

Office for  
Students



# Prevent monitoring accountability and data returns 2017-18

Evaluation report

Reference OfS 2019.22

Enquiries to [mark.hilton@officeforstudents.org.uk](mailto:mark.hilton@officeforstudents.org.uk)

Publication date 21 June 2019

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# Introduction

This report:

- analyses initial sector-level data from Prevent accountability and data returns (ADRs) submitted in December 2018
- sets out the findings of a recent (spring 2019) evaluation of the ADR process
- confirms that there will be no substantive change to the December 2019 ADR process and requirements.

1. This report analyses accountability and data returns (ADRs) covering activity relating to the Prevent duty for the 2018-19 academic year. The returns were submitted to the Office for Students (OfS) by higher education providers in December 2018.
2. The report also sets out the conclusions of the OfS's recent evaluation of the new ADR process and requirements, and signals that there will be no substantive change to the December 2019 ADR process and requirements.
3. The report draws on a number of quantitative and qualitative datasets collected through the ADR process, and through engagement with a range of individual providers and sector body representatives.

## Background to the Prevent monitoring of higher education providers

4. The Prevent duty became a legal requirement for higher education providers under the Counter Terrorism and Security Act in 2015. Providers have been required to 'have due regard to the need to prevent people from being drawn into terrorism'.
5. The Secretary of State for Education delegated to the Higher Education Funding Council for England (HEFCE) the role of monitoring compliance of the Prevent duty in higher education in England between 2015 and 2018. The OfS took over that responsibility in April 2018, replacing HEFCE as the higher education regulator in England.
6. HEFCE implemented a monitoring framework to assess providers' compliance with the Prevent duty, which required providers to submit detailed annual reports on their implementation of the Prevent duty. These included evidence of working collaboratively with local Prevent partnerships, and the implementation of core Prevent-related processes such as external speakers and events policies. Providers were also required to provide information on numbers of staff undergoing Prevent training, the numbers of events or speakers referred to the highest decision maker according to their policy, and Prevent-related welfare case management.
7. The reports were approved by the providers' governing bodies and proprietors. They were used as the basis to sign separate accountability declarations to HEFCE that they were demonstrating due regard to the Prevent duty and had complied with the expectations of the monitoring framework. They were submitted to HEFCE alongside a declaration that the

governing body or proprietor was satisfied that their institution was showing due regard to the Prevent duty.

8. The first three years of monitoring showed a high compliance rate across the sector: there was strong evidence that providers had successfully embedded Prevent within their wider welfare policies and procedures.

## **A more risk-based approach**

9. The OfS's approach to Prevent monitoring, while building on the HEFCE framework, also takes it in a new direction. In 2018-19 we implemented 'Prevent duty: Framework for monitoring in higher education in England 2018-19 onwards' (OfS 2018.35),<sup>1</sup> a strengthened, more risk-based monitoring framework. This change was in keeping with general good practice of keeping regulatory requirements under regular review, and with our duties under the Higher Education and Research Act 2017 to use OfS resources effectively and efficiently.
10. The new framework reflects the OfS's broader approach to regulation. It upholds and maintains baseline compliance requirements, focuses regulatory engagement where we consider there is risk of non-compliance, and seeks to reduce regulatory burden for compliant providers.
11. In summer 2018 we ran a soft consultation exercise on the ADR and the other components of the new monitoring framework. We invited a range of providers to comment on our intended approach, and the definitions we proposed to use. There was broad support for both.
12. The core elements of the new framework are:
  - an annual accountability and data return (for all established providers)
  - an ongoing programme of Prevent review meetings (for higher-risk providers, and a random representative sample of other providers)
  - ongoing assessments of changes of circumstances and serious incidents (for all monitored providers)
  - detailed assessments of Prevent-related policies and processes (for providers new to the system).
13. A separate assessment of the risk of future non-compliance runs in parallel with these core monitoring processes. This enables us to focus our regulatory engagement with providers through heightened monitoring, for example through Prevent review meetings.
14. The ADR replaces the annual report. Under the prior system, high rates of compliance with the Prevent duty, and the fact that providers had embedded Prevent into their overall safeguarding approach, had led to little new information being reported. This made us conclude that a detailed annual report was no longer necessary.

