

THE SOUTHPORT INQUIRY

PHASE 2 OPENING STATEMENT ON BEHALF OF COUNTER TERRORISM POLICING HEADQUARTERS (CTPHQ)

References to DAC Evans's third witness statement are in the format [VE3/§16]; to her first and second statements as [CTPHQ000006/§58] and [CTPHQ000153/§15]; to documents disclosed on Relativity as [URN/§X]; to transcripts as [Date/Page/Lines], those of 14.10.25 being DAC Evans's Phase 1 evidence; and to the Phase 1 Report as [Report/Volume/Chapter/Paragraph].

Introduction

1. First and foremost, CTPHQ repeats the condolences it offered at the outset of Phase 1 to the families and friends of Elsie Dot Stancombe, Alice da Silva Aguiar and Bebe King, to the other children and adults attacked by AR on 29 July 2024, and to all those who continue to bear the effects of his crimes. The Chairman has emphasised that the victims and their families will be at the very centre of the Inquiry's work in Phase 2 [08.07.26/p6/7-9]; CTPHQ endorses that principle and approaches this phase in the same spirit. The first duty of policing is the protection of the public; that duty is at the heart of everything the Counter Terrorism Policing ('CTP') network exists to achieve.
2. CTPHQ welcomes the focused approach being taken to Phase 2, as captured in the four overarching Phase 2 Topics.¹ Given CTPHQ's role and experience, this opening statement necessarily concentrates on Topic 1, but CTPHQ will of course seek to assist the Chairman, however CTPHQ can, in relation to each of the remaining areas of focus.

¹ The Terms of Reference (ToR) for Phase 2, published on 13 April 2026, identify four areas for examination. **Topic 1** is the adequacy of arrangements in England and Wales for managing the risk from violence fixated individuals, including the effectiveness of multi-agency arrangements, their integration with wider safeguarding, the interventions which reduce risk, and whether other threat management systems hold lessons. **Topic 2** is the role of the internet and social media in influencing and enabling such individuals to prepare and carry out violent attacks. **Topic 3** is the effectiveness of current laws and systems for identifying, monitoring and disrupting their activities online. **Topic 4** is the effectiveness of policies, regulation and criminal enforcement in relation to the sale and possession of offensive weapons and bladed articles. These topics are subdivided into numbered issues in the Inquiry's Approach to the Phase 2 ToR [ILT000111].

3. As Counsel to the Inquiry ('CTI') has made clear, Topic 1 is not concerned with Prevent's efficacy generally, but with a narrower issue. Namely: whether Prevent is the right vehicle for managing the particular risk posed by individuals preoccupied by extreme violence, where ideology is not the primary driver, a cohort sometimes known as "Violence Fixated Individuals" ('VFIs') [08.07.26/p69/21 to p70/3]. Having surveyed relevant Prevent reviews published recently, CTI identified what he described as "*perhaps three fundamental questions*" which remain [08.07.26/p90/13-17]:
 - (i) whether, in the longer term, non-ideological "VFI" cases should sit within Prevent at all [08.07.26/p90/18-20];
 - (ii) whether change is needed to ensure that cases not taken on by Prevent and Channel have a clear pathway, one that is consistent nationally rather than varying with local arrangements [08.07.26/p91/12-17]; and
 - (iii) what the process should be for cases which, after triage, do not go to Prevent but need to go to some other body [08.07.26/p91/25 to p92/5].
4. Part One of this opening statement provides an outline of CTPHQ's response to these questions. This response is necessarily preliminary – CTPHQ does not seek to pre-empt the evidence to be heard by this Inquiry. But it is right to indicate at the outset where, in CTPHQ's experience, the evidence is likely to point:
 - (i) As to the first question, Prevent can and must properly retain those among the "VFI" cohort (appropriate terminology is explored further below) who are susceptible to being drawn into terrorism. But it cannot take primary responsibility for managing the wider cohort; at least not without significant legislative change, and additional resourcing and powers [VE3/§§57, 63, 89 and 90].
 - (ii) As to the second question, CTPHQ considers that change is needed to clarify the pathways open to cases not taken on through Prevent and Channel. Whether or not it is feasible to introduce one universally applicable process to all regions, it would clearly assist for there to be a single overall national strategy for the identification, assessment and management of this cohort [VE3/§§30 and 65].
 - (iii) The third question is the most challenging: it is one thing to identify that change is needed and another to know what change to implement. CTPHQ's preliminary view is that none of the existing structures could readily absorb the cohort in question, without changes to legislation, resourcing and national policy. This could also risk unintended

consequences for the system's ability to adequately perform their existing functions. CTPHQ therefore considers that a bespoke multi-agency structure is likely to be necessary [VE3/§§92 to 94]. Under Question 3 below, CTPHQ sets out some practical considerations which the Inquiry may wish to bear in mind if and when devising a proposal for one.

CTPHQ evidence in Phase 2

5. On behalf of CTPHQ, Deputy Assistant Commissioner Victoria Evans, the Senior National Coordinator for Prevent and Pursue, has provided a detailed witness statement for Phase 2 [VE3], her third to the Inquiry. She will give further evidence in person when the Phase 2 hearings commence in October.
6. CTPHQ has also assisted Dr Richard Taylor, National Clinical Lead of the Counter Terrorism Clinical Consultancy Service ('CCS'), to lend his expertise through his witness statement [DRT000010] and his participation in Seminar 1. Dr Taylor is not employed by CTPHQ and properly identifies the limits of his expertise within his statement; but the service he leads is commissioned by CTPHQ and much of his experience is drawn from the same casework. CTPHQ endorses Dr Taylor's evidence in full.

