGARDING IMMEDIATE THREAT OF A TERRORIST ACTIVITY CALL 999

Member of staff **identifies a potential Prevent concern** and documents on electronic care record

Discuss with line manager and Trust Prevent Lead or Corporate Safeguarding Team – OOH discuss with manager on call

Obtain further advice or **clarification** if required

No Concern

No further action.
- Document discussion and agreed action on electronic care record
- Be alert to future concerns and raise where appropriate

Concern

Contact local POLICE Prevent Officer (dial 101, ask for Prevent Officer in your area) If asked to complete a Prevent referral form, complete and return to the Police Prevent Officer and the Trust Prevent Lead.
- If the concern regards **a staff member**, the Trust Prevent Lead will inform the Corporate Head of Safeguarding and Director of People.
- If the concern regards **a service user**, open a Safeguarding Concern Form

Police Prevent Officer will decide if the concern enters the Channel Programme

No

Yes

Enters Channel Programme

Prevent Policy   Version 4 April 2025

1 Introduction

The Prevent statutory duty, introduced through the Counter-Terrorism and Security Act 2015, requires local authorities, schools, colleges, universities, health bodies, prisons and probation, and police to have 'due regard to the need to prevent people from being drawn into terrorism'. The duty helps ensure that individuals who might be at risk of radicalisation are supported as they would be under other safeguarding processes.

- This policy describes how the Trust will meet its statutory responsibilities under the Counter Terrorism and Security Act 2015 and meet the health requirements of Prevent. This policy addresses the potential for vulnerable people supported by or working for the Trust to become radicalised by others.
- Prevent is a key part of the Government's counter-terrorist strategy, CONTEST. The purpose of Prevent is to safeguard people from becoming terrorists or supporting terrorism, by engaging with all people who are vulnerable to radicalisation.
- The Office for Security and Counter Terrorism (OSCT) in the Home Office is responsible for providing strategic direction and governance on CONTEST.
- The Trust believes that this policy is a proportionate response and in no way seeks to limit legitimate debate and freedom of expression.

2 Scope

This is a Trust wide policy that supports implementation of Prevent as part of the CONTEST strategy and supports staff to understand their roles and responsibilities when identifying and raising a Prevent concern. This policy is underpinned by the Guidance for mental health services in exercising duties to safeguard people from the risk of radicalisation NHS England (2017) and the Safeguarding Adults Principles and Approach for South Yorkshire 2021).

This policy applies to all members of Trust staff, regardless of their current role or place of work including volunteers and non-paid staff.

This Policy describes how the Trust, and its employees, will respond, if they are concerned that a service user of the Trust or an employee is at risk of radicalisation.

3   Purpose

The key drivers for the development and implementation of a Prevent policy is to assist and guide staff to fulfil their roles and responsibilities to safeguard adults in line with the Prevent Strategy (2011), Counter Terrorism and Security Act (2015) and the Care Act (2014).

National Objectives (Prevent Strategy HM Government 2011)

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

Objective 2: PREVENT people from being drawn into terrorism and ensure that they are given appropriate advice and support.

Objective 3: work with sectors and institutions where there are risks of radicalisation which we need to address.

The Health Sector contribution to PREVENT will focus primarily on Objectives 2 and 3 above.

