PREVENT DUTY RISK ASSESSMENT AND ACTION PLAN – September 2024

No	Prevent Vulnerability/Risk Area	Risk Y/N	Action taken/already in place to mitigate/address risk	Owner	When	RAG

1	LEADERSHIP
	
	Understanding of own and institutional responsibilities in relation to the "Prevent Duty"
	• Board
	• SMT
	• Staff
	• Learners
	• Safeguarding team
		N	1. Board has approved the college safeguarding policy that includes specific reference to Prevent.
			   a. Annual report to Board also includes specific reference to Prevent Strategy and how it is being addressed by the College and impact on College safeguarding –reported to Board July 2023 and revision of Safeguarding Policy July 2023.
			   b. Safeguarding log for 2022-23 shows no incidents reported to Cumbria Police or referred to Channel.
			
			Action: continue to monitor all safeguarding reported incidents for risk of radicalisation and report to the Board.
				Prevent Lead
				
				All staff
					July 2023
					
					Ongoing
						A

			2. The Safeguarding Team develops strategies for embedding Prevent across staff training, learner induction, tutorial learner resources and acts as first point of contact for concerns raised by staff or learners.	Prevent Lead	Ongoing	G
			3. The College does not have an active Student Union, but Learner Council is made aware of the duty. Action: update presentation to Student Council on the College's approach and response to Prevent.	A Mundy Prevent Lead	Ongoing Oct 2023	A
			4. Established Safeguarding Team is led by R Evans (SLT Member) as Designated Safeguarding Lead, with additional trained and experienced staff undertaking the role of DDSLs and DSOs. 5. Information, updates, and best practice received via NW Prevent Co-ordinator (Nigel Lund) shared with SLT. Action: Review at every Safeguarding meeting whether our response is adequate based on new terrorism alerts and address concerns early.	SLT Safeguarding team	Ongoing Every Meeting	G
			6. Induction programme for new staff includes specific reference to Prevent within Safeguarding. In addition, materials in place for teaching and front-line staff new to the college. Includes a requirement to complete either the college's online training, or the Prevent Police online Prevent and Channel training module and evidence certificate to HR.	HR	Ongoing	G
2	**Partnership** 1. Is there active engagement from the institution's board, SMT, 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?	N	1. As 1 above, reporting of Prevent within the College's Safeguarding Report is actively monitored by the Board with SLT in attendance. Designated Corporation Member for Safeguarding.	R Evans B Rockliffe	Ongoing	G
			2. The Deputy Designated Safeguarding Lead is also the single point of contact for Prevent but other members of the safeguarding team can be contacted as identified within the Safeguarding Policy and through staff development.	DSL	Ongoing	G
			3. The College Prevent SPOC is in regular contact for updates through the Regional Prevent Co-ordinator (Nigel Lund) and has established links with the Cumbria Police and the Public Protection Unit.	DSL	Ongoing	G

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
		N	1. Range of training in place as follows:
			   a. Annual training for all staff in an element of Safeguarding/Prevent as part of schedule of training.
			   b. Governance training is included within induction training for new governors. Where new information is made available, then this is shared with governors through Board reports. Safeguarding Governor Eve martinconducted a Safeguarding review with the DSL in November 2022 and the new SG link will review in November 23 when new DSL is in place.
			   c. Staff trained in and have access to resources for British Values for tutorial delivery.
				DSL	Ongoing	A

No	Prevent Vulnerability/Risk Area	Risk Y/N	Action taken/already in place to mitigate/address risk	Owner	When	RAG
	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. be able to recognise this vulnerability and be aware of what action to take in response		d. Content related to 'cognitive bias', and 'logical fallacy' have been added to the tutorial scheme of work for all Level 3 learners, to enable them to be critical of internet sources of information, conspiracy theories, and to reduce vulnerability to misinformation through social media that could increase the likelihood of radicalisation. e. A respectful and welcoming culture linked to equality and diversity is evident in the College and through formal quality assurance activity and informal channels. f. All staff logged into training and provide additional follow up for late starters with regular induction dates throughout the year with annual updates recorded by HR.	R Lenon DSL HR	Ongoing Ongoing	

			2. Prevent, British Values and Counter Terrorism training for learners:
			   a. Materials developed to support British values and counter-terrorism. ETF materials monitored and utilised where appropriate
			   b. Counter-terrorism & British Values activities included within tutorial programme.
			   c. Tutorial observation checks understanding and inclusion of Prevent and British Values activity with best practice identified and shared.
			   d. Staff required to undertake online training programme to support understanding (monitoring report produced).
			   e. Induction module includes Prevent.
			   f. Additional session organised to ensure all staff have had training and capture new staff throughout the year.
			   g. Dynamic lockdown procedures, training and practices have been effective in raising understanding across the Campuses.
				Prevent Lead	Ongoing	G