Terminology, and the need for operational clarity

7. In opening, CTI correctly observed that there is no single, formal, cross-Government definition for "VFIs", and that this may give rise to confusion, particularly in the absence of consistent categorisation for data collection purposes [08.07.26/p108/1-14]. The content of the first three Phase 2 seminars reinforced that observation.
8. The Phase 2 ToR define VFIs as "*individuals at risk of extreme violence, where ideology is not the primary driver*". CTPHQ recognises this definition (and similar interpretations of the term "VFIs"), but does not apply this term operationally [VE3/§16]. CTPHQ's position in this regard reflects an emerging consensus across Government that "violence fixation" may be better conceptualised as just one feature within a broader framework of "non-ideological extreme violence", or "NIEV", as opposed to being used as the name for a standalone offender cohort [HOM000964/§§156 to 159]. As CTPHQ understands it, however, "NIEV" is not a term upon which the Government has definitively settled as matters stand. This is not about semantics. This inquiry has shown how important it is to clearly define who falls within this group.

9. A shift away from a purely fixation-based term is not merely presentational. It reflects the emerging evidence. In August 2025, a CTPHQ Analysis and Research project assessed 1551 individuals matching the cross-Government working definition of “VFI” (as then in use), dip-sampled 21 cases and scored them against a literature review to test whether violence fixation was the causal driver of such violence or one of many factors [VE3/§27]. The single judgement made with high confidence was that: *“It is highly unlikely that violence fixation, when flagged in isolation, will act as a reliable predictor of an individual’s risk of mobilising to non-ideological extreme violence.”*
10. This research also indicated that the risk factors and warning behaviours of those who perpetrate such violence are the same as those of self-initiated terrorists [VE3/§28; VE/25].
11. CTPHQ recognises the limits of the above research project: it relied on a somewhat unstable cohort definition, could not draw on a single consistent category of data previously collected by forces, and relied on a partial (albeit sizable) return from the network (73% of forces) [VE3/§§29 and 31]. Nonetheless, CTPHQ notes that the research tends to accord with the views offered by the relevant academics and specialists who participated in the Inquiry seminars between 8-10 September 2026.
12. Three further names for the cohort were canvassed in the seminars. Professor Cassam, who considers “VFI” as defined by the ToR too broad to be useful, proposed “non-ideological violent extremist” (NIVE), because it identifies a type of person rather than a type of violence, and warned that the emphasis in “NIEV” upon violence intended to shock an audience could produce false negatives, there being nothing to suggest that AR required an immediate audience for his attacks [08.09.26/p23/1-22]. Mr Hall KC, the Independent Reviewer of Terrorism Legislation, was “rather attracted” to that analysis [09.09.26/p49/1-8]. Lord Anderson continued to use “VFI” in Seminar 2, but made clear that he intended to refer only to those falling within the existing and narrower FEVMCA category [09.09.26/p13/6-21; p14/10-22].² Dr Taylor was equally pragmatic, saying that the CCS “can work with” NIEV, though a clear definition is needed [08.09.26/p103/1-15]. Two further formulations emerged later. The Institute for Strategic Dialogue prefers “nihilistic violence”, being “violent acts lacking in ideological motivation and driven by a misanthropic worldview”, and treats it as a spectrum rather than a binary [15.09.26/p8/22 to p9/12]. “Nihilistic violent extremism” (NVE) is the label adopted by the FBI and the Department of Justice and has, as Professor Cassam explained,

² FEVMCA – Fascination with Extreme Violence or Mass Casualty Attacks

“become the standard label in the US” [08.09.26/p100/18 to p101/20]. Professor Smith noted the use of similar terminology by the Canada Centre [08.09.26/p49/23-25].

13. Like Dr Taylor, CTPHQ does not seek to arbitrate between the various positions. CTPHQ will adopt whatever terminology the Inquiry and Government consider appropriate. While the Inquiry is right to pursue the “conceptual precision” for which Professor Cassam argued, CTPHQ must invite equal attention to **operational clarity**.³ In CTPHQ’s assessment:

- (i) There should be one overarching term for the cohort, capable of consistent use across policing, health, education, and social care, so that the individual is described by reference to the same risk factor wherever they appear. CTPHQ has no particular objection to this overarching term being drawn from any one of the proposed options, whether “VFI”, “NIEV”, “NIVE”, or one of the nihilistic formulations such as “nihilistic violence” or “nihilistic violent extremism”.
- (ii) Within that overarching cohort, however, CTPHQ would strongly support a defined and narrower subgroup which is Prevent-relevant. FEVMCA (“fascination with extreme violence or mass casualty attacks”) currently performs that function [VE3/§17], and CTPHQ would be content for it or a successor term to continue to do so.
- (iii) Critically, the criterion for the subgroup referenced at (ii) above to progress through the Prevent system must under the current framework remain the statutory test, namely susceptibility to being drawn into terrorism.⁴ If the Chairman concludes that the Prevent statutory test ought to concern a wider group, this would in CTPHQ’s view require legislative change to the Prevent framework (and possibly the CONTEST strategy of which it is a part).

14. In this regard, CTPHQ endorses Lord Anderson’s view that FEVMCA remains a useful subcategory for Prevent-relevance purposes. In his contribution to Seminar

³ Professor Sizoo made a related point at Seminar 3, warning against what he termed “label-myopia”: where a label risks becoming a lens through which the past is read, when what matters is not the label but what went before and what may happen afterwards [10.09.26/p40/12-25; p41/1-6].

⁴ Section 36 of the Counter-Terrorism and Security Act 2015 refers to individuals who are “vulnerable to being drawn into terrorism”. The Prevent objectives adopted in 2023 following the Shawcross review refer instead to people “susceptible to radicalisation” [14.10.25/p17/2-7, 19-22]. CTP treats the two as interchangeable; as DAC Evans explained in Phase 1, the change did not “dramatically change our operational application of the vulnerability and susceptibility to being drawn into terrorism” [14.10.25/p18/4-17; p20/10-13].