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<sup>1</sup> Available online at [www.officeforstudents.org.uk/publications/prevent-duty-framework-for-monitoring-in-higher-education-in-england-2018-19-onwards/](http://www.officeforstudents.org.uk/publications/prevent-duty-framework-for-monitoring-in-higher-education-in-england-2018-19-onwards/).

15. 2018-19 has been a transitional year, and we recognise that providers will need time to respond to the OfS's revised Prevent and wider regulatory requirements. We are using this period to test and evaluate the effectiveness of our evolving approach to monitoring through consultation with the sector and representative bodies, and to ensure it provides the necessary level of assurance to government and the public.

## **ADR 2017-18: Requirements and process**

16. The ADR is a key element of the OfS's risk-based approach to monitoring the implementation of the Prevent duty by providers. It is designed to assure us that governing bodies and proprietors are exercising appropriate oversight of their organisations' approaches to delivering the Prevent duty. It also allows us to check that providers continue to demonstrate compliance in key areas such as staff training, appropriate use of external speakers and events policies, and safety and welfare case management.

17. The reporting period for the ADR covered the period between 1 August 2017 and 31 July 2018. The ADR consisted of two parts:

- a. A short accountability statement from the governing body or proprietor of a monitored provider, outlining the internal mechanisms and controls they used for assurance in order to sign off accountability declarations.
- b. A data submission consisting of datasets and accompanying contextual explanations relating to three core areas of the Prevent duty (external speakers and events, training, and welfare case management), to provide the OfS with assurance that these continue to be implemented appropriately.

18. We decided to expand the data requirements for welfare and external speakers and events to help us better understand how providers are dealing with these areas in practice. On events, for example, we asked for: the number (or an estimated number) of events that were approved; the number of events that were approved with conditions; and the number of event requests that were rejected. This additional information gives a more insightful picture of how events policy is delivered in practice, and provides us with assurance that providers are giving sufficient regard to freedom of speech when implementing the statutory Prevent duty.

19. We also asked providers for data on the number of welfare cases, not just those that were Prevent-related or Channel referrals. Previous monitoring returns suggest the numbers of Prevent and Channel referrals made by higher education providers are an extremely low proportion of the number made overall, and that a number of providers did not report any Prevent-related welfare concerns<sup>2</sup>. However, as part of our Prevent monitoring role, we require evidence from providers that they have effective welfare policies and processes in place which they are following in dealing with Prevent-related cases. We therefore requested data on non-Prevent-related welfare cases in our Prevent monitoring capacity, to satisfy ourselves that providers were using their policies to identify and deal with safeguarding concerns.

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<sup>2</sup> See [www.officeforstudents.org.uk/publications/monitoring-of-the-prevent-duty-2016-17-progress-report-and-future-development/](http://www.officeforstudents.org.uk/publications/monitoring-of-the-prevent-duty-2016-17-progress-report-and-future-development/).

20. As 2018-19 was a transition year, we informed providers that did not yet have the relevant data collection systems in place that we would accept null returns this year.<sup>3</sup>

21. We assessed the ADR submissions between December 2018 and February 2019. Our assessments focused on:

- whether governing bodies had proper oversight of their organisation's approach to Prevent
- evidence of continued provider activity in key areas.

## **Governing body and proprietor oversight**

22. In assessing ADR accountability statements we sought to establish what checks and mechanisms providers had put in place to help their governing bodies and proprietors understand their Prevent-related activity, and to judge its appropriateness. These might include one or more of the following:

- a. Standard items or discussions at senior management or executive-level meetings.
- b. Reports to governing bodies on the implementation of safeguarding and external speaker processes.
- c. Steering Prevent activity from a relevant committee, e.g. a safeguarding committee, reporting to senior managers or the governing body itself.
- d. Examples of engagement with multi-agency Prevent partners, such as sitting on a local Prevent or safeguarding board, or meetings with Department for Education Co-ordinators or other related partners.
- e. Review of key Prevent-related policies and documents such as risk assessments, external speakers or safeguarding policies.
- f. Reviews or audits carried out by the provider, either internally through an audit committee or through external auditors.
- g. Examples of continued staff training, where appropriate.

