

Office for
Students



Prevent review meetings

Guidance for providers

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Introduction

1. This document builds upon 'Prevent duty: Framework for monitoring in higher education in England 2018-19 onwards' (OfS 2018.35)¹ to provide guidance on how the Office for Students (OfS) intends to implement its programme of Prevent review meetings in its role as monitoring authority for the 'Prevent duty' in the higher education sector in England.
2. As set out in OfS 2018.35, Prevent review meetings (PRMs) are the key mechanism for assessing compliance with the statutory duty, as they provide us with a deeper level of insight into a provider's implementation of the Prevent duty beyond the accountability and data return. PRMs will provide both assurance of the implementation of the duty at specific higher education providers, and sector-level assurance of the duty through identifying best evidence and where further support may be required.
3. The PRM programme is also a core function of implementing a risk-based and proportionate monitoring framework. It replaces the detailed annual report process for all providers, and a significant part of it will focus on those providers that are at 'higher risk' of non-compliance with the Prevent duty. 2018-19 acts as a transition year and we will evaluate the programme, as part of the broader evaluation of our Monitoring framework to be held in autumn 2019.

Selection

4. PRMs fall into three broad categories of meetings with:
 - a. **Providers considered to be at 'higher risk'** as part of our heightened engagement approach, or that have recently had substantial material changes of circumstance or significant potential serious incidents causing concern that we have determined require further follow-up.
 - b. **New entrants to the sector** to test a baseline of compliance, typically one year after they have entered into OfS monitoring.
 - c. A **random representative sample** of other relevant higher education bodies.
5. The PRM programme is ongoing, and does not necessarily conform to a set number of meetings. All providers assessed as being at 'higher risk' of non-compliance with the statutory duty, and a representative sample of other providers, will be subject to a PRM in a given year. Further information can be found at paragraph 13.

Types of PRMs

Higher-risk providers

6. The OfS will hold PRMs with any provider that has been assessed as being at 'higher risk' of non-compliance with the statutory Prevent duty imposed on relevant higher education bodies under the Counter-Terrorism and Security Act 2015 (CTSA), to have due regard to the need to

¹ Available at www.officeforstudents.org.uk/publications/prevent-duty-framework-for-monitoring-in-higher-education-in-england-2018-19-onwards/.

prevent people from being drawn in to terrorism. This risk assessment process involves making a judgement that will draw from a number of different evidence and information sources to inform our 'intelligent regulation' approach, including:

- a provider's track record of compliance with the former Higher Education Funding Council for England's (HEFCE's) processes
 - information and conclusions drawn from core processes under the OfS Monitoring framework, such as the accountability and data return
 - where appropriate, initial or ongoing monitoring of registration conditions, e.g. public interest principles
 - information from Prevent partners about local and wider risk and threat.
7. Our risk assessment process is continuous, but we will incorporate specific review points throughout the year to coincide with the completion of our broader monitoring processes. For example, following analysis of the accountability and data return in December, a risk status review will be conducted for each provider drawing on all of the evidence outlined in paragraph 6.
8. The purpose of the PRM for providers identified as at 'higher risk' will be for the OfS to seek assurance around the areas which have triggered such an assessment, as well as to assess the provider's overall compliance with the duty. However, where concerns have been triggered by a provider's response to a particular Prevent-related issue, such as a material change in circumstance or a Prevent-related serious incident, the PRM will include seeking assurance on that particular issue as well as broader compliance with the duty, unless our risk assessment of the provider suggests otherwise.
9. Providers that are assessed as at 'higher risk' will be notified formally about their risk status alongside the notification of their selection for a PRM. A supporting rationale will outline whether the identified risks relate to non-compliance with the statutory duty, or to factors external to the provider that present an increased risk of someone being drawn in to terrorism, which in turn may pose challenges for Prevent duty implementation. We may not be able to share specific information provided to us by Prevent partners about external risk factors, but appropriate information about local risks and concerns may be obtained by providers from local Prevent partners.

