

Reviewed: Aug 2018

## Prevent Duty Risk Assessment/Action Plan for Woodlands Limited (including school and care houses)

| <u>No</u> | Prevent Vulnerability/Risk Area   | Risk |   | Action taken/already in place to mitigate/address risk  | <u>Lead</u><br><u>Person</u> | <u>When</u>                                 | RAG         |
|-----------|---|------|---|---|------------------------------|---|-------------|
| 1         | LEADERSHIP  Do the following people, if applicable, have a good understanding of their own and institutional responsibilities in relation to the "Prevent Duty"?  ☐ Strategic Planning Team ☐ Governors ☐ staff   | Low  | • | Policies updated Staff training including e-training  | BG<br>BG/LS                  | Annually Annually /Induction Fortnightly    | G<br>A<br>A |
| 2         | Partnership  1) Is there active engagement from the institution's managers and leaders?  2) Does the institution have an identified single point of contact (SPOC) in relation to Prevent?  3) Does the institution engage with the BIS Regional Prevent Coordinator, Local Authority Police Prevent Leads and engage with local Prevent Boards/Steering Groups at Strategic and Operational level? |      | • | Agenda item to discuss any concerns regarding young people.  Prevent nominated person – <b>BG</b> Safeguarding person within Houses/School  LS to represent the organisation at the strategic meetings. | BG<br>LS                     | On-going<br>via training<br>and<br>meetings | G<br>G<br>A |
| 3         | Staff Training  Do all staff have sufficient knowledge and confidence to:  1) exemplify British Values in their management, teaching and through general behaviours in the institution  | Low  | • | British vales delivered as a whole school assembly and identified in lesson planning where appropriate e.g. through Citizenship, geography, History and English.  | BG<br>LS                     | Annual<br>training                          | G           |

|   | 2) understand the factors that make people vulnerable to being drawn into terrorism and to challenge extremist ideas which are used by terrorist groups and can purport to legitimise terrorism  3) have sufficient training to be able to recognise this vulnerability and be aware of what action to take in response   |     | • | Training delivered to all staff, including e-learning package.  Training covers those who are vulnerable and team meetings allow for early identification of those at risk.   |           |   |   |
|---|---|-----|---|---|-----------|---|---|
| 4 | Welfare, pastoral and Advocacy support  1) Are there adequate arrangements and resources in place provide pastoral care and support as required by the institution?  2) Does the institution have advocacy provision or is this support signposted locally or brought in?  3) Are their adequate monitoring arrangements to ensure that this support is effective and supports the institutions welfare and equality policies?  4) Does the advocacy support reflect the student, demographic and need? | Low | • | Independent advocate meets with young people monthly. Visits to homes by social workers and advocates.  High levels of staffing for young people. Weekly therapy sessions.  Supervisions monitor practice and observations.  Monitoring of the service is through Governors meetings and team meetings.  Annual review of policies.  Advocate is independent so that young people and advocate are not compromised. | All staff | On-going as part of support for all young people. | G |

| 5 | <ol> <li>Speakers and Events         <ol> <li>Is there an effective policy/framework for managing speaker requests?</li> <li>Is it well communicated to staff/student and complied with?</li> <li>Is there a policy/framework for managing on site events i.e. charity events?</li> <li>Are off site events which are supported, endorsed, funded or organised through the institution (including students if applicable) subject to policy/framework?</li> </ol> </li> </ol>   | Med | • | All speakers are approved by Managers and Leaders through team meetings and SPM.  Off-site activities closely supervised by staff.  | Managers/L<br>eaders | On-going                    | G |
|---|---|-----|---|---|----------------------|-----------------------------|---|
| 6 | <ul> <li>Safety Online <ol> <li>Does the institution have a policy relating to the use of IT and does it contain a specific reference and inclusion of the Prevent Duty?</li> <li>Does the institution employ filtering/firewall systems to prevent staff/student, visitors from accessing extremist websites and material?</li> <li>Does this also include the use of using their own devices via Wi-Fi?</li> <li>Does the system alert to serious and/or repeated breaches or attempted breaches of the policy?</li> </ol> </li></ul> | Med | • | The IT policy is combined with the Prevent Duty information.  Firewall is updated and checked on all work computers and internet access.  The policy does include the use of personal devices for work purposes.  Emails and internet use are monitored by AC and AT. | AC<br>BG<br>AC       | Annually                    | G |
| 7 | Prayer and Faith Facilities  1) Does the institution have prayer facilities? 2) Are they good governance and management procedures in place in respect of activities and space in these facilities?   | Low | • | Young people are encouraged to attend religious institutions if they want to and are accompanied by staff  Not applicable   | Care Staff           | As and<br>when<br>requested | G |