## **Provider activity**

23. We looked at the data submitted, and at the accompanying contextual explanations, to check whether policies and processes were being deployed appropriately, and that staff continued to be trained. We also looked at previous years of data to understand patterns of activity, so that we were not drawing conclusions from one year's worth of data, or individual datasets in isolation. We examined the data alongside the accountability statements to check compatibility: for example, to ensure that a provider's explanation of its external speakers process was supported by the data.

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<sup>3</sup> See [www.officeforstudents.org.uk/advice-and-guidance/student-wellbeing-and-protection/counter-terrorism-the-prevent-duty/how-we-monitor](http://www.officeforstudents.org.uk/advice-and-guidance/student-wellbeing-and-protection/counter-terrorism-the-prevent-duty/how-we-monitor).

24. Our assessment approach operated in a similar way to the previous annual reporting exercise in that our expectation of the evidence submitted by any particular provider would be proportionate to its operating context. We therefore expected to find a different level of activity in the data returns at, for example, a multi-faculty provider with a large student and staff body, compared with that at a small autonomous college operating within a collegiate university. Similarly, we expected different types of checks and oversight to appear in the accountability statement.
25. Having reviewed the data submission and accountability statement together, we made a judgement on whether a provider was demonstrating due regard to the Prevent duty.
26. We did not query provider submissions unless there were substantive issues with their return, such as dataset omissions (other than those specified in paragraph 19), technical inaccuracies, or insufficient information from the governing body. On the basis of their submissions, providers were given one of three judgements:
- a. **Demonstrates due regard:** There is sufficient evidence of active implementation of the Prevent duty.
  - b. **Further action(s) needed:** Further action is needed to demonstrate active implementation.
  - c. **Does not demonstrate due regard:** There is inadequate or no evidence of active implementation, or there is significant evidence of non-implementation of policies and processes.

## Provider concerns about ADR requirements

27. During the ADR process, some providers queried our requirement for them to provide data on numbers of welfare cases as a proxy for implementation of the statutory duty. Their concerns focused on the legal basis for our request, our intention to use proxy data, and the definitions we used (there were differing views of what should be characterised as 'welfare'). Concerns were also expressed about the data burden for those providers with large student populations.
28. We received a small number of enquiries from students about the data return requirements. Some said their provider had told them that the OfS wanted to know numbers of student cases related to mental health, and were worried that this might allow individual students to be identified. We were able to reassure them that, as the ADR guidance makes clear, we were not collecting data or information that could identify individuals, and that we had not specifically asked for information on mental health cases.
29. Some students' unions expressed concerns that requests for student welfare data could be perceived as 'spying on students'. They were worried that some students might choose not to engage with student support services as a result.
30. We are grateful to students and providers for this helpful feedback. Our approach to addressing the concerns they raised is set out in paragraphs 51 to 54.

# 2017-18 ADR findings

31. This section provides analysis from the ADR assessment process. It covers compliance judgements made from the ADR and thematic findings from both the data return and the accountability statements.

## Compliance

**Table 1: Compliance**

	<b>Demonstrates due regard</b>	<b>Further actions needed</b>	<b>Does not demonstrate due regard</b>
Number of providers	307	1	1

32. We concluded from our assessment of the data returns and accountability statements that the vast majority of providers continued to undertake appropriate activity in essential areas of the Prevent duty, and that governing bodies were providing robust oversight. In all but two cases, providers demonstrated due regard to the Prevent duty.

33. One provider was judged as having further actions needed. This provider did not offer any substantive information on the checks and mechanisms in place to assure the proprietor that it was demonstrating due regard to the Prevent duty. This provider left our monitoring regime at the conclusion of the ADR as it had been de-designated for student support.