New entrants

10. All new entrant providers will be subject to a PRM as part of the baseline assessment of compliance, as set out in Annex A of the Monitoring framework.
11. Providers will ordinarily be subject to a PRM within a year of becoming subject to Prevent monitoring, and approximately six months after the detailed assessment. However, if following detailed assessment the provider's policies are found to be needing improvement, the PRM may form a part of the subsequent action plan.
12. The core objective of PRMs for providers in this category will be to seek broad assurance that their Prevent-related policies are being implemented appropriately. We may choose to request

data around core areas of implementation as part of this exercise, as the provider will not have transitioned into the accountability and data return cycle.

Representative sample

13. The representative sample is a key mechanism for providing the OfS with sector-level assurance on how Prevent has been implemented. It would not be proportionate to conduct this process with all providers, and the sector has already achieved a high baseline level of Prevent compliance of 97 per cent to date. As stated in paragraph 5, all higher-risk providers will be subject to a PRM, as well as the representative sample selected in a given year. We intend that overall this will equate to no more than 10 per cent of providers each year. A provider will not be selected again for another PRM for at least three years, unless the provider has been assessed as at higher risk through the OfS risk assessment process. As this is a transition year, we will review the percentage of providers that we select for a PRM in a given year, as part of our evaluation to be undertaken in the autumn 2019.
14. Although the primary legislation guiding our monitoring approach is the CTSA, in setting the level of monitoring we will have regard to our general duties under the Higher Education and Research Act 2017. These include the principles of best regulatory practice, i.e. that regulatory activities should be transparent, accountable, proportionate and consistent. We will ensure that our approach for selecting the representative sample fulfils our responsibilities as designated monitor under the CTSA, and aligns with the sampling approach being developed under the wider OfS Regulatory framework.
15. The 'types' of provider for the purpose of sampling are intended to reflect their likely approaches to the implementation of the Prevent duty, and are not defined in terms of their registration status or how they have become eligible for Prevent monitoring. This means that we will categorise providers by provision type, governance arrangements or structure, number of campuses, mode of study, etc., as these factors impact the approach taken by a provider to its implementation of the duty.
16. We will look to select a representative number of providers from each of these categories, so provider type will not affect the chances of being selected as part of the sample. The exception to this will be the collegiate universities of Cambridge, Durham and Oxford, as in these cases the university is working in partnership with a college, school, or hall. We will therefore need to take evidence from both the college and the central university to be sure that their implementation of the statutory duty is effective in practice². This means that the first time a constituent college, school, or hall is selected as part of the sample we will automatically review its parent university. As stated in paragraph 4, the university will only be reviewed once within the cycle.
17. We will seek to ensure that those providers selected are broadly representative in terms of type, size, and geography. Selection will aim to be random, while meeting these three criteria. To ensure the representative sample better reflects geographical variation, the providers

² HEFCE's and the OfS's monitoring of the collegiate universities has historically recognised that implementation is interdependent as welfare referral pathways, training resources, and other services have been shared, and therefore that evidence of implementation by the university is pertinent when assessing the compliance of a college.

selected for PRM as ‘multi-subject providers’, which is expected to be by far the largest group, will be made up of a proportionate number from each of the regions, as defined by the Department for Education: London, South East, South West, East, West Midlands, East Midlands, North West and North East. The representative sample population will consist of established providers only (i.e. no new entrant providers).

Table 1: Timeframes for PRMs

Weeks from PRM	Milestone
-4	Letter informing provider of PRM
-3	Provider submits documentation and self-assessment
-1	Provider sent agenda and request for further information
0	PRM
+1	Outcome letter issued

18. Our expectation is that the full process for carrying out a PRM for any provider will take approximately five weeks, from the time when the provider is formally notified of the PRM to the time when it receives its outcome and feedback from the OfS. We will seek to agree mutually convenient dates and times with the provider within this timescale where possible. Table 1 offers a timeline of core milestones during the PRM process. However, we may allow additional time where the availability of staff at a provider proves challenging.
19. While we would ordinarily expect to be able to issue an outcome letter within five working days of the PRM, we may need to extend this timeframe. This includes cases where we require further information as part of the process – particularly clarifications, evidence, or a meeting with further staff members from the provider or with other Prevent partners.