- 2, Lord Anderson stated that persons within the FEVMCA category have been treated as relevant to Prevent-relevant since 2019, *“although there has been significant inconsistency over how they are progressed through the system”* [09.09.26/p14/5-9]. The 2019 initiatives to which Lord Anderson here impliedly referred were necessarily designed to reinforce and improve understanding of the existing statutory test, as it applied to a recognised pattern of presentation. They did not change the test, nor could they have done, the statutory bounding of Prevent having remained unchanged since 2015 [VE3/§57]. Substantial work has been done to reinforce the relevance of this sub-category since 2019.
15. From July 2019 the Dynamic Investigation Framework, part of the Prevent Policy and CTCO Guide, had expressly included “fascination with mass killings or school massacres” as a matter to be considered, and that formulation persisted until the Prevent Assessment Framework replaced it in May 2024 [CTPHQ000006/§58; VE/15; VE/16].
 16. Before all three of AR’s referrals, on 25 June 2019 the Home Office and CTPHQ had also issued a joint letter to Regional Prevent Co-ordinators, Channel Panel Chairs and others which drew attention to individuals *“obsessed with massacre or extreme or mass violence without specifically targeting a particular group”* and invited practitioners to *“[c]onsider the possibility of an individual’s obsessive interest in public massacres of any kind as a possible signal of vulnerability”* [CTPHQ000006/§59; 14.10.25/p59/21-23; p60/5-7]. That letter said in terms that there was no change in the definition of terrorism and no expansion of the role of Prevent. When asked about this in Phase 1 DAC Evans reiterated that the letter did not reflect or seek to imply a change in Prevent relevance, section 36 remaining the sole overarching test, but instead aimed to clarify and reiterate the scope of that test by reference to an increasing pattern of presentation in referrals [14.10.25/p60/19 to p61/8].
 17. Similarly, the interim FEVMCA policy of April 2025 *“serve[d] to further **reiterate** and amplify the position expressed in the June 2019 Home Office/CTPHQ joint letter”* [CTPHQ000006/§60] (emphasis added). FEVMCA is one of some sixteen referral categories [09.09.26/p14/1-4], with each describing kinds of Prevent-relevant reported conduct. Lord Anderson’s own analysis is consistent with all of this: he concludes the current Prevent position is *“just about wide enough”*, notwithstanding that it may be *“tidier and preferable”* to amend the law and guidance to put the matter beyond doubt [09.09.26/p166/11-17].

18. While CTPHQ considers that FEVMCA remains an operationally workable subcategory for CTP Prevent purposes, CTPHQ agrees that system-wide clarity is an important aim for the “VFI” cohort more generally. Not all individuals displaying signs of violence-fixation will be best served by referral to a CTP-administered and voluntary scheme. As Dr Taylor put it, “[t]hresholds and gateways are built around the categories, so definitional inconsistency translates directly into inconsistent access to intervention” [DRT000010/§34].
19. It must be remembered that whatever broader label is adopted, it is likely to attach overwhelmingly to children, and disproportionately to the neurodivergent. Of the 1551 individuals identified in the CTPHQ analytical work, referred to above, 86% were aged 18 or under [VE/19]. Home Office statistics for the year to 30 September 2025 also show that 49% of FEVMCA referrals concerned children aged 11 to 15, against 35% of extreme right-wing referrals [VE/29] and [09.09.26/p18/20 to p19/4]. Within the CCS caseload, the most recent available figures indicate that, in 52.9% of all referrals (from a total of 1534 cases), there was at least one confirmed or suspected neurodevelopmental condition; with the figures rising to 86.5% of FEVMCA cases in particular [DRT000010/§54]. Dr Taylor’s caveats are important in this regard: this is a doubly selected cohort, and the referral patterns have likely spiked as a result of reports referring to AR’s autism in the aftermath of the Southport attack [DRT000010/§14]. The Chairman found in Phase 1 that AR’s behaviour was wrongly excused by professionals on the basis of his autism spectrum disorder. Care is now required to ensure the right lessons are taken from this important finding, while guarding against overcorrection or the stigmatisation of neurodivergent children. CTPHQ stresses that neurodivergence does not make a person more likely to engage in violence, and the research evidence does not support any causal link; rather, the evidence suggests that neurodiverse children may be more vulnerable to some of the harmful aspects of the online environment.
20. Operationally, CTPHQ continues to use FEVMCA to identify the subset of individuals who are potentially susceptible to being drawn into terrorism and therefore relevant for consideration within Prevent. That definition, set out in the interim policy issued after the Southport attack [VE/14], now also sits within the Prevent Standard Operating Procedure [VE3/§17; VE/20]. FEVMCA is the only part of the wider “VFI” cohort of which CTP has direct and deliberate experience, and CTPHQ’s evidence should be read with that limitation in mind.