4   Definitions

Term	Definition
Adult	A person aged eighteen year or older. Please note that children are supported by the 'Safeguarding Children' legislation and Trust Safeguarding Children Policy, please also see the Trust Domestic Abuse Policy.
Abuse	Any behaviour towards a person that either deliberately or unknowingly, causes him or her harm or endangers their life or their human or civil rights. Abuse includes Physical, Sexual, Psychological, Financial (or material), Discriminatory, Organisational abuse, Neglect (acts of omission), Domestic Abuse (please see the SHSCFT Domestic Abuse policy), Modern Slavery and Self Neglect. Abuse can be passive or active; it can be an isolated incident or repeated. It may occur as a result of failure to take action or appropriate care tasks.
Adults at Risk	These are adults who need Health or Community Care services because of mental or other disability, age or illness and who are, or may be unable to take care of themselves or to protect themselves against harm or exploitation. It also includes informal carers e.g. family or friends who may be at risk of abuse because of their caring role.
Alleged Source of Harm	The person / people thought to have been responsible for the abuse.
CHANNEL	CHANNEL is a supportive multi-agency process. It is a key part of PREVENT.
CONTEST	CONTEST is the UK's Counter-terrorism strategy, it aims to reduce the risk to the United Kingdom and its interests overseas from terrorism.
Extremism	Extremism is vocal or active opposition to fundamental values including democracy, the rule of law, individual liberty and mutual respect and tolerance of different beliefs and faiths.
PREVENT	PREVENT is one of the four work streams of CONTEST that aims to protect those who are vulnerable to exploitation from those who seek to get people to support or commit acts of violence.
A PREVENT Concern	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.

Radicalisation	Radicalisation is the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
Exploitation	Exploitation is the use of someone unjustly or cruelly in order to benefit from their involvement for themselves or for a cause.
Terrorism	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
Vulnerable individuals	Within the context of PREVENT this means individuals, who because of their circumstance, experiences or state of mind are susceptible to extremist ideology. These could be service users, staff, carers or other members of the public.
WRAP (Health WRAP)	Workshop to Raise Awareness of PREVENT.

5   Detail of the policy

CONTEST

CONTEST is primarily organised around four key principles:
>   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.

The Health Sector is a key partner in PREVENT and encompasses all parts of the NHS, charitable organisations and private sector bodies which deliver health services to NHS patients.

Prevent

Prevent aims to safeguard people by tackling:
- the influences of radicalisation and respond to the ideological challenge of terrorism, working through partnerships;
- safeguarding and supporting those most at risk of radicalisation by identifying them and offering support; and
- Enabling those already engaged in terrorism to disengage and rehabilitate.

Channel Programme

The Channel programme is a multi-agency approach to provide support for people identified as being vulnerable to being drawn into terrorism. The police will check with partner organisations and agencies whether any other concerns have been raised about an individual which would prevent a referral from being taken forward. A multi-agency Channel

panel, chaired by the local authority, will meet to discuss the referral, assess the extent of the vulnerability, and decide on a package of support to be offered on a voluntary basis to the individual.

As vulnerability to radicalisation depends on complex interactions between different risk factors, the Channel programme brings together statutory partners to design and deliver a package of diverse and tailored support which may include education, vocational, mental health and theological support.

6   The Process of Exploitation

There is no single profile or indication of a person who is likely to become involved in terrorist-related activity. To date there is no universally accepted view of why susceptible individuals become involved in this activity.

Radicalisation is a process not an event, and there is no single route or pathway to radicalisation. Evidence indicates that that those targeted by radicalisers may have doubts about what they are doing. 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.

The factors surrounding exploitation are many and they are unique for each person. Factors relate to personal experiences of susceptible individuals and can affect the way in which they relate to their external environment.

6.1 Indicators of Concern

Indicators that staff may observe or identify regarding individual's behaviour or actions may include:
• Graffiti symbols, writing or artwork promoting violent extremist messages or images.
• Patients/staff accessing violent extremist material online, 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 service users.
• Inappropriate use of the internet on Trust premises.
• External groups using the Trust premises for meetings, distributing violent extremist materials.

6.2 The Internet and Prevent

Susceptible individuals may be exploited in many ways by radicalisers, through direct face to face contact, or indirectly through the internet, social networking or other media forums / platforms. The internet is a common route for radicalisers to influence vulnerable individuals.

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.

Trust 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.

Trust staff should not be using their Trust IT equipment to search for extremist material, literature or images. Please contact the Trust safeguarding team for further advice / support if you are requiring further information or literature for the purposes of supporting staff in relation to Prevent or radicalisation rather than searching for this yourself using a Trust computer.