			3. Where staff are concerned, they raise any safeguarding concern with the Safeguarding Officer for further consideration and investigation.	DSL	Ongoing	G
4	**Welfare, Pastoral and Chaplaincy 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 chaplaincy provision or is this support signposted locally or brought in? 3. Are there adequate monitoring arrangements to ensure that this support is effective and supports the institutions welfare and equality policies? Does the chaplaincy support reflect the student demographic and need?	Y	1. Support for learners arranged by the Safeguarding Team and Wellbeing Offer with extensive and very well-established external referral. Safeguarding annual report provides overview of referral processes undertaken. Strong links with referral agencies such as CAHMS, SAFA, SG Hubs, Social Care, and many other charitable organisations to ensure the right level of support is put in place, although waiting lists are of a concern.	DSL Safeguarding Manager	Ongoing	G

			2. Chaplaincy Provision
			   a. No provision for chaplaincy although external signposting available if a learner request is made.
			   b. Chaplaincy support has not been introduced by the College nor requested by any learner groups, despite being offered via the Student Council.
				SLT		A

			3. Monitoring arrangements
			   a. Learner questionnaires include specific reference to support requirements being met.
			   b. Board receives an annual safeguarding report, noting onward referral.
			   c. Annual equality report published on college website.
			   d. Key performance indicators in the college dashboard include equality and reviewed by Board at each meeting.
				K Nash
				
				DSL/Prevent Lead
					July 2023	G

5	**Speakers and Events**
	1. Is there an effective policy/framework for managing speaker requests?
	2. Is it well communicated to staff/students and complied with?
	3. Is there a policy/framework for managing on site events i.e. charity events?
		N	1. Managing speaker requests
			   a. Policy in place and used by staff to self-assess risk.
			   b. Compliance checked by relevant line manager.
			   c. Shared with staff during safeguarding update training with annual reminder. Examples of good practice requested to support training.
			   d. e-form available (College Policies in Sharepoint) for completion by all those booking events.
				DSL	Sept 2023	A

No	Prevent Vulnerability/Risk Area	Risk Y/N	Action taken/already in place to mitigate/address risk	Owner	When	RAG
	4. Are off site events which are supported, endorsed, funded or organised through the institution (including Students' Union if applicable) subject to policy/framework?		Action: monitor compliance with external speaker policy.	Heads of Faculty	Ongoing	

			2. Managing on-site events
			   a. All booking managed via the Principal's office and a check made of reasons for booking and general content.
			   b. Bookings accepted based on risk analysis.
			   c. No concerns over external bookings identified in 2022/23
				K Nash	Ongoing	G

6	**Safety Online** 1. 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? 2. Does the institution employ filtering/firewall systems to prevent staff/students/visitors from accessing extremist websites and material? 3. Does this also include the use of using their own devices via Wi-Fi? 4. Does the system alert to serious and/or repeated breaches or attempted breaches of the policy?	N	1. Firewalls in place – confirmation of blocking of access to extremist websites and material needed. 2. New systems in place to identify key words in internet searches that includes external access monitoring. 3. Learners and staff using keywords in internet searches are investigated by the safeguarding manager. 4. Fastvue programme in place and procedures established. All staff aware and included in KCSiE training. Student induction includes this awareness.	M Woof Safeguarding Manager	Ongoing	G
			5. System alerts in place and checked.	M Woof	Ongoing	G
			BYOD policy in place that outlines responsibilities of users as well as actions to be taken if policy is not followed. Next updated August 2023.	M Woof	Sept 2023	A

			6. IT Code of Conduct
			   a. In place and includes specific reference to Prevent Duty.
			   b. New product in place to track user activity, report usage and provide additional support for e-safety and Prevent through identification of key words – Fastvue programme.
				M Woof	Updated Sept 22
					
					Ongoing
						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?	N	1. The requirement for a prayer room facility has been met by dual purposing a guidance room, which has been accepted positively by users. 2. Use of this space for this purpose is managed by the DSL.	DSL	Ongoing	G
8	**Site Security** 1. Are there effective arrangements in place to manage access to the site by visitors and non-students/staff? 2. Is there a policy regarding the wearing of ID on site? Is it enforced? 3. Are dangerous substances kept and stored on site? 4. Is there a policy in place to manage the storage, transport, handling and audit of such substances? 5. Is there a policy covering the distribution (including electronic) of leaflets or other publicising material?	Y	1. Clear signposting for all visitors to report to Reception. CCTV covers all main access/egress points. Staff are trained to be vigilant and to challenge non-known visitors. Visitors attending salons, restaurant, external events are noted separately in line with the College Visitors' policy, signed in, wear visitor lanyards and are escorted by a member of staff around the building.	K Nash	Ongoing	A
			2. All college users are issued with lanyards with identity badges. 3. Routine and regular checks are carried out on compliance with the requirement to wear identification at all times. 4. Learner noncompliance with the wearing of lanyards triggers the Disciplinary Process. Alternative procedures in place for events taking place in college. Position reviewed annually. 5. Learners who forget lanyards are required to wear a temporary lanyard for the day. The number on the lanyard is noted on a log sheet, and learners who fail to return the lanyard, are picked up via tutors and student services.	All DSL A Mundy	Ongoing	A
			6. Policy on dangerous substances in place and monitored through Health and Safety process, and by the Health and Safety Manager.	P Dudley	Ongoing	A