Part One: response to CTI’s three questions in relation to VFIs and Prevent

Question 1: whether, in the longer term, VFI cases should sit within Prevent

21. It is convenient to begin with CTI's premise. In setting out this question, CTI observed that the VFI cases that presently sit within Prevent do so by means of "*a still somewhat uncomfortable compromise*", which treats such individuals as susceptible to being drawn into terrorism by reason of their violence fixation, thereby keeping them within Prevent without formally widening its scope [08.07.26/p90/21 to p91/2]. To the extent that this suggests artificiality or shoehorning, CTPHQ would respectfully question that characterisation so far as the FEVMCA subgroup is concerned: those individuals are within Prevent because, on assessment, they meet the statutory test. The question for CTCOs is not whether an individual is fixated with violence per se, but whether the factors pushing that individual towards violence could also make them susceptible to being drawn into terrorism [VE3/§58]. Nor can a referral be dismissed solely because no single, stable ideology is apparent [CTPHQ000006/§60]. As DAC Evans explained in Phase 1, the Prevent test operates much further upstream than the section 1 definition of terrorism, being concerned with susceptibility to radicalisation rather than with proof of a terrorist act [14.10.25/p61/14-21]. It follows that, whatever the Inquiry may recommend for the wider cohort, CTPHQ would expect to retain an interest in the FEVMCA subgroup (whether or not this subgroup is renamed), because its members fall within the proper scope of Prevent duty considerations.
22. As set out above, the starting point must be the existing legislative scheme. The framework within which Prevent operates has remained materially unchanged since 2015, save for the Prevent Duty Guidance which was last updated in July 2024 [VE3/§§21 and 57]. Where a case concerns a risk of violence, but with no reasonable grounds to believe susceptibility to being drawn into terrorism, Prevent cannot accept it. Such cases are simply referred on to other agencies with an explanation of the risk and of why Prevent cannot manage it [VE3/§59]. As the Chairman put it, Prevent's remit "*does not extend to all forms of risk of harm to others*" [Report/Vol 1/Ch 1/§56].
23. CTPHQ's position on the consequences of that boundary has been consistent. In November 2025 the National Lead for CTP told the Home Affairs Committee that Prevent "*is not a counter-extremism programme and it must not become the default mechanism for managing extremists or violence-fixated individuals ... who fall below legal Prevent thresholds*" [VE3/§60; VE/22]. CTPHQ made the same point in its Phase 1 closing statement, and the Chairman recorded that counsel on behalf of CTPHQ had "*accepted candidly*" that to include within Prevent those whose

contemplated crimes, however appalling, do not constitute terrorism “*may be detrimental to those referred individuals and to the system’s ability to tackle the core threats it is intended to address*”, and that “[t]here must be a whole-system approach by the Government to tackle the risks posed by VFIs” **[Report/Vol 2/Ch 8/§126; CTPHQ000154]**. This remains CTPHQ’s position.

24. Prevent could, to a limited extent, act as a routing and triaging service, but this risks compromising the programme it was designed to be **[VE3/§63]**. Phase 1 illustrated how a referral may be misunderstood (see for instance **[Report/Vol 1/Ch 1/§7(a)]**). Prevent could never lawfully have been the lead agency for the whole of the risk AR posed. CTPHQ would be concerned by any action that might widen the gap between perceptions of Prevent’s scope, including within partner agencies, and its statutory limits. Such a gap risks damaging public confidence and suppressing appropriate referrals.
25. In Phase 1, the Chairman found that the relevant criteria remain “*ambiguous, unsatisfactory and hard for ground level CTP officers to implement consistently*” **[Report/Vol 2/Ch 8/§127]**. CTPHQ entirely accepts that finding. CTPHQ suggests, however, that the difficulty lies primarily in the absence of anywhere else for the very much larger group of “VFI” cases, those which are not suitable for a Prevent referral or those which are referred and do not meet the statutory test, to be referred and effectively managed. Prevent should not be relied upon to triage a risk which its legal framework neither requires nor permits it to manage. On Dr Taylor’s analysis, cases classed as FEVMCA, no ideology, or multiple or unstable ideology together account for approximately 40% of the CCS caseload **[08.09.26/p7/12-18]**. It is in that context that the Home Affairs Committee found Prevent and Channel to be “*becoming saturated*” **[ILT000099]**.
26. CTPHQ agrees with the greater part of Lord Anderson’s analysis: that the pathways to ideological and non-ideological violence are not always easy to distinguish; and that Prevent can be of value in non-ideological cases subject to the necessary limitations of its statutory parameters, capacity, and the target skillset of intervention providers **[09.09.26/p30/3 to p31/12; p33/1-14]**.
27. CTPHQ also agrees with Lord Anderson’s comment that the future of risk management should not lie in “*ever more segmented groups with their own procedures, their own personnel, their own little pots of money*” **[09.09.26/p33/20-23]**. CTPHQ observes only that his conclusion that this cohort should remain Prevent eligible “*until something better can be devised*” risks conflating two distinct issues: firstly whether the FEVMCA group should be widened to encompass all

VFIs, and secondly whether FEVMCA should remain a Prevent-relevant category at all. For the reasons given above, CTPHQ's answer to the first question is "no", this would distort Prevent's statutory purpose. As outlined above, in relation to the second issue, CTPHQ's view is that the FEVMCA subgroup will necessarily remain a part of Prevent's upstream relevance assessment for susceptibility to being drawn into terrorism. CTPHQ accepts that Prevent will continue, as a byproduct of its statutory function, to operate to some degree as an onward referral mechanism for FEVMCA referrals which, once assessed, do not meet the test to progress to Channel. But this interim and unintended position must not harden into a permanent arrangement whereby Prevent receives all of the broader VFI referrals by default. Dr Taylor's evidence supports that caution: expanding Prevent's remit to the whole cohort would risk saturation and would "*dilute the counter-terrorism core task*" [DRT000010/§§82 and 83]; the IRTL's evidence was to the same effect [09.09.26/p38/6-19].