34. One provider did not demonstrate due regard. This provider failed to supply us with any information despite several requests following the December 2018 submission date. We have referred the provider to the Department for Education, having first taken the requisite escalatory steps in the non-compliance process, outlined in OfS 2018.35 paragraphs 91 to 94.

35. This second provider is not registered with the OfS: it currently holds specific course designation. We have separately informed the Department for Education of its failure to demonstrate due regard is in breach of its terms and conditions of designation.



# Thematic findings and data tables

## Welfare case management

**Table 2: Welfare case management**

Dataset	Number reported	Number of providers	Sector percentage
Number of welfare cases referred for specialist advice and support	83,419	202	66%
Number of Prevent-related welfare cases escalated to the point at which the Prevent lead became involved	174	77	25%
Number of Prevent-related welfare cases which lead to external advice being sought from local Prevent multi-agency partners	122	68	22%
Number of formal referrals to Channel	15	15	5%

Note: See Annex A for definitions of all datasets. 'Sector percentage' refers to the percentage of total providers responding to the particular question.

36. The majority of OfS-funded providers did submit data on the broader welfare cases in line with the definition used. A small number of these providers stated that they could not report these cases because of difficulties in meeting data collection timescales. We accepted this explanation in line with our ADR guidance. We queried the remainder of these providers that had not provided that explanation.
37. We took decisions on whether to query smaller providers' welfare data on a case-by-case basis, taking account of previous data returns and explanations given in the context box in the data survey to ensure that our approach to the ADR was broadly proportionate. This data was used solely to give us assurances that individual providers were complying with the duty, i.e. that Prevent policies were being actively implemented. It has not been used to draw any conclusions about the implementation of welfare policies more broadly at either provider or sector level.
38. The number of Prevent-related cases where action was taken by providers is similar to that reported in 2016-17: in 183 cases the Prevent lead became involved, and in 122 cases advice was sought from external Prevent partners. (Note that these figures do not represent the total number of Prevent-related welfare cases, only those judged sufficiently serious to be escalated to the provider's Prevent lead.)
39. Finally, escalation routes can be different depending on providers' individual contexts, which can have a particular impact on the data reported under welfare. For example, autonomous colleges<sup>4</sup> use their respective university's central referral mechanisms to escalate any Prevent-related welfare concerns, so any cases would be counted in the central university's dataset.

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<sup>4</sup> This means the autonomous schools, halls and colleges of the universities of Cambridge, Durham and Oxford, which are all individually subject to the duty in addition to the central universities.

## Channel referrals

40. The number of referrals to the Channel programme reported to the OfS in 2017-18 was 15. This was a decrease from 24 in 2016-17, and 30 in 2015-16. This continues to suggest that the number of referrals made by higher education providers makes up an extremely low proportion of Channel referrals overall. The Home Office produces statistics on the number of Channel referrals, although its reporting periods cover financial rather than academic years. In its latest report, 2,426 Prevent referrals were made by the wider education sector to multi-agency partners in the financial year (FY) 2017-18, 1,976 in FY 2016-17 and 2,539 in FY 2015-16 respectively.<sup>5</sup>
41. The number of referrals to Channel reported, alongside the number of providers that reported no Prevent-related cases (220 out of a total of 309), suggests that having broader data around welfare cases helps to provide the OfS with evidence of activity in the absence of Prevent-related cases being identified and managed.

## External speakers and events

**Table 3: External speakers and events**

Dataset	Number reported	Number of Providers	Sector percentage
Number of events and speakers approved	59,574	253	82%
Number of events and speakers approved with conditions or mitigations	2,153	65	21%
Number of events and speakers referred to the highest decision maker in the provider's process	314	68	22%
Number of events and speaker requests rejected	53	17	6%

Note: 'Sector percentage' refers to the percentage of total providers responding to the particular question.

42. As highlighted in paragraph 17, we collected a broader set of data on external speakers than in the past, to help provide a greater understanding on the implementation of providers' external speakers and events policies. This data returns make clear that, in 2017-18, providers approved a significant number of requests for events taking place on campus: only 0.09 per

<sup>5</sup> See 'Individuals referred to and supported through the Prevent programme: April 2015 to March 2016' (available at <https://www.gov.uk/government/statistics/individuals-referred-to-and-supported-through-the-prevent-programme-april-2015-to-march-2016>); 'Individuals referred to and supported through the Prevent programme: April 2016 to March 2017' (available at <https://www.gov.uk/government/statistics/individuals-referred-to-and-supported-through-the-prevent-programme-april-2016-to-march-2017>); 'Individuals referred to and supported through the Prevent programme: April 2016 to March 2017' (<https://www.gov.uk/government/statistics/individuals-referred-to-and-supported-through-the-prevent-programme-april-2017-to-march-2018>). '2,426 Prevent referrals' denotes the population listed in the Home Office's official Channel statistical reports, although no definition is provided.

cent of the total number of event requests made under an external speakers process were refused permission.

43. Events and speaker requests are risk-assessed in line with a provider’s policy. Where risks are identified, providers may approve an event subject to appropriate mitigations or conditions. These may include putting in place experienced chairs to manage and moderate events where needed, ticketing events, or having senior staff present to monitor an event and intervene where necessary. The one set of data we have also collected previously (and with which we can make comparisons) relates to the number of times that an event or request for speaker was referred to the highest decision maker. In 2017-18 314 events or speakers were referred, a 16 per cent increase from 271 in 2016-17.
44. The OfS remains mindful of the need to continue to monitor this area of the duty. However, we currently see no cause, in the information being reported to us, for concern that the sector or individual providers are not balancing their freedom of speech responsibilities with the Prevent duty, or indeed other legislation such as health and safety. The data also shows, to a degree, that at both provider level and sector level conditions are being used to mitigate risks when approving applications for events. There is also clear evidence of internal escalation of events and speakers where significant risks had been identified. This appeared to be proportionate at individual provider and sector level.

## Training

**Table 4: Training**

Dataset	Number reported
Number of staff identified as key to Prevent delivery	66,478
Number of key staff receiving induction Prevent training	27,391
Number of key staff receiving refresher Prevent training	8,024
Number of staff receiving broader welfare and safeguarding awareness training or briefing	73,860

45. Under the previous monitoring approach, HEFCE had been assured that providers had completed their initial training plans by the end of the 2016-17 academic year. The OfS’s recent ADR exercise shows that providers are now supplementing these training plans by refreshing training for existing staff previously trained in Prevent, and by ensuring that any new staff in a Prevent-related role receive training as part of their orientation.
46. We introduced a further data requirement for the 2017-18 ADR exercise, to distinguish between delivery of training for staff identified as key to delivering the Prevent duty, and for those who may need to be broadly aware of how to report concerns about an individual’s safety or welfare. This dataset shows that a larger staff population is receiving broader awareness-

raising in relation to safeguarding issues that help to support the delivery of the Prevent duty. From this, we can take assurance that staff know how to report concerns where appropriate.

47. Feedback from a small number of providers indicates that there has been some confusion around what 'broader awareness-raising' means. We have amended the definition of this dataset, to further clarify that this refers to a broader population of staff who need to be aware of institutional Prevent policies.

## **Findings from accountability statements**

48. In general, we found that providers understood the requirements of the accountability statement. This was shown in the accompanying narratives, which detailed the oversight arrangements in place to advise and inform governing bodies and proprietors that their organisations were demonstrating due regard.

49. Providers described a number of types of control or mechanisms through which governing bodies were provided with that assurance. These included, in different contexts:

- internal Prevent working groups or committees which met regularly
- clear reporting of activity to senior management and leadership teams, including separate reports or similar documents to governing bodies
- evidence of the continued implementation of core Prevent-related policies
- reviews of Prevent policies by committees and senior managers
- confirmation that Prevent risk assessments had been updated, including through internal audits.