No	Prevent Vulnerability/Risk Area	Risk Y/N	Action taken/already in place to mitigate/address risk	Owner	When	RAG
	6. Does the institution intervene where off site activities are identified or are likely to impact upon staff and/or students i.e. leafleting, protest etc?		7. Policy above includes storage, transport and audit of substances Action: Audit outcomes to be presented to SLT through monthly H&S Updates	P Dudley		A
			8. There is no policy in place for distribution of leaflets or publicising material, although electronic distribution is covered via the IT user policy. No situations have occurred for off-site activities as described			G
			9. Safeguarding Policy update includes reference to radicalisation and extremism. Also included in equality, bullying & harassment, and tutorial policies.			
9	**Safeguarding** 1. Is protection against the risk of radicalisation and extremism included within Safeguarding and other relevant policies? 2. Do Safeguarding and welfare staff receive additional and ongoing training to enable the effective understanding and handling of referrals relating to radicalisation and extremism? 3. Does the institution utilise Channel as a support mechanism in cases of radicalisation and extremism? **4.** Does the institution have a policy regarding referral to Channel identifying a recognised pathway and threshold for referral?	N	1. Safeguarding Policy includes specific reference to radicalisation and extremism and is updated annually with Board approval. Prevent is also included in other relevant policies.	DSL	Annual review	G
			2. Staff awareness of Channel as a support mechanism and methods of referral. Safeguarding team keep up to date through bulletins sent by NW Prevent Co-ordinator, CLSCB Education Group meetings, ETF training materials etc.	DSL	Ongoing	G
			3. Referral to Channel included in Safeguarding Policy. **No referrals made during 2020/21, 1 in 21-22, none in 22-23.**	DSL	Ongoing	G
			4. Channel is referred to within the Safeguarding Policy. Prevent is linked to Safeguarding and all staff are aware of Designated Lead and safeguarding team members.	DSL	Ongoing	G
10	**Communications** 1. Is the institution Prevent Lead and their role widely known across the institution? 2. Are staff and students made aware of the Prevent Duty, current risks and appropriate activities in this area? **3.** Are there information sharing protocols in place to facilitate information sharing with Prevent partners?	N	1. As above, staff training scheduled for August 2023. Prevent is included in induction training for new staff under safeguarding, led by Safeguarding DSL (also Prevent SPOC), and the Safeguarding Manager (DDSL).	Safeguarding Manager	End August 2023	G
			2. College has established quick referral contacts with both Cumbria Police and North West Prevent Co-ordinator (Nigel Lund).	Prevent Lead	Ongoing	G
			3. Information Sharing Policy in place with staff training to support their understanding. Good relationships with local schools ensure that at an operational level, key information is shared on safeguarding concerns. CPOMS software has been implemented.	C Owen	Ongoing	G
11	**Incident Management** 1. Does the institution have a critical incident management plan which is capable of dealing terrorist related issues? 2. Is a suitably trained and informed person identified to lead on the response to such an incident? 3. Does the Communications/Media dep't understand the nature of such an incident and the response that may be required?	Y	1. Incident Management a. Disaster Recovery Plan in place with Lead Manager for Disaster Recovery nominated. Policy on Protective Security approved and linked with College evacuation policy. b. Staff training took place October 2020 to ensure staff know how to handle a critical incident, using Dynamic Lockdown Procedure and Alertus notification system.	K Nash	January 2023	A
			2. Senior Leadership Team meet to review policies and how to put into practice as situations develop.	Principal	Ongoing	A
			3. All communication would be handled by Principal and Senior Team in conjunction with the Marketing Manager.	Principal	As required	A

No	Prevent Vulnerability/Risk Area	Risk Y/N	Action taken/already in place to mitigate/address risk	Owner	When	RAG
	4. 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? **5.** Are effective arrangements in place to ensure that staff and students are apprised of tensions and provide advice where appropriate?		4. Communication with staff already in place but no specific reference to apprising them of tensions. In a small college environment, procedures are already in place to support protective security with key staff (Marshals) given responsibility for communicating around the campus. 5. Alertus system in place to provide alerts to serious incidents under Protective and Premises security tested, and repeated on an annual cycle	All PD/DSL	Ongoing	A
			6. Currently no subcontracts in place. Volunteers across the Organisation, including at Kendal Museum, are required to undertake Prevent training. Westmorland campus has adopted college policies signage and functions.			G
12	**Staff and Volunteers** 1. Does awareness training extend to sub-contracted staff and volunteers? 2. Is the institution vigilant to the radicalisation of staff by sub-contracted staff and volunteers?	N	1. Additional training to be put on for volunteers e.g., museum and agency staff.	HR	Ongoing	G
			2. Culture of Vigilance included in Dynamic Lockdown training in Oct 2020, December 2021. October 2022, planned for November 2023, but needs further reinforcement through annual CPD.	P Dudley		A
13	**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?	N	1. Freedom of Speech including in external speakers' policy. 2. Policy includes reference to radicalisation and extremism. 3. Policy links in with supporting vulnerable staff.	DSL	Ongoing	G