It is generally more common for susceptible individuals to become involved in terrorist related activity through the influence of others. Initial contact may be via peers, siblings, other family members or acquaintances. Such social interaction takes place in a range of unsupervised environments such as gyms or cafes, in private homes or via the internet and can often initially be mistaken as 'befriending'. Some extremist groups may use a particular sporting event / activity i.e., a football match / ground to seek out susceptible individuals.

6.3 Use of Extremist Rationale

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 susceptible individuals.

6.3.1 What Factors Might Make Someone Susceptible

A person's susceptibility to radicalisation may be linked to their vulnerability. A person's vulnerabilities may be relevant to their susceptibility to radicalisation and to the early intervention approach that is required to divert them away from radicalisation. In other cases, vulnerabilities may not be present or relevant to the early intervention approach required. Not all people susceptible to radicalisation will be vulnerable, and there may be other circumstances, needs or underlying factors that may make a person susceptible to radicalisation but do not constitute a vulnerability.

In terms of personal vulnerability, a person can be susceptible if they need special care, support or protection because of age, disability, risk of abuse or neglect. 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 other signs of radicalisation.

6.3.2 Identity Crisis

Individuals regardless of age 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. Radicalisers can exploit this by providing a sense of purpose or feelings or 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.

6.3.3 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. A change in circumstances such as bereavement, divorce, frequent house moves, or homelessness are also exampling whereby an individual may seek new relationships, support and friendships.

6.3.4 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.

6.3.5 Criminality

A susceptible 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.

6.3.6 Grievances

The following are examples of grievances which may play an important part in the early indoctrination of susceptible 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.

6.3.7 Other Factors

The following factors have also been found to contribute to susceptible individuals joining certain groups supporting terrorist related activity:
• Ideology and politics
• Provocation and anger
• 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

https://www.gov.uk/government/publications/prevent-duty-guidance (2023)

7   Duties

The 'Guidance for mental health services in exercising duties to safeguard people from the risk of radicalisation NHSE' (2017) requires the organisation to identify key roles and responsibilities - *4.7 Mental health providers should assign staff to hold three specific Prevent*

roles". These key roles and responsibilities below have been taken from the above the document.

Board level accountable clinician - Executive Director of Nursing Professions & Quality

Senior clinical lead – Named Doctor for Safeguarding

Prevent lead – Head of Safeguarding (supported by Named Professional for Safeguarding Adults)

Board level accountable clinician

- Providing leadership and taking responsibility for compliant delivery of the Prevent duty, and its integration within safeguarding procedures
- Monitoring Prevent delivery, including referrals made and received and their outcomes, reporting to the board and providing assurance on Prevent delivery
- Ensuring appropriate Prevent training is undertaken by all staff and adherence to information governance protocols and reporting

Senior clinical lead

- Supporting the Prevent lead by advising on potential referrals as necessary
- Reviewing referrals and providing clinical assurance on appropriateness, as would be expected for all safeguarding referral processes
- Supporting the Prevent lead to ensure that mental health referrals from Prevent are appropriately prioritised for triage and assessment

The Prevent lead

- Acting as a single point of contact for staff, police and Channel Panels
- Facilitating referrals, information requests and feedback to and from Prevent
- Advising staff on Prevent, such as concerns, referrals and processes
- Linking with appropriate adult and children safeguarding and protection processes
- Delivering training on Prevent within the organisation as appropriate
- Ensuring authorised information sharing agreements are applicable to Prevent
- Overseeing collection of Prevent data for NHS England and commissioners
- Working closely with NHS England's Regional Prevent Coordinators
- Attending regularly quarterly regional Prevent forums
- Engaging and representing the trust at local Prevent and safeguarding groups
- Ensuring mental health provider representation at Channel panels and monitoring and triaging mental health referrals from Channel panels

For all Staff

All NHS staff have an important role in identifying individuals at risk of radicalisation and ensure they are referred to Prevent when appropriate. In addition, all mental health professionals should be aware of, and be able to locate available support, including the Channel Programme where necessary. Professionals may be asked via the Channel Programme to support delivery of interventions. See Appendix D – Notice, Check and Share.