Preparation: documentation

20. When the provider is informed of its selection for a PRM, the OfS will request information that the provider should hold when implementing the statutory duty. The OfS will request that it submits information on the following areas (generally not less than five working days after receipt of the letter):
- a. A copy of the provider’s most recent risk assessment and action plan (if not combined)
 - b. Any key Prevent-related policies not previously submitted to the OfS or HEFCE.
 - c. The most recent report or appraisal submitted to the provider’s governing body or proprietor.
21. This information will be used to help inform the meeting structure of the PRM and the selection of core attendees for the meeting. Having reviewed this information, the OfS may request further documents and information if we have particular concerns around an area of the duty. This is mainly likely to affect providers assessed as at higher risk of non-compliance prior to the meeting, and might include for example minutes from working groups or governing bodies, or risk assessments of specific events. However, any further request will bear in mind the proportionality of the review and of the burden placed on a provider.

Attendance and structure

22. To ensure that we are able to gain the appropriate evidence and assurance from the PRM, the OfS may request that individuals other than the provider's Prevent lead participate in the meeting. These might include chairs of governing bodies, staff responsible for external speakers (if not the Prevent lead), staff responsible for student support, heads of information technology or research services, etc. However, these requests will be made only where we have cause for concern about a particular area of the duty (e.g. effective governance or implementation of a particular core policy), or where specialist knowledge would assist our understanding of the provider's implementation.
23. We will seek to confirm with a provider 10 days in advance of the PRM whether further attendees are needed, and will agree either to reschedule the PRM to accommodate the new staff, or alternatively to engage with those staff outside the meeting.
24. The PRM structure will depend on the rationale for the provider's selection. For instance, it will differ for providers selected for PRM in response to a material change of circumstance compared with a provider selected as part of the representative sample. However, for the vast majority of the PRMs, the structure will include an agenda covering all core areas of the statutory guidance (where these apply to the provider – for instance, we will not request information on security-sensitive research if this is not undertaken), including:
 - risk assessments and action plans
 - external speakers and events
 - training
 - welfare
 - leadership and partnership
 - information technology
 - student unions or representatives (where appropriate).
25. Providers will be given an opportunity to comment on the PRM agenda, with a view to confirming the exact agenda at least five working days in advance of the PRM. As part of this we will also confirm whether we wish to undertake a 'stress test' of a particular area of the duty described above. This will be a hypothetical scenario designed to test how a provider's policies would be used in response to the scenario – for instance how a provider would respond to a prima facie Prevent-related welfare concern. 'Stress tests' have been used effectively under our previous programme of PRMs, to provide us with confidence that a provider's policy would be applied appropriately in the absence of any real-life example. The 'stress test' scenario will be shared before the meeting, no later than the agenda is circulated, with the provider's response discussed during the PRM. If a provider has a real-life example that covers the topic of the stress test, it will be allowed to share this as an alternative. The real-life example must be non-individualised and must not have been submitted to HEFCE or the OfS previously as part of a prior assessment of compliance.

26. The meeting will consist of semi-structured questioning – both focusing on areas where further information is being sought in response to the review of Prevent-related documents and the self-assessment, and to ensure consistency of PRMs more widely in providing sector-level assurance of implementation.
27. The questioning will encourage providers to reflect on their implementation as well as acting as an exercise to obtain evidence of implementation. Similarly, we will encourage providers to present examples of their successes and lessons learned on implementing the duty in the meeting, to assist our sector-level role of sharing best evidence and promoting continuous improvement. As the PRM will take a holistic view of the provider's implementation, we may not choose to cover all areas of the statutory guidance, to maintain proportionality of our approach. The areas discussed will take account of our provider risk assessment, and in particular of the provider's track record of compliance with the duty.
28. Depending on the rationale of the review, and the provider's operating context, PRMs are likely to last between one-and-a-half and three hours, depending on the size and context of the provider and the outcomes of our risk assessment. We will endeavour to give an indication of the length of the meeting in our preparation with the provider, but we may require further time depending on the progress of the meeting.

