Safeguarding Standards
MAXTRIX

Standard 1 - Safeguarding is embedded in the Church body's leadership, governance, ministry and culture
Standard 1 - Safeguarding is embedded in the Religious Life Group's leadership, governance, ministry and culture

LGC1 – Leadership – The Church body will:
1. Have a zero-tolerance approach to all abuse, recognising the possible escalation of low-level concerns into more serious incidents if not addressed.
2. Seek and support the engagement of those who report having been harmed in contacts with personnel of the Church body, listen and respond to them.
3. Make publicly available statements of its safeguarding commitments that are displayed within any location (e.g. physical and online) that it operates.
4. Ensure a culture of safeguarding, as everyone's responsibility and integral to its mission and ministry, is championed by its leadership.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
1.1.1	The Church body has discussed the local implementation of the Church's zero tolerance approach to abuse	The Church body has drafted local policy regarding a zero-tolerance approach to abuse, including the need to address low-level concerns	The Church body has an agreed policy on a zero-tolerance approach to abuse	The policy regarding a zero-tolerance approach to abuse is widely known by members, with evidence of its application in practice	The policy regarding having a zero-tolerance approach to abuse is widely known by all stakeholders and attempts are made to address low level concerns to avoid escalation	A zero-tolerance approach to abuse and the recognition of the need to address low level concerns to avoid escalation is embedded. Feedback from stakeholders is sought and acted on to ensure that the policy remains effective
1.1.2	The Church body has discussed how to seek and support the engagement of those who report having been harmed in contacts with personnel of the Church body	The Church body leadership is exploring with members how to effectively seek and support the engagement of those who report having been harmed in contacts with personnel of the Church body	There are plans in place to seek and support the engagement of those who report having been harmed in contacts with personnel of the Church body and consideration of how they are listened and responded to	The Church body seeks and supports the engagement of those who report having been harmed in contacts with personnel of the Church body and they are listened and responded to	The Church body reaches out to those who report having been harmed in contacts with the Church body in order to support them. Their views influence practice and policy development	The Church body engages those who report having been harmed in contacts with the Church body in order to involve them in practice and policy development
1.1.3	The Church body has recognised the need to publicly state its	Statements of safeguarding commitment	Statements of safeguarding commitment are publicly	Statements of safeguarding commitment are widely seen, with	Statements of safeguarding commitment are regularly	Feedback on the clarity and effectiveness of Statements of Safeguarding

	commitment to safeguarding	are available online and in some buildings	and consistently available in physical locations throughout the Church body's buildings	effort made to ensure that they are accessible to all who have contact with the Church body	reviewed to ensure they are relevant and helpful	Commitment is regularly sought from stakeholders with updates made when necessary
1.1.4	The Church body has discussed how to develop a culture of safeguarding as everyone's responsibility as integral to its mission and ministry	Plans are in place to promote a culture where safeguarding is seen as everyone's responsibility	A culture where safeguarding is seen as everyone's responsibility is actively promoted	A culture where safeguarding is seen as everyone's responsibility is modelled by leadership	A culture where safeguarding is seen as everyone's responsibility is embedded and championed by leadership, with feedback sought from stakeholders	A culture where safeguarding is seen as everyone's responsibility is maintained and the leadership encourage challenge and reflection

LGC2 – Governance – the Church body's leadership will:
1. **Establish and regularly update their governance arrangements to ensure that they facilitate the implementation of the safeguarding standards.**
2. **Set out clearly the responsibilities of Bishops/Superiors, Parish Priests and other leaders of ministries and services for safeguarding practice to enable effective adherence to the agreed standards.**
3. **Establish a Safeguarding Implementation Group made up of leaders and professional experts to drive their Safeguarding Implementation Plan and oversee their safeguarding practices.**
4. **Develop and publish a Safeguarding Implementation Plan for a period of three years with an annual review and update.**
5. **Provide adequate resources, recruit, and support suitably trained and experienced safeguarding personnel to deliver their safeguarding services at every level including that of the parish and other ministries and services.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
1.2.1	The Church body's leadership have had discussions to establish governance arrangements to facilitate the implementation of the safeguarding standards	Governance arrangements have been drafted	Governance arrangements are in place	There is evidence that the governance arrangements oversee the implementation of the safeguarding standards and there is a clear plan for reviewing and updating them	Governance arrangements are instrumental in driving the delivery of the safeguarding standards and are reviewed and updated at relevant points	Governance arrangements enable a high support/ high challenge approach to delivering the safeguarding standards and are kept under regular review, with feedback from stakeholders sought as to their effectiveness
1.2.2	There is a recognition of the range of	The responsibilities of those in a	Leaders have clearly set out responsibilities	There is evidence of leaders understanding	There is consistent evidence of	The responsibilities of leaders are known throughout the church

		range of leadership roles for safeguarding practice have been drafted	for safeguarding practice	and acting on their responsibilities for safeguarding	leaders visibly acting on their safeguarding responsibilities	body and regularly acted on and discussed
	responsibilities of Bishops/Superiors, Parish Priests and other leaders of ministries and services for safeguarding practice					
1.2.3	The Church body's leadership have had discussions regarding the need to establish a Safeguarding Implementation Group (SIG) of leaders and professional experts	Arrangements to establish a SIG have been started	A SIG is in place for oversight of the Safeguarding Implementation Plan (SIP) and safeguarding practice	A SIG is actively driving the SIP and overseeing safeguarding practice	The SIG is ensuring the effectiveness of the SIP and actively overseeing safeguarding practice	There is a high support/high challenge approach from the SIG in driving the SIP and safeguarding practice
1.2.4	The Church body's leadership have had discussions regarding the need to agree a Safeguarding Implementation Plan (SIP)	The SIP has been drafted	The SIP has been agreed by the SIG	The SIP has been disseminated and published or promoted as appropriate	The SIP is embedded with clear evidence of delivery and active oversight	The SIP is embedded, delivered and easily available to stakeholders, with an annual review process
1.2.5	The Church body's leadership has recognised the need to provide adequate resources, recruit and support trained and experienced safeguarding personnel	The Church body's leadership have reviewed the adequacy of their resources and support to deliver safeguarding services	Adequate resources and support are in place for trained and experienced personnel to deliver safeguarding services	Adequate resources and support are in place for trained and experienced personnel to deliver safeguarding services at every level, including that of the parish and other ministries and services	Quality resources and support, including supervision, are available to personnel and recruitment processes are robust to ensure the effective delivery of safeguarding services at every level. Resources are kept under review to ensure that they are meeting current need	Excellent resources, high quality supervision, robust recruitment procedures and ongoing training are in place for safeguarding personnel. Safeguarding services are being delivered throughout the organisation and resources are responsive to ongoing needs

LGC3 – Ministry and Culture – the Church body will:
1. **Identify, prevent, and mitigate safeguarding risks in its structures, culture, and practice of ministry.**
2. **Regularly support and participate in any safeguarding training that is provided.**
3. **Actively promote the "Caring for Others" pastoral and personal conduct standards agreed by the Bishops Conference in April 2020, and the Integrity in Ministry standards produced by the Conference of Religious.**
4. **Seek to continuously improve its practices by focusing on and learning from the outcomes of its responses to safeguarding cases.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
1.3.1	The Church body has agreed to act to manage (identify, prevent and mitigate) safeguarding risks in it structures, culture and practice of ministry	The procedures for the management of safeguarding risks in structