

 <p><b>GIG CYMRU NHS WALES</b></p> <p>Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p><b>Policy / Procedure Approval Report</b></p> <p><b>Name of Meeting</b> Quality, Safety and Improvement Committee</p> <p><b>Date of Meeting</b> 18 July 2023</p> <p><b>Agenda item:</b> 6.1.2</p>
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### Section 1 - Policy / Procedure Information

<b>Policy / Procedure Title</b>	<b>Prevent Policy</b>
<b>Policy Lead</b>	Donna Newell Named Lead Safeguarding
<b>Lead Executive</b>	<b>Rhiannon Beaumont Wood</b>
<b>PHW / All Wales?</b>	<b>PHW</b>
<b>Date of last Review</b>	<b>May 2015</b>
<b>Is the current policy / procedure within review date?</b>	<b>Expired</b>
<b>Approving Body /Group</b>	<b>Quality, Safety and Improvement Committee</b>
<b>Version Number</b>	<b>2</b>
<b>Recommendation</b>	
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> that the Leadership Team have endorsed the Prevent Policy to the Committee</li> <li>• <b>Approve</b> the Prevent Policy</li> </ul>	

<b>Section 3 – Details of the Review:</b>	
<b>Background:</b>	
<b>Reason for review</b>	The Prevent Policy has been updated and reviewed in line with the review date. Amendments have been made to reflect the changes outlined in revised Prevent statutory guidance that was last updated in April 2021.
<b>Description/Assessment</b>	The Prevent Policy has been reviewed in line with the review date. To date the policy has been implemented across Public Health Wales. Its implementation has been monitored, an Annual Safeguarding Report provides assurance that the Policy is embedded within the organization with the procedures being adhered to
<b>Consultation</b>	
Has this Policy / Procedure been through the appropriate 28 day consultation process?	Yes, placed on the Consultation Database on the below dates.  Consultation details of the were sent to staff side representatives via email on 23 February 2023
Date range of consultation:	02/02/2023 – 03/03/2023
Please provide details of any feedback received and outline what changes if any were made to the document as a result:	Where appropriate comments were taken on board and incorporated within the draft document.
Had this policy / procedure been considered by any other groups?	Members of the Safeguarding Group Meeting has considered the document prior to it being submitted for approval.
If so, please provide detail of any comments / feedback or amendments made to the documents as a result of this	
<b>Impact Assessments</b>	
<b>Equality and Health Impact Assessment</b>	Completed

<b>Welsh Language Impact</b>	The Policy / Procedure will be translated to Welsh and available on the internet bilingually.
<b>Risk and Assurance</b>	Risks associated with this policy have been considered and are reflected on the divisional risk register as appropriate.
<b>Health and Care Standards</b>	This Policy / Procedure supports and/or takes into account the <u>Health and Care Standards for NHS Wales Quality Themes</u> Theme 2 - Safe Care Choose an item. Choose an item.
<b>Financial implications</b>	Financial implications have been considered and reflected in the EQIHA as appropriate.
<b>People implications</b>	Policy is applicable to all staff but does not impact on staff surveys.
<b>Socio Economic Duty</b>	

## 5 - Implementation

<b>Implementation plan (with timescales)</b>			
Next steps		Timescale	Responsible officer(s)
Approval			
Welsh translation		Within 3 weeks of approval	Quality, Nursing and Allied Health Professionals
Publish on PHW Intranet and internet		Within 1 week of receipt of Welsh translation	Board Business Unit

## 6. Dissemination

The policy and procedure will be distributed on the PHW website.