50. There were, however, some areas where we believe further development is required from the sector as a whole in the 2018-19 accountability statement. These were as follows:

- a. A number of accountability statements did not explicitly state that their Prevent risk assessments had been updated in the course of the reporting period, in compliance with the OfS ADR guidance.
- b. Some smaller providers tended to rely on personal statements from the chair of the governing body on how they were ensuring that they were overseeing their organisation's implementation of the duty, rather than the governing body as a whole. While this may be appropriate for the proprietor of an organisation where there is no separate governing body, where a governing body exists its entire membership is legally responsible for meeting the requirements of the Prevent duty. Therefore, the entire membership of the governing body should examine what internal controls and mechanisms they could reasonably use to give them assurance on implementing the duty as a group, rather than relying solely on the chair.

## ADR evaluation

51. We undertook an evaluation of the ADR both in response to the concerns mentioned in paragraphs 27 to 30 of this report, and as part of our wider commitment to evaluating the robustness of our Prevent monitoring framework, as set in OfS 2018.35 paragraph 110.
52. The scope of the evaluation was twofold: first, to explore the concerns raised by providers in autumn 2018 around our requirements and approach to the ADR, and second, to determine our response to these concerns.
53. We held a roundtable with sector representative bodies and partners, and a separate workshop with a small but diverse sample of providers, ranging from large multi-faculty to small and specialist providers. We also engaged with a number of autonomous colleges (including those that had raised concerns). We engaged further with providers that did not supply welfare data, to understand what the barriers may have been to providing us with this data.
54. The key findings of this evaluation are as follows:
  - a. There was **broad support** for our adoption of a **risk-based monitoring approach** in the ADR. Smaller providers (particularly autonomous colleges) strongly welcomed the proportionality of the exercise compared with the previous annual reporting regime.
  - b. There was **support** for our rationale for **requesting welfare data**. We reiterated that our approach was to avoid making judgements of compliance solely on the basis of whether a provider had any Prevent-related welfare cases, given the numbers of providers that reported no Prevent-related cases under the existing datasets. However, we recognise we could have articulated this point more clearly in our communications and guidance, and we will do so in future.
  - c. There was also a clear view that the ADR **should not be changed substantially** in the first and second year. However it was felt that the ADR should be reviewed once more data is collected, in around two to three years' time. Providers felt that the requirements of the return were reasonable, and that the OfS should provide certainty to providers and therefore not look to make early changes to the data requests in particular.
  - d. There was broad **support for the definition** previously used by the OfS for collecting the **welfare data**. Providers attending our workshops considered the definitions we used appropriate, and felt that they would be able to offer us data under our existing definitions. It was recommended that we encourage providers to make full use of the context boxes accompanying each dataset to explain their data, and how they have interpreted the definition where it did not entirely match their own.
  - e. The welfare dataset continues to pose **some challenges**, particularly around the use of **the term 'welfare'**. Despite the support expressed for our definitions, providers noted that the term is problematic given that there is no widely accepted definition in the sector of what 'welfare' means and what constitutes welfare provision. We considered using 'safeguarding' instead. However, this word is generally used to describe legal protections in relation to children and vulnerable adults, so would not necessarily capture Prevent-related activity.

- f. Providers wanted the OfS to better articulate why **we are asking for broader welfare information** beyond Prevent-related cases and what it is being used for. We recognise that we could have been clearer in setting out how we were using the data in drawing conclusions around Prevent compliance. This lack of clarity may have led to the concerns raised last autumn. We hope that this report helps to address those concerns, and we will ensure that our forthcoming ADR guidance gives a fuller explanation of how we will use this and other information and data.
- g. The need to **protect the anonymity** of individual welfare cases was strongly emphasised. There was detailed discussion in the roundtables and workshop about how the OfS could best allay such concerns, and ensure that information submitted to us is not personally identifiable. Providers had a clear preference for the current data-led return (in contrast to the previous annual reporting exercise operated by HEFCE, which was more narrative and case-study based), as they felt this better protected anonymity and reduced the risk of individually identifiable information being shared. However, there was a strong recommendation that the OfS should provide ranges within datasets to help further mitigate the risk that individuals could be identified. We will ensure that we put in appropriate ranges in the welfare datasets where possible for the 2018-19 return.
- h. There was a call for the OfS to be **more proactive in communicating** with providers and the sector about Prevent in general, and the ADR in particular. It was felt that this would help to avoid misinterpretation and unnecessary concern. There was also strong interest in, and a call from student service practitioners for, the OfS spelling out in more detail its broader mission and approach to student welfare and safeguarding, and explaining how Prevent relates to it.