All staff must complete Level 1&2 Preventing Radicalisation- Basic Prevent Awareness (BPA). This is available as e-learning through Health Education England's E-learning for Health platform https://portal.e-lfh.org.uk

All registered professionals will be required to undertake Preventing Radicalisation - Awareness of Prevent (Level 3). This was previously available as face-to-face training but will be delivered as e-learning via Health Education England's E-learning for Health platform https://portal.e-lfh.org.uk This ensures the training meets the Health WRAP training requirements.

8   Procedure

Please read in conjunction with the Prevent flowchart (Appendix C)

Raising concerns about Patients and Service Users

If anyone has a concern that someone who uses Trust services is being radicalised, then they should discuss the concerns with their line manager and Trust Prevent Lead or Corporate Safeguarding Team, to decide if the concerns are valid.

Once the concern has been recognised as valid, complete a safeguarding concern and contact the local police Prevent Officer via 101. The Prevent Officer may ask the staff member to complete a referral form. Upon receipt of this, the Prevent Officer will carry out a risk assessment on each referral and decide if this does need to go forward to the Channel Programme.

During their work with adult service users, Trust staff may become aware of children and young people who are at risk of harm as a result of potential or actual radicalisation that has been identified. This should be addressed through the Safeguarding Children Procedures.

Raising concerns about Staff

If anyone has concerns that a member of staff is being radicalised, they should discuss the concerns with their Line Manager and follow the Allegations Against Staff policy as this may be affecting the staff members ability to protect themselves or other from abuse. This process will ensure that relevant people are notified and that the staff member is safeguarded appropriately.

The Line Manager should also follow the process above to raise a Prevent concern.

9   Development, Consultation and Approval

This is not a new policy but has separated from the Safeguarding Adults and Prevent Policy. Updates to this policy has been led by the Named Professional for Safeguarding Adults and the Head of Safeguarding with the Corporate Safeguarding Team.

 And assured at: •   Policy Governance Group

10   Audit, Monitoring and Review

Monitoring Compliance Template						
Minimum Requirement	Process for Monitoring	Responsible Individual/ group/committee	Frequency of Monitoring	Review of Results process (e.g. who does this?)	Responsible Individual/group/ committee for action plan development	Responsible Individual/group/ committee for action plan monitoring and implementation
Annual Dip test of referrals to Prevent to ensure compliance against the flowchart detailed in this policy.	Audit	Named Professional for Safeguarding Adults with support from Corp. Safeguarding Team.	Annual	Safeguarding Assurance Committee	Corp. Safeguarding Team	Safeguarding Assurance Committee and Quality Assurance Committee
Quarterly completion and submission data to NHSE via the NHS Digital portal.	Data report	Named Professional for Safeguarding Adults with support from Corp. Safeguarding Team.	Quarterly	Safeguarding Assurance Committee	Corp. Safeguarding Team	Safeguarding Assurance Committee

11   Implementation and Dissemination Plan

Objective	Task	Executive/ Associate Director Responsibility	Timescale and Progress
Dissemination, storage and archiving	Post on Trust intranet (Jarvis)	Executive Director of Nursing Professions & Quality	Within 1 week of ratification
Communication of updated policy to all staff	'All SHSCFT staff' email alert and communication in CONNECT	Executive Director of Nursing Professions & Quality	Within 1 week of ratification
Cascading of information to all staff	Senior Managers to share with Team/Ward managers to ensure all staff have access to latest version of this policy	Executive Director of Nursing Professions & Quality	Within 1 month of dissemination
Training and development	Ensure up to date information is available at induction for all new staff	Executive Director of Nursing Professions & Quality	Within 1 month of dissemination