28. The Chairman has identified, as one model for Phase 2, the incorporation of a single lead agency into Prevent, which "*might involve explicitly expanding the statutory remit of Prevent to include those who present a high risk of serious harm ... irrespective of whether they are vulnerable to being drawn into terrorism*" [Report/Vol 2/Ch 8/§147]. It would of course be possible to legislate to that effect; whether it would be right to do so is a matter for the Chairman and for the Government. CTPHQ would ask that the consequences of such an expansion be weighed with extreme care. Amending one part of the counter-terrorism system without parallel attention to the rest risks distorting the CONTEST model, and disrupting the CT network's ability to manage threat.
29. Any extension to Prevent's remit would also require corresponding expansion to its resourcing, funding and legal powers to ensure it could effectively perform this function. [VE3/§90]. Questions would arise as to: whether non-counter-terrorism information could lawfully be held within counter-terrorism databases, how far existing powers could apply to non-ideological casework, and how the partnership with the UK Intelligence Community could operate in respect of a remit those partners cannot lawfully support.
30. In Seminar 2, Ms St Vincent (on behalf of Rights and Security International 'RSI') outlined reasons why there is already, in her assessment, a great deal of concern and suspicion towards Prevent within some communities. Despite RSI's assertion, it is not correct that Prevent "*is actually about intelligence gathering at a large scale*" [09.09.26/p144/18-20] and there is a strong public interest in correcting this

suggestion.⁵ Whilst it is difficult to be specific about such sensitive matters in an OPEN document, great care is taken to ensure that Prevent case management is separate from CTP's intelligence functions [VE3/§114]. Further, health information provided to the CCS is air-gapped from the wider network; once a case is closed Prevent has no further role under statute or policy [VE3/§69]; and marker retention is carefully governed by risk and proportionality assessments [VE3/§68]. The persistence of such suspicion undermines the efficacy of a programme which relies on community referrals and voluntary engagement. There is inevitably a danger that expanding Prevent's purview and powers would deepen existing mistrust of the programme.

31. In these ways, expanding Prevent's remit might inadvertently create more problems than it would resolve [VE3/§91].

Question 2: whether change is needed to secure a clear and consistent national pathway for cases not accepted by Prevent or adopted into Channel

32. CTPHQ agrees that change is needed. There is no overall national strategy for the identification, assessment and management of the wider VFI cohort falling outside the statutory limits of Prevent. The closure of a Prevent case may lead to multiple consequent referrals to different agencies. That may sometimes be appropriate, but the lack of a single system to receive such risk creates the potential for opportunities to be missed, because factors are assessed agency by agency rather than collectively [VE3/§65]. CTPHQ's assessment is that many who would fall within the wider VFI/NIEV/NIVE cohort are likely not being actively managed under any statutory process, because they do not meet the Prevent threshold, nor the threshold for criminal investigation (whether under Pursue or more broadly) [VE3/§30]. In the year ending 30 September 2025, 10,293 referrals were recorded, an increase of 39% [VE3/§34]. Of those referrals, 18% were adopted into Channel, and of the remainder 61% were signposted to other services [09.09.26/p19/9-20; and **Anderson, Seminar 2, slide 13**]. It is not possible to assess how many of those onward-signposted cases are being insufficiently risk-managed in the

⁵ This is but one example – that this statement does not address each of the assertions made by RSI about Prevent and the CT network more broadly should not be read as an acceptance of those assertions as accurate. While RSI raised a number of points about the protection of human rights generally (many of which CTPHQ would endorse); RSI also made a number of unsubstantiated claims about the work of Prevent, including that it is rooted in Islamophobia, which CTPHQ emphatically reject. CTPHQ does not consider it would assist the Chairman for these points to be addressed within this opening statement, but can provide any such further evidence or explanatory material as the ILT may require on these issues in due course.

absence of a single, aligned multi-agency approach. As DAC Evans notes, this is a state of affairs “potentially leading to significant un-managed risk” **[VE3/§30]**.

33. One way in which the position may be improved swiftly would be through a concerted multi-agency effort to ensure practitioners correctly understand their existing information-sharing powers. CTPHQ considers that existing legislation and protocols should be sufficient to allow sharing of information about this cohort between relevant agencies. At present, where issues arise, it is often because one agency is interpreting relevant legislation in a narrower way than another **[VE3/§97-100]**. In other words (and subject to the paragraph below), the problem is not necessarily the threshold for sharing information itself, but ensuring harmonisation in how it is understood and applied across agencies. Harmonisation is most likely to be achieved by consistent and close multi-agency working. Dr Taylor advocates placing information-sharing on a statutory footing in a comparable way to the duty to co-operate introduced under MAPPA in 2003 **[08.09.26/p90/18-24]**, and CTPHQ would support this or a similar approach.
34. An aligned information-sharing approach will also make data analysis in this field easier and more meaningful. Participants in the Phase 2 seminars repeatedly called for more and better data collection. A recurring problem is that information, once shared, is not always traceable to the agency which provided it. The receiving agency may not be able to identify which agency it received information from. After the Southport attack, CTPHQ was asked by Government to re-share, in bulk, details of previous VFI Prevent referrals where information had been shared with local agencies, so that those agencies could assess the sufficiency of any activity undertaken in those cases. Even though this information had been shared previously, the applicable legislation required each historic case to be reassessed individually, at a time of exceptional demand for CTP resources **[VE3/§98; VE/24]**. The more significant point is why the exercise had to run in that direction: the agencies to which those cases had been referred had no way of identifying, within their own systems, which had come to them from Prevent. The efficacy of onward referral by CTP is therefore very difficult to audit at present. The same difficulty arises at the other end of the process: to take one example, the Crown Prosecution Service does not formally categorise a case or an individual as a VFI, and holds no VFI monitoring flag within its case management systems **[CPS, Seminar 6A, slide 3]**. Whatever the longer term solutions may be, the Chairman may wish to consider encouraging agencies to keep internal records of shared information with an appropriate marker so the originating agency can be easily identified and collated.