## 2018-19 ADR

The deadline for the ADR for the 2018-19 academic year will be **noon on Monday 2 December 2019**. Submissions should be made via the OfS portal. We will issue updated guidance in summer 2019.

- 55. We are satisfied, on the basis of our findings from the December 2018 return and of this evaluation, that the ADR is fit for purpose as a compliance exercise. We therefore do not intend to make any fundamental changes to the requirements for the next such exercise. We also consider that the dataset requirements reflect necessary and proportionate expectations of providers under our general duties.
- 56. However, building on the feedback received, we will look to introduce ranges for welfare cases for the next return, while ensuring that the data remains meaningful in providing the OfS with assurance of how providers are implementing these areas of the statutory duty.
- 57. As noted in paragraphs 36 to 37, while our evaluation found that most providers were able to submit data on welfare cases, some considered that our definition was problematic in terms of producing such a dataset. We intend to retain the broad definition of 'welfare cases' in our dataset on welfare case management, so that as many providers as possible can produce and provide meaningful data. We will make a number of minor amendments to allow for the

inclusion of cases that may be managed by internal committees, as a further example of how a provider could define that dataset beyond those reporting to a designated safeguarding lead or central student services. However, where there are still challenges for providers in producing data that exactly meets this definition, we will encourage them to explain their dataset in the context box as part of the wider explanation of their data.

58. We can therefore confirm that the datasets will not change significantly for the December 2019 ADR data return. We can also confirm that all datasets are a mandatory requirement of the ADR. Non-submission in 2019-20 will have implications for a provider's compliance with the ADR. This may mean that we judge such a provider as having 'further actions needed' (and being subject to an action plan or a Prevent Review Meeting), or consider whether we will initiate the non-compliance process described in OfS 2018.35 paragraphs 88 to 94. This could in turn lead to our exercising our legal powers for requesting information under sections 8(1)(b) or 62(1) of the Higher Education and Research Act 2017, or other measures under that process.
59. The deadline for submission of the ADR for the 2019-20 academic year is **noon on Monday 2 December 2019**. We will publish updated guidance for submission via the OfS portal before the start of the next academic year.

## 2019 Prevent review meeting programme

60. The OfS has begun its 2019 programme of Prevent review meetings. We conduct these meetings to ensure that individual providers are implementing the Prevent duty, to provide assurance at sector level of compliance with the duty, and to identify good practice and 'what works' to support our sector-level role of promoting continuous improvement in implementing the duty<sup>6</sup>.
61. We will be meeting with those providers assessed as at higher risk of future non-compliance with the Prevent duty; with a randomised representative sample of 10 per cent of providers not considered to be at higher risk; and with providers that are new to Prevent, as part of their baseline compliance assessment.
62. We will publish the sector-level findings from our programme in autumn 2019.

## Thematic reviews

63. We will be conducting two thematic reviews as part of our sector-level role, on the basis of our assessment of the ADRs and previously reported data, to promote continuous improvement from providers on their implementation of the Prevent duty. These are:
- a. **Prevent-related welfare cases and referrals.** Our collection of data around Prevent referrals over the past three years suggests that Prevent-related cases, and particularly those that are referred to multi-agency partners, make up a very low proportion of referrals within the education sectors. This thematic review will explore the approaches taken by providers; providers' experience of managing cases and how decisions are made around whether to make an external referral; how they are supported on making cases; identifying

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<sup>6</sup> The purpose and structure of these meeting are set out in OfS 2018.35 paragraphs 51 to 63.

good practice; and whether the numbers of referrals being made are appropriate within the sector.