12   Training and Other Resource Implications

All staff must complete Level 1&2 Preventing Radicalisation- Basic Prevent Awareness (BPA). This is available as e-learning through Health Education England's E-learning for Health platform https://portal.e-lfh.org.uk

All registered professionals will be required to undertake Preventing Radicalisation - Awareness of Prevent (Level 3). This was previously available as face-to-face training but will be delivered as e-learning via Health Education England's E-learning for Health platform https://portal.e-lfh.org.uk This ensures the training meets the Health WRAP training requirements. This is to be added from the Course Catalogue ESR for registered professionals requiring level 3 training. The Interim Head of Safeguarding and Adult Safeguarding Advisor are working with the Mandatory Training Lead to ensure this training is available as soon as possible. Staff will be advised of this change to training via Jarvis and Connect.

The Trust's Electronic Staff Record maintains a record of all children and adult safeguarding training delivered, with reference to appropriate levels achieved.

13   Links to Other Policies, Standards (Associated Documents)

Sheffield Safeguarding Children and Child Protection Procedures

https://www.sheffieldasp.org.uk/sasp/sasp/policy-and-procedures/south-yorkshire-adult-safeguarding-procedures

https://www.sheffieldasp.org.uk/sasp/sasp/policy-and-procedures/pipot-procedure

https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

https://www.england.nhs.uk/wp-content/uploads/2017/02/adult-pocket-guide.pdf

https://www.rcn.org.uk/professional-development/publications/pub-007366 -Children and Young People

https://www.rcn.org.uk/professional-development/publications/pub-007069 - Adults

SHSCFT Safeguarding Adults Policy
SHSCFT Safeguarding Children Policy
SHSCFT Confidentiality Code of Conduct Policy
SHSCFT Domestic Abuse Policy
SHSCFT Supervision Policy
SHSCFT Safeguarding Supervision Policy
SHSCFT Allegations Against Staff Policy
SHSCFT Speaking Up- Freedom to Speak Up Raising Concerns Policy
SHSCFT Duty of Candour and Being Open Policy

14   Contact Details

Title	Name	Phone	Email

Prevent Policy   Version 4 April 2025

Named Doctor for Safeguarding Children	Ashritha Roy		Ashritha.roy@shsc.nhs.uk
Head of Safeguarding	Hester Litten		Hester.litten@shsc.nhs.uk
Named Nurse for Safeguarding Children	Angela Whiteley		Angela.whiteley@shsc.nhs.uk
Named Professional for Safeguarding Adults	Stephenie Barker		Stephenie.barker@shsc.nhs.uk
Executive Director of Nursing Professions & Quality	Caroline Johnson		Caroline.johnson@shsc.nhs.uk
Deputy Director of Nursing & Quality and Corporate Safeguarding Lead	Vanessa Garity		Vanessa.garity@shsc.nhs.uk
Safeguarding Practitioner	Heather Chalmers		Heather.chalmers@shsc.nhs.uk

Appendix A

Equality Impact Assessment Process and Record for Written Policies

Stage 1 – **Relevance** - Is the policy potentially relevant to equality i.e. will this policy potentially impact on staff, patients or the public? This should be considered as part of the Case of Need for new policies.

NO – No further action is required – please sign and date the following statement. **I confirm that this policy does not impact on staff, patients or the public.**	*I confirm that this policy does not impact on staff, patients or the public.* Name/Date:	**YES,** Go to **Stage 2**

Stage 2 Policy Screening and Drafting Policy - Public authorities are legally required to have 'due regard' to eliminating discrimination, advancing equal opportunity and fostering good relations in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC Guidance and Flow Chart.

Stage 3 – **Policy Revision** - Make amendments to the policy or identify any remedial action required and record any action planned in the policy implementation plan section

SCREENING RECORD	Does any aspect of this policy or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
Age	NO	The policy promotes equity in the workplace for all protected characteristic groups including age. It recognises that a person can be vulnerable to radicalisation regardless of their age.	
Disability	NO	The policy promotes equity in the workplace for all protected characteristic groups including disability. It acknowledges that a person may be considered more vulnerable to radicalisation because of a disability.	
Gender Reassignment	NO	The policy promotes equity in the workplace for all protected characteristic groups including gender reassignment.	

