# The Prevent Duty: A guide for Clinical Commissioning Groups





## **Legislative Responsibilities**

- The Counter-Terrorism & Security Act was enacted in 2015 giving a statutory Prevent duty to both Providers & Commissioners
- Prevent, the requirement to prevent vulnerable individuals from either supporting terrorism or becoming terrorists, was refreshed as part of the Government's revised Counter-Terrorism Strategy (CONTEST 3.0) in June 2018.
- The revised CONTEST strategy identifies more clearly than ever before that Prevent is safeguarding.
- NHS Trusts & NHS Foundation Trusts have a statutory responsibility to pay due regard to Prevent.
- CCGs have a statutory responsibility to cooperate with Channel panels as & when requested to do so.

# **Multi-Agency Engagement**

- Prevent activity is coordinated locally, generally using either Local Authority or Police Force footprints.
- The multi-agency safeguarding panel that meets to support vulnerable individuals identified as at risk for Prevent is called the Channel panel.
- There are generally a wider, more strategic, range of meetings for partners that will include risk & threat briefings in addition to agreeing local priorities & multiagency delivery plans

### Delivery:

WHAT DOES THIS MEAN FOR COMMISSIONERS?

### **Training**

 CCGs should ensure that all staff are trained in accordance with the latest safeguarding guidance at either Level 1 or 2 training requirement (basic) or enhanced for those staff deemed to have a safeguarding Level 3 requirement. This will include refresher training.

#### **Channel Panel**

• CCGs will ensure that they co-operate with Channel Panels as & when requested to do so.

#### **Engagement**

• Is the CCG appropriately engaged with wider Prevent delivery sufficient to ensure that commissioned providers are compliant with statute and/or contract?

#### Governance

• Is the CCG board sighted on Prevent delivery internally & on provider compliance & performance.

#### Assurance:

- CCGs, & other commissioners of NHS funded care, also have a critical role in ensuring that commissioned providers pay due regard to their statutory requirements and/or they are compliant with contractual obligations.
- The quarterly Prevent data return should be received from providers & used by the CCG as a means to evaluate performance.
- It is considered good practice to receive, & review, an annual Prevent report from providers
- Whilst engagement expectations, for Prevent, aren't explicit there is an expectation that CCGs will
  'pay due regard', be sighted on risk & threat & support identification & delivery of local priorities.
- Quality assurance, for Prevent, should also be managed in a similar manner to other safeguarding workstreams.

#### General

 The Prevent CCG guidance document gives further detail to support the information within the guide. (add link)

### The NHS Standard Contract

- The NHS standard contract also contains a requirement for contracted parties to deliver Prevent.
- Commissioners have a responsibility to assure their providers are compliant with statute and/or contract for Prevent

# Sustainability & Transformation Partnerships

- An STP holds the same obligation for assurance & oversight as the constituent CCGs
- •There should be a clearly identified Prevent Lead who has responsibility for Prevent

For further information please contact your Safeguarding Team by emailing: england.safeguarding@nhs.net