- b. **Prevent-related training for staff.** The diversity of the sector has naturally led to a diversity of approaches on staff training on Prevent. This review will look in detail at the approaches taken by providers to Prevent-related training; what future sector training needs there may be; and what approaches providers are taking to evaluate the effectiveness of their training. This will help us to assure ourselves that the sector is continuing to deliver Prevent-related training effectively.

64. Both reviews will examine data submitted to us in previous compliance returns (e.g. the ADR), evidence from our Prevent review meeting programme (see paragraphs 60 to 62), and surveys and interviews with key Prevent partners. We will also explore how we can best engage with students to support these reviews.

65. Findings from the thematic reviews will be published in autumn 2019. They are likely to inform further information, advice and guidance for the sector, and our future expectations of providers through core compliance assessments such as Prevent review meetings or changes of circumstance.



## Annex A: Datasets and definitions

Dataset	Definition
<b>Welfare case management</b>	
Number of welfare cases referred for specialist advice and support	This refers to cases which have been 'actively managed', i.e. a provider has taken action in response to a welfare concern or need. This would normally include referrals reported to and managed by central student services, a welfare or safeguarding committee, or a designated safeguarding or welfare lead. It does not include self-referrals by students or staff, or other referrals where the provider has taken no action. This data provides the Office for Students (OfS) with assurance that providers are implementing their welfare policies or processes in the absence of any Prevent-related concerns.
Number of Prevent-related cases escalated to the point at which the Prevent lead has become involved	This refers to cases reported to the provider's Prevent lead (or appropriate group or committee where this does not reflect its referral process). This provides some information and assurance that the provider's welfare processes are being implemented.
Number of Prevent-related cases which lead to external advice being sought from Prevent partners	This refers to cases where a provider has sought advice and information from a multi-agency partner for a Prevent-related case e.g. a Department for Education Co-ordinator. This provides some information and assurance that its welfare processes are being implemented, and that it is working effectively with Prevent partners.
Number of formal referrals to Channel	This refers to cases where a provider has made a Prevent referral to multi-agency partners, commonly known as a 'Channel referral'. This provides some information and assurance that a provider's welfare processes are being implemented and the appropriate referral pathways with multi-agency partners are in place.
<b>External speakers and events</b>	
Total number of events and speakers approved	The total number of events and speakers approved through a provider's external speakers and events process (i.e. not related to the academic curriculum). Note: there is a choice of providing an exact figure, or an estimate to the nearest 10. This contextualises the other data provided on events and speakers.
Number of events and speakers approved with conditions or mitigations	This refers to the number of events and speakers that have required some form of mitigation related to Prevent (or associated free speech) following a risk assessment as part of the speaker process.
Number of events and speakers referred to the highest decision maker in the provider's process	This refers to the number of events and speakers that have required a decision by the highest decision maker within the process, i.e. where the request has been escalated through the process. This provides information that the process is being implemented and concerns escalated where necessary.
Number of events and speaker requests rejected	This refers to the number of events and speakers that have not been approved through the process. This should include decisions on risk and on process. This will help inform how a provider is balancing its other legal duties in respect of Prevent.

<b>Staff training</b>	The number of staff reported in this section of the return should be returned as a headcount number.
Number of staff identified as key to Prevent delivery	The current number of staff the provider has identified as key in relation to Prevent. This provides further contextualisation of data submitted.
Number of key staff receiving induction Prevent training	Training related to their Prevent role or responsibility. This provides assurance that key staff are receiving training on the duty.
Number of key staff receiving refresher Prevent training	Refresher training related to their Prevent role or responsibility. This provides assurance that key staff continue to have skills and knowledge to support their role or responsibility.
Number of staff receiving broader welfare or safeguarding awareness training	The number of staff being made aware through guidance, advice or instruction of broader welfare or safeguarding policies. This provides assurance that staff are able to use relevant policies (i.e. to report concerns where they have them), or are being signposted to key staff.



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