

Prevent monitoring: Prevent review meetings FAQs

How do Prevent review meetings (PRMs) fit in with the accountability and data return (ADR) and wider monitoring?

As set out in our Monitoring framework, 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 ADR. The OfS will use PRMs more systematically and more widely than the Higher Education Funding Council for England (HEFCE) did, and not solely in relation to particular outcome judgements, but this does not constitute an inspection regime; rather it is an opportunity to gain broad assurance of ongoing implementation of the duty by providers across the sector, and, where there are concerns, for providers to give evidence in relation to these areas. They will also enable us to identify and share best evidence and case studies, and identify areas where further support may be required. However, it should be noted that these areas will be non-prejudicial to a compliance outcome and won't therefore form part of the outcome letter.

Our approach builds on our experience of PRMs under previous monitoring frameworks, and has been refined and developed following consultation with providers at workshops in summer 2018 and in consultation with key sector stakeholders. During autumn 2018 we ran a pilot programme to test the PRM process in practice with a small but diverse range of providers, and have incorporated the provider feedback and our learning from this exercise in to the process.

Why have we been selected for PRM?

We will use PRMs where we have concerns triggered by particular circumstances, but also more widely across a representative sample of providers each year. PRMs will be held with those providers considered to be at 'higher risk', and those with recent substantial material changes of circumstance or significant potential serious incidents causing concern. In these cases we will seek assurance around the areas which have triggered such an assessment, as well on the provider's compliance with the Duty overall. All new entrants to the sector will typically undergo a PRM within one year to test a baseline of compliance.

Additionally, within each year, a random representative sample of other providers will be subject to a PRM. The representative sample will be chosen randomly but weighted to reflect the diversity of the sector, in terms of geography, size, governance structure and specialism of provider. A proportionate number of providers will be selected from each group.

Overall we expect to conduct PRMs with no more than 10 per cent of all providers in any given year. Subject to their PRM compliance outcome being positive, a provider will not be selected again for another PRM within three years. However if a provider has been assessed as 'higher risk' through the OfS risk assessment process this will result in selection for a PRM. 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 autumn 2019.

We have been identified as 'high risk'. How did you reach this decision?

The OfS will hold PRMs with all providers assessed as being at 'higher risk' of non-compliance with the Duty. This may include situations where, because of their context, individual providers face greater local challenges that may pose an increased risk of people being drawn in to terrorism. The OfS risk assessment process will draw on a number of evidence and information sources to reach a judgement about individual provider risk. This will include a track-record of compliance from HEFCE processes, information and conclusions drawn from core processes under the OfS Monitoring framework such as the data and accountability return, and initial or ongoing monitoring of registration conditions where appropriate. The OfS will also receive information from Prevent

partners about local risks, wider risks and threats, to understand whether each individual provider's response when implementing the duty is both proportionate and reasonable.

We will formally notify providers assessed as 'higher risk' of their risk status when they are notified of their selection for a PRM. We will outline the nature of the risks identified in relation to whether these are related to non-compliance or to factors external to the provider that present an increased risk of someone being drawn in to terrorism. We may not be able to provide specific information shared with us by statutory partners about external risk factors; however an appropriate level of briefing about these threats and risks may be obtained by providers from local Prevent partners. Indeed, the statutory guidance is clear that providers should engage with Prevent partners, in particular the Department for Education's Further Education and Higher Education Prevent Coordinators, and we would expect these relationships to be a primary source for information about local risk to inform individual Prevent risk assessments that take into account contextual factors, such as local risks.

Where a PRM has led to a change in a compliance judgement, this could in turn result in a change in the provider's risk assessment and lead to another PRM as a result. For example a 'low-risk' provider that has been subject to a PRM and has been deemed to be at high risk, due to a number of significant further actions being required from the process, is likely to undergo a further PRM because of its heightened risk status.

What should we expect when we are notified that we have been selected for a PRM?

The PRM process will take approximately five weeks from start to finish. We believe that by giving providers limited notice of a PRM, this will strike a balance between providing sufficient time to prepare and ensuring the PRM is an accurate test of compliance.

In preparation for the PRM, providers will be invited to agree the proposed meeting agenda, and will be asked to submit certain information to the OfS. This will include a copy of the provider's most recent risk assessment and action plan, and any key Prevent-related policies not previously submitted to the OfS or HEFCE.

The PRM structure will be largely dependent on the rationale for the provider's selection, as well as the content of the self-assessment, and will be directly related to areas of statutory guidance. The meeting will include the provider's Prevent lead and any other members of staff who play a key role in the implementation of the duty, such as welfare leads or members of Prevent steering groups. Dependent upon the context of the provider, we may request other members of staff and representatives of the governing body or the student body, for example the students' union, to be present on a case-by-case basis.

The PRM itself will consist of semi-structured questioning. It will cover each of the key areas of the duty, using various methods to gain assurance such as in-depth explanations of how policies and processes interact in practice, stress-testing of policies and processes using hypothetical scenarios, or discussions about case studies.

Following the meeting, we will issue an outcome letter within five working days to the provider's accountable officer, its Prevent lead and chair of the governing body or equivalent, as a formal record detailing how we have gained assurance against each element of the duty and providing an outcome judgement. The letter will also highlight areas of good practice, and may suggest areas where providers could make their implementation more effective. Where we consider that we may need further information or clarification to gain assurance, the timescale for issuing the letter may be extended; however, we will make this clear at the time.

What are the possible outcomes following a PRM?

The PRMs are intended to be able to give an appropriate level of assurance to the OfS without further evidence being needed in the majority of cases.

Following the PRM we will issue an outcome letter that will specify one of three possible outcome judgements: 'demonstrates due regard', 'further actions needed', or 'does not demonstrate'.

Providers that demonstrate due regard may still receive feedback recommending certain actions for the provider to take that were identified through the PRM.

Where we identify 'further action needed', a provider will be given an action plan which, if completed successfully (usually within four months), will lead us to revise our judgement that the provider is 'demonstrating due regard'. However if concerns remain around a provider's progress with the action plan within the specified timeframe, we may choose to initiate our non-compliance process and revise our judgement to 'does not demonstrate' and formally commence our non-compliance process as outlined in the monitoring framework.

The PRM outcome letter will offer an opportunity for providers to report any factual inaccuracies or to clarify any aspects of the summarised evidence contained therein. In relation to timescales for completion of actions resulting from the PRM itself, any exceptional or extenuating circumstances that may affect progress should be raised with the OfS at the earliest opportunity and an appropriate alternative timescale agreed between the OfS and the provider.

On completion of the PRM process the OfS will refresh its risk assessment for each individual provider to take account of new evidence received and the most up to date compliance outcome judgement.

We are a small provider – are we being assessed to the same standard as a larger provider?

The monitoring framework outlines how we will continue to take each provider's context, scale and complexity into account as part of our monitoring approach, including PRMs, to ensure we make proportionate decisions. This will include the level of evidence we deem to be reasonable and appropriate for each provider, and will influence how we structure the PRM itself. Our monitoring framework is not a 'one size fits all' approach, but one that continues to challenge providers to comply and that assures government and the public.