35. For CTP's part, the steps that must be taken and recorded before a Prevent referral may be closed are now carefully mandated. Chapter 28 of the Standard Operating Procedure sets out where signposting is required and to whom; a retained record on the Prevent Case Management Tracker allows a later referral to be identified as a repeat referral; and where the section 36 threshold is met a safeguarding marker must be placed on the Police National Computer [VE3/§§67, 68 and 101].
36. What CTPHQ cannot say is what happens to each external referral, once made. CTPHQ is acutely aware that there is likely to be significant variation in light of competing demands, resources, and priorities between and within local agencies across the country. Dr Taylor outlines his personal experience of a significant number of high-concern cases in which mental health provision was difficult to secure and required escalation to senior NHS management, usually because of opaque pathways and fragmentation [DRT000010/§101], and in light of exceptionally long CAMHS/forensic CAMHS waiting lists [DRT000010/§89]. Defined, consistent pathways and timeframes will bring much-needed clarity to this area but, for implementation to be realistic, careful thought must be given to the competing constraints on relevant publicly funded resources.

Question 3: what the process should be for cases which, after triage, do not go to Prevent but to some other body

37. On this third question, the Chairman has been clear about what he considers this Inquiry's task to be. In the plenary session for Seminar 1, the Chair noted that, in order to comply with the Home Secretary's instructions, and so far as is possible, this Inquiry must look to find "*some kind of really solid mechanism by which you can make a determination as to whether [for example] a teenager who is showing some signs that they may be going off the rails ... should be looked at intensely and helped ... or whether they should be left alone*" [08.09.26/p94/8-19]. CTPHQ has sought to approach this question in light of this observation. For obvious reasons, it does not attempt to describe a complete mechanism. It would not be right to do so from CTP's perspective alone, and it cannot do so from even that limited perspective, without having heard the evidence this Inquiry will consider over the coming months. CTPHQ offers below what it hopes are some concrete points for the Inquiry to bear in mind when conducting this important work.
38. The first point concerns ownership. One genuine strength of the present Prevent arrangements is that there is always an identifiable lead agency, in that CTP owns terrorist-related risk, which gives clarity to partners [VE3/§84]. CTPHQ is therefore supportive in principle of a duty holder approach [VE3/§91], as is Dr Taylor, who

supports a named individual with clearly allocated lead responsibility in every case above an agreed threshold, provided the role is properly designed [DRT000010/§76]. The difficulty is alignment: where the owner of risk does not own the tools required to affect it, the owner can do little beyond highlighting the risk to whoever holds them. That is precisely CTP's position; within Prevent the section 26 duty supplies the lever to the local authority channel chair, but here there is no equivalent. This also answers Recommendation 1: in CTPHQ's experience, the culture of owning rather than referring on risk comes from aligning ownership with the tools of management. Prevent refers onwards at closure not because it does not wish to manage the risk, but because it does not own the mechanisms to do so [VE3/§95]. CTPHQ therefore suggests working backwards, identifying first the most effective interventions and then the agency which owns and delivers them or which is best-placed to do so following legislative change [VE3/§88].

39. That analysis guards against a natural but incomplete instinct, which is to allocate high-risk cases to law enforcement. Policing is attractive because of its powers of arrest and detention in the most critical cases, but prevention, early engagement, and diversion require very different interventions, using powers which policing does not possess and must obtain from partners against those partners' own thresholds [VE3/§85]. For these reasons CTPHQ does not consider that Prevent or Channel would be the appropriate duty holder for the general and diverse cohort of VFIs, nor that the role could appropriately be fulfilled by a CTP officer [VE3/§89]. If a policing duty holder were preferred, it might be possible for this to sit within local policing bodies, which are fully embedded in local safeguarding arrangements and partnerships, rather than CTP, at a seniority level sufficient to convene partners and hold them to account. The drawbacks of tasking a law-enforcement body with an individually-focused safeguarding task, however, will apply no less to general policing than to CTP.
40. As to relevant existing structures, and as DAC Evans explains at VE3/§§92-94, none can be neatly adapted. MAPPA is, outside a few very niche exceptions, a programme for post-conviction offender management, and would require significant reworking (and new statutory powers) to be adapted as an early intervention strategy [VE3/§92]. The Potentially Dangerous Persons scheme is non-statutory, mirrors MAPPA without the framework which compels multi-agency working, and does not exist in several parts of the country [VE3/§92]. Similarly, the MASH construct is non-statutory, does not exist or operate consistently across the country, and is primarily an impetus for information sharing, rather than a case

management process [VE3/§93]. The Serious Violence Duty may be capable of adaptation, but again it is aimed at encouraging co-operation at a strategic level, rather than in the management of named individuals [VE3/§94].

41. It is hard to avoid the conclusion that an altogether new multi-agency structure may be necessary for the management of this cohort [VE3/§93], which accords with the Chairman's view that this case requires "*detailed consideration ... to restructuring fundamentally the way that our society handles those who pose a real risk of killing or causing serious harm to others*" [Report/Vol 1/Ch 1/§54].
42. In this regard, it may very well be necessary to turn question three on its head: with some kind of triage or initial process ("the big front door") leading to Prevent in some cases, and to separately defined processes in others.
43. CTPHQ is supportive of the concept of a big front door which is centrally owned and allows for a range of referrals, given the intersecting nature of these threats [VE3/§87]. This is not a new position: various iterations of it have been proposed in the past. CTPHQ's own thinking has evolved over time as DAC Evans describes in paragraph 43 of her third witness statement. CTPHQ would now largely endorse the model described by Lord Anderson in his report, which provides that Prevent should not itself be the front door, but one of the strands of support behind it. Success would depend upon proper investment and resourcing, clear accountable ownership, and legislation providing a duty for all relevant agencies to co-operate [VE3/§87]. Any such front door would need to have sufficient safeguards to ensure that high risk cases of any categorisation receive risk support and intervention mechanisms on an urgent basis when required.
44. One model for the "big front door", canvassed at Seminar 1, was the expansion of the CCS so that it could accept referrals from other agencies, not only CTP. While the CCS's work may offer many useful lessons for this Inquiry (as indicated in the paragraph below), such a proposal is unworkable, both for the reasons given by Dr Taylor in respect of capacity constraints, and by reason of the statutory scope and purpose which necessarily define CTP's work and funding [08.09.26/p93/5-22].
45. During Seminar 1, Dr Taylor noted that it took eighteen months for CCS to successfully negotiate an information sharing agreement with relevant partners, and that it has neither the time nor the staff training to apply a structured and comprehensive professional judgement to the volume of cases it already sees [08.09.26/p93/12-22]. The success of any big front door is therefore likely to require some degree of feedback and multidirectional engagement. An effective front door requires obligations on receiving services to accept the cases routed to them