| 8  | Subcontracting     1) Do all subcontracts include an agreement to comply with the Prevent duty?     2) Have all staff from subcontracted organisations who come into contact with your students undergone training?  | Med | • | An agreement is signed to show that staff delivering courses/training have had Prevent Duty training and are aware of young people's vulnerabilities.   | BG                | On-going according to provision. | R |
|----|--|-----|---|---|-------------------|----------------------------------|---|
| 9  | <ul> <li>Employers of apprentices and trainees</li> <li>1) Have all employers signed an agreement to comply with the Prevent duty</li> <li>2) Is there a designated individual with safeguarding and prevent responsibilities?</li> <li>3) Has the designated individual been trained in what to do if they identify a Prevent concern?</li> </ul>   | Low | • | Contracts will need to change!  Governor and named safeguarding person in school and Houses  Training updated annually as part of safeguarding.   | AC Managers LS/BG | Annually                         | G |
| 10 | <ul> <li>Site Security</li> <li>4) Are there effective arrangements in place to manage access to the site by visitors and non-student?</li> <li>5) Is there a policy regarding the wearing of ID on site? Is it enforced?</li> <li>6) Are dangerous substances kept and stored on site?</li> <li>7) Is there a policy in place to manage the storage, transport, handling and audit of such substances?</li> <li>8) Is there a policy covering the distribution (including electronic) of leaflets or other publicising material?</li> <li>9) Does the institution intervene where off site activities are identified or are likely to impact</li> </ul> | Med | • | Clear procedures for signing in a Reception.  ID badges are worn by all visitors.  COSHH cupboards are carefully labelled and locked.  Schools have safes in each classroom.  COSHH cupboards audited termly.  One to one supervision allows for close monitoring of activities. TAC meetings agree activities. | CT                | On-going                         | G |

|    | upon staff and/or student, apprentice or trainees i.e. leafleting, protest etc?   |     |   |   |          |   |   |
|----|---|-----|---|---|----------|---|---|
| 11 | <ol> <li>Safeguarding         <ol> <li>Is protection against the risk of radicalisation and extremism included within Safeguarding and other relevant policies?</li> <li>Do Safeguarding and welfare staff receive additional and ongoing training to enable the effective understanding and handling of referrals relating to radicalisation and extremism?</li> <li>Does the institution utilise Channel as a support mechanism in cases of radicalisation and extremism?</li> </ol> </li> <li>Does the institution have a policy regarding referral to Channel identifying a recognised pathway and threshold for referral?</li> </ol> | Med | • | Safeguarding policy updated and training updated as well.  Supervision allows for concerns to be raised as well as team meetings.  Through the strategic board issues discussed and Channel used if appropriate.  Safeguarding policy has referral process. | BG       | Updated<br>annually                       | A |
| 12 | <ol> <li>Communications         <ol> <li>Is the institution Prevent Lead and their role widely known across the institution?</li> <li>Are staff and students made aware of the Prevent Duty, current risks and appropriate activities in this area?</li> </ol> </li> <li>Are there information sharing protocols in place to facilitate information sharing with Prevent partners?</li> </ol>   | Med | • | Team meetings  Through assemblies and activities within lessons.  Information is shared regularly with social workers and staff through meeting, handovers and briefings.   | Managers | Fortnightly                               | G |
| 13 | Incident Management  1) Does the institution have a critical incident management plan which is capable of dealing terrorist related issues?   | Med | • | Business Contingency Plan and Emergency Plan updated as necessary and shared with key staff.  | Managers | Updated<br>when<br>information<br>changes | G |

|    | <ol> <li>Is a suitably trained and informed person identified to lead on the response to such an incident?</li> <li>Does the Communications/Media dep't understand the nature of such an incident and the response that may be required?</li> <li>Does the institution have effective arrangements in place to identify and respond to tensions on or off site which might impact upon staff, student and/or public safety?</li> <li>Are effective arrangements in place to ensure that staff and students are appraised of tensions and provide advice where appropriate?</li> </ol> |     | <ul> <li>Each House Manager and Head<br/>Teacher.</li> <li>Emergency plans cover support and<br/>therapy.</li> </ul>                             |    |                            |   |
|----|---|-----|--|----|----------------------------|---|
| 14 | <ul> <li>Staff and Volunteers</li> <li>1) Does awareness training extend to subcontracted staff and volunteers?</li> <li>2) Is the institution vigilant to the radicalisation of staff by sub-contracted staff and volunteers?</li> </ul>   | Low | <ul> <li>Volunteers are not used in the organisation.</li> <li>Sub-contractors sign a contract to show understanding of Prevent Duty.</li> </ul> | AC | As and<br>when<br>required | O |
| 15 | Freedom of Expression  1) Does the institution have a Freedom of Speech/Expression policy?  2) Does this policy recognise and incorporate the risks associated with radicalisation and extremism?  3) Is the need to protect vulnerable individuals covered within this policy?   | Low |  | BG | Updated<br>annually        | R |

| 16 | <u>Fundraising</u>  | Med | • | Policy in place for fund-raising.                     | Managers/ | As and         |  |
|----|---|-----|---|---|-----------|----------------|--|
|    | Does the institution have a fundraising policy and procedure?   |     | • | Charities are researched before they are chosen.      | Director  | when<br>needed |  |
|    | 2. How are charities checked to make sure that extremist organisation are not inadvertently being funded? |     | • | Team meetings and SPM decide on the charities chosen. |           |                |  |