Outcomes and follow-up

29. The OfS will review the information taken from the PRM and may choose to request further information from a provider to provide further evidence in support of implementation, or to clarify evidence. This may include requests to speak with other members of an institution, if we are not able to obtain the appropriate evidence from the PRM. Again, we will look to ensure that any request is proportionate to assure us that a provider is demonstrating due regard to the duty. We may also choose to approach student representatives to gain their feedback on a provider's approach, but this will be voluntary and only done where we believe there may be cause for concern about how the provider is implementing the duty.
30. The OfS will look to give a provider its outcome within five working days of the meeting, depending on whether we require further information. In these circumstances we will indicate to the provider what the alternative timescales are likely to be.
31. The outcome letter will give the provider its compliance judgement, which will be one of the following:
 - a. **Demonstrates due regard** – the provider has demonstrated sufficient evidence of active implementation, and policies and processes continue to meet the requirements of the statutory guidance.
 - b. **Further actions needed** – further actions are needed to demonstrate active implementation, and policies and processes need improvement to meet the requirements of the statutory guidance.
 - c. **Does not demonstrate** – there is significant evidence of active non-implementation or inadequate evidence of implementation, or policies and processes do not meet the requirements of the statutory guidance.

32. Providers that demonstrate due regard may still receive feedback recommending certain actions identified through the PRM. The timescales for completing this activity will typically range between one and three months, depending on the nature of the actions themselves. Where appropriate, we will also take into account the provider's own internal governance mechanisms and timeframes, for example in formally approving changes to core policies and procedures through the governing body.
33. Providers that have been judged as having further actions needed will be subject to heightened engagement and an action plan, which we will ordinarily expect to be completed within three months of the provider receiving the outcome letter. The provider may be subject to a further PRM as part of the action plan. If a provider completes the action plan successfully, we will revise our judgement to reflect that the provider is demonstrating due regard. If the OfS has concerns around the provider's progress with the action plan, we may choose to revise our judgement to show that the provider does not demonstrate due regard, and formally commence our non-compliance process as outlined in the Monitoring framework.
34. Any providers with a 'Does not demonstrate' outcome may be formally referred to the Department for Education, which under the Counter-Terrorism and Security Act 2015 could lead to a legal direction to their governing body or proprietor. For registered providers, a judgement of 'Does not demonstrate' may indicate wider regulatory failure against the conditions of registration, and the provider therefore could be separately subject to sanctions under the Higher Education and Research Act 2017, including de-registration.
35. Alongside the judgements reached, we will share details of our findings and the assurance information from the provider as a formal record of the PRM in the body of the letter.

Good practice and further advice and guidance to providers

36. We will also identify areas and example of good practice in the evidence taken from the PRM, which we will feed back to the provider. This will be non-prejudicial to a compliance outcome and will not therefore form part of the outcome letter. The OfS will examine these examples both individually and thematically, with a view to publishing effective practice to support our sector-level monitoring role, and to promote continuous improvement in Prevent compliance and the OfS's broader role on student welfare and safeguarding where applicable. This is likely to include sharing case studies to inform our 'What works' programme and other strands of activity included in Section 4 of our Monitoring framework. We will approach individual providers to seek their consent to use their information where appropriate.
37. Similarly, in our role to support continuous improvement, we will also formally note outside the outcome letter where further information, advice, and guidance have been sought from the OfS. We will then look to respond to the provider on that issue through our engagement work following the PRM.

Reporting

38. We will publish our sector-level findings from the PRM programme as part of our periodic reporting of our monitoring. This will include reporting to the Department for Education the numbers of providers that are compliant or otherwise with the duty, alongside our broad analysis of compliance in the sector. We may also choose to share information with the

department on individual providers that we have concluded do not demonstrate due regard to the duty, in line with our non-compliance process under the Monitoring framework.

39. We may also share information with Prevent partners on our findings from a particular PRM. However, this will be only on a need-to-know basis, and only when there is a clear and appropriate purpose, for example where we identify a substantial risk, in order to focus resources efficiently and to provide better levels of support to providers in a more timely way.



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