Prevent Policy   Version 4 April 2025

Pregnancy and Maternity	NO	The policy promotes equity in the workplace for all protected characteristic groups including pregnancy and maternity.	
Race	NO	The policy promotes equity in the workplace for all protected characteristic groups including race.	
Religion or Belief	NO	The policy promotes equity in the workplace for all protected characteristic groups including religion or belief. The policy recognises an individuals vulnerability to radicalisation where they may have issues with their cultural or religious identity and acknowledges how radicalisers can exploit this.	
Sex	NO	The policy promotes equity in the workplace for all protected characteristic groups including sex.	
Sexual Orientation	NO	The policy promotes equity in the workplace for all protected characteristic groups including sexual orientation.	
Marriage or Civil Partnership	NO		

Please delete as appropriate: - Policy Amended / Action Identified (see Implementation Plan) / no changes made.

Impact Assessment Completed by: Stephenie Barker
Name /Date 30/04/25

Review/New Policy Checklist

This checklist to be used as part of the development or review of a policy and presented to the Policy Governance Group (PGG) with the revised policy.

		Tick to confirm
	Engagement	
1	Is the Executive Lead sighted on the development/review of the policy?	YES
2	Is the local Policy Champion member sighted on the development/review of the policy?	NO
	Development and Consultation	
3	If the policy is a new policy, has the development of the policy been approved through the Case for Need approval process?	Not a new policy but Case for Need has been approved
4	Is there evidence of consultation with all relevant services, partners and other relevant bodies?	YES
5	Has the policy been discussed and agreed by the local governance groups?	NO – not a new policy
6	Have any relevant recommendations from Internal Audit or other relevant bodies been taken into account in preparing the policy?	YES Statutory requirement as per Counter Terrorism Strategy (CONTEST)
	Template Compliance	
7	Has the version control/storage section been updated?	YES
8	Is the policy title clear and unambiguous?	YES
9	Is the policy in Arial font 12?	YES
10	Have page numbers been inserted?	YES
11	Has the policy been quality checked for spelling errors, links, accuracy?	YES
	Policy Content	
12	Is the purpose of the policy clear?	YES
13	Does the policy comply with requirements of the CQC or other relevant bodies? (where appropriate)	YES – as above
14	Does the policy reflect changes as a result of lessons identified from incidents, complaints, near misses, etc.?	NA
15	Where appropriate, does the policy contain a list of definitions of terms used?	YES
16	Does the policy include any references to other associated policies and key documents?	YES
17	Has the EIA Form been completed (Appendix 1)?	YES
	Dissemination, Implementation, Review and Audit Compliance	
18	Does the dissemination plan identify how the policy will be implemented?	YES
19	Does the dissemination plan include the necessary training/support to ensure compliance?	YES
20	Is there a plan to i. review ii. audit compliance with the document?	YES
21	Is the review date identified, and is it appropriate and justifiable?	YES

PREVENT - Notice/Check/Share

NOTICE

Are you concerned about a service user/patient? Have you noticed a change in behaviour; are they becoming withdrawn, or acting differently? Have they said something that is worrying you? Have you noticed a change of appearance, change of perspective or opinion?

CHECK

Do not ignore your concerns – check with colleagues and/or manager or family member (if appropriate) who may also have noticed something. Check your concern with your Safeguarding Lead. Discuss your concerns – sharing all information e.g., what was said, who said it, behaviour of the person etc.
If there is an immediate concern – call 999

SHARE

Share information with the Prevent Lead in the Safeguarding Team and discuss your concerns. Once the concern has been recognised as valid, follow the 'RAISING A PREVENT CONCERN' flowchart and contact the police by dialling 101 and asking for the Prevent Officer for your area. Complete a Safeguarding Concern.