[DRT000010/§85]. It must also require some kind of feedback loop and an audit trail, so as to mitigate the problem that the Chairman found in relation to MASH in Phase 1, wherein a referring agency might prematurely consider its role complete at the point of making a referral, without ever seeking or receiving feedback **[Report/Vol 1/Ch 1/§7(d)]**.

46. As to what the front door itself should do, one practical suggestion before the Inquiry is that proposed by Dr Taylor in Seminar 1. Dr Taylor noted that the most effective form of triage in this scenario might well be one built around a multi-agency checklist for action, rather than a risk prediction instrument applied to direct a case into one of several discrete pathways owned by different agencies. In this regard, Dr Taylor drew attention by analogy to the form of a surgical checklist devised by Atul Gawande and now used globally, and to his findings that good checklists are short, have a maximum of five to nine items per pause point, specify priorities and direct forms of communication. A checklist may be easier for generalist practitioners to use, because it does not predict outcomes, but manages risk by guaranteeing that actions known to reduce risk have been taken **[08.09.26/p83/2-16]**.
47. In this context, an appropriate checklist would likely incorporate red flag risk factors of the kind used in the Fixated Threat Assessment Centre's protocol, a child having taken a knife into school being an obvious example **[08.09.26/p82/12 to p83/1]**. On this model, structured professional judgement would be reserved for the specialist assessment (or assessments) following triage **[08.09.26/p93/5-11]**. A checklist model may be one way to address the concern, as expressed by DAC Evans, that a single instrument covering everything every agency requires would become cumbersome, and that a simpler shared core with multiple bolt-on modules is more likely to work **[VE3/§82]**. CTPHQ would note, however, that the checklist model might not so readily address the existing issue of agency-by-agency siloed risk assessments leading to "*potentially significant*" unmanaged risk **[VE3/§30]**.
48. No off-the-shelf checklist, screening instrument, or risk assessment tool exists which could amount to the solid mechanism the Chairman requires **[08.09.26/p94/1-7]**. Dr Taylor suggested that a group of professionals from policing, mental health, social care and other agencies might be convened to agree the broader factors of concern as a first step to checklist-style filtering **[08.09.26/p95/1-12]**. Such a project may, in fact, be achieved through the Phase 2 evidentiary hearings.

49. Whatever mechanism is pursued, CTPHQ would invite the Chairman to consider that its efficacy will depend on a duty to co-operate or to work towards the same outcome, so that any lead agency (or agencies) can leverage the interventions necessary regardless of which agency owns them [VE3/§99].

Part Two: the online environment

50. The Chairman found the failure to oversee and intervene in AR's online behaviour to be one of the fundamental problems identified by Phase 1, and has described the adverse influence of the online world as a particular and deep concern [08.07.26/p11/10-11]. CTPHQ shares that concern: in July 2025 DAC Evans issued a joint press release with the Director General of MI5 and the National Crime Agency Threat Director warning that children are being routinely exposed to harmful online content of the most serious kind [VE3/§105], and online immersion in such content is, on Dr Taylor's evidence, a recurrent feature of presentation in this cohort [DRT000010/§66].
51. Practitioners trained in open-source investigation can see only material which is publicly open; to go further an officer would need the device itself, a record of monitored usage, or a civil order permitting monitoring, and those circumstances are rare in Prevent cases [VE3/§§109 to 111]. Prevent legislation confers no additional powers of monitoring or seizure, and it would therefore be extremely challenging to identify VPN use, changes of name or multiple accounts unless referred to in open posting. Nor should Prevent's open-source work be confused with CTP's intelligence functions, which are separate [VE3/§114]. CTPHQ does not suggest that this is a comfortable position: DAC Evans's evidence in Phase 1 was that more information in this space "*would definitely be helpful*", although it is normally one of many factors, and decisions can only be made on what is available [14.10.25/p79/10-17].
52. The level of permissible intrusion is nonetheless a matter for Government, and CTPHQ reiterates that it "*is not explicitly requesting additional powers in this space*" [VE3/§116]. As Mr Hall emphasised in Seminar 2: a discovery programme directed at this cohort would carry a grievous risk of false positives: that an individual carries a knife on a bus, or looks at gore, could not of itself be a sufficient basis to intervene [09.09.26/p38/20 to p40/4]. Mandatory platform reporting would produce the same problem at greater scale [09.09.26/p40/11-22].
53. As to the statutory framework, the Online Safety Act 2023 ('OSA 2023') is a positive step, but its primary mechanism for protecting children remains age verification, which is unlikely to deter those with a focused intent [VE3/§118]. That limitation

was underscored in Seminar 4, where the Inquiry heard that some of the largest gore platforms introduced age assurance only recently, that it cannot necessarily keep children out, and that it remains “*very easy to find this kind of content*” [15.09.26/p72/16 to p73/3]. Section 70 of the Children’s Wellbeing and Schools Act 2026 (‘CWSA 2026’) may reduce incidental and algorithm-driven exposure, but is unlikely to disrupt access by those already fixated, who may turn to VPNs [VE3/§§119 and 120]. There has been no discernible reduction in demand from public referrals to the CT Internet Referral Unit since the Act came into effect [VE3/§121]. The reason for this may be structural. Terrorism content and child sexual abuse material are “priority illegal harms” under the OSA as amended by the CWSA 2026 which must be prevented and removed for all users regardless of age; whereas violent content sits within Part 3 of the OSA 2023 as priority content harmful to children only, so that the all-user duties reach it only through terrorism, public order or incitement offences. On that analysis, as Adam Hadley of Tech against Terrorism usefully noted in Seminar 6B, adding a named offence to the priority list by regulations would carry violent content into the illegal content duties [Hadley, Seminar 6B, slides 20 and 25].

54. CTPHQ’s view is that impact at scale would require internet service providers and tech companies to do more by way of moderation at source, including by the introduction of platform-level safeguards. CTPHQ would also support further consideration of safeguards at device level, a question the Chairman himself raised in Seminar 2 when asking whether legislation might impose workable, evidence-based restrictions upon access [09.09.26/p154/12-20]. Mr Hall explained the concept by reference to controls recently announced by Government, mandating technology companies by law to place a filter within the operating system which, on detecting a particular pattern of behaviour, requires the user to verify their age. His view was that controls at operating system level may be one way to overcome circumvention of geo-blocks by VPN [09.09.26/p155/1-18]. Lord Anderson was “*generally supportive of the concept of device level controls*”, but cautioned that they are “*fallible, highly fallible*” and no substitute for enforcing upon the technology companies the duty of care they owe to the citizen, and in particular to the child [09.09.26/p156/4-18]. Clearly, all such proposals will require Government to assess carefully the effect upon the Article 10 rights of platforms and their users [VE3/§117].
55. CTPHQ welcomes the Inquiry’s question whether there should be a further ability to restrict or monitor the internet access of children once a significant threshold of

risk is passed, supported if necessary by a court-imposed order [Report/Vol 2/Ch 8/§148]. CTPHQ's preliminary answer lies in the same place as its answer on civil orders: conditions of that kind could form a valuable part of the mirrored order described in Part Three, in the small number of highest risk cases and subject to judicial oversight and proportionality. On balance, however, CTPHQ does not at present seek a broader administrative power to monitor the internet use of individuals referred to Prevent [VE3/§125]. Dr Taylor observes from his clinical perspective that comparable orders usually become obtainable late in an escalation, and that they manage conduct rather than treating motivating factors, so a prohibition without accompanying clinical intervention may relocate rather than reduce the behaviour of concern [DRT000010/§93]. The Chairman has correctly identified consent as a central tension too. Consent remains vital because Prevent's work requires addressing mindset [VE3/§70]. Whether Prevent remains voluntary is a matter for Government, but CTPHQ identifies three potential risks in removing it: fewer referrals from family and friends if the programme is felt to be coercive; undue criminalisation of young people within a pre-criminal framework; and the consequent need for an appeal clause, the operation of which would divert practitioners from managing risk [VE3/§§71 and 72]. CTPHQ is not alone in considering that proper weight must be given to the benefits of operating on the basis of voluntary participation. The Youth Justice Board's material for Seminar 6A records that participation in its own prevention offer is likewise voluntary, "*because the evidence shows interventions are more effective when a child engages willingly*" [YJB, Seminar 6A, slide 5].

Part Three: current laws, systems and orders

56. CTPHQ has previously identified two gaps under Topic 3. The first is the lack of legislation criminalising the planning of mass casualty attacks where there is no ideological motive. CTP has dealt with a number of cases over the last two years in which investigations and prosecutions had to be pursued outside the legislative framework for terrorism offences, notwithstanding the comparable actions and harms involved, because of the absence of a terrorist ideology [VE3/§123]. The Crown Prosecution Service illustrated the same difficulty in its contribution to Seminar 6A [CPS, Seminar 6A, slides 7 and 8]. Mr Hall recommended a mass casualty attack planning offence following Southport, and told Seminar 2 that he had been told it "*is now getting its way through the system*" [09.09.26/p62/11-14]. CTPHQ welcomes this important development, about which the Chairman will no doubt wish to hear more during the Phase 2 evidentiary hearings.

57. The second potential gap concerns preventative civil orders [VE3/§124]. For the reasons given by DAC Evans, a targeted civil order might be of assistance in the FEVMCA space, but it would require careful drafting to ensure it was available at a suitably early stage, while not extending so widely as to be unworkable [VE3/§125]. Dr Taylor suggests that for younger children, the family jurisdiction may offer more appropriate routes than new coercive powers [DRT000010/§94]. Ultimately, CTPHQ's view is that whilst such measures might assist in a small number of individual high-risk cases, the efficacy of any new civil order regime would rest on the success of wider efforts to improve the online environment [VE3/§125].

Part Four: access to offensive weapons

58. Topic 4 falls principally to the Home Office, the National Police Chiefs' Council and the National Knife Crime Centre, rather than to CTPHQ. CTPHQ necessarily supports that work, however, and so shares CTI's disquiet that, notwithstanding Recommendation 18, in July 2026 knives were still being marketed on mainstream websites under names such as "Fighter Black", "Frenzy" and "Mayhem" [08.07.26/p147/20 to p148/8]. CTPHQ will provide any and all support it can to colleagues, across policing and Government, to meet the considerable challenges involved in this area of law enforcement.

Conclusion

59. CTPHQ recognises the scale of the challenge faced by this Inquiry. In emphasising the difficulties that would flow from making Prevent a more generalised violence-reduction programme, CTPHQ is not seeking to make this a problem for others or absolve itself of responsibility. It has a key role to play within a much wider multi-agency approach, and in sharing its expertise with partners within policing and beyond [VE3/§§127-128]. CTPHQ stands ready to assist the Chairman in this next phase of the Inquiry, and will continue to implement his recommendations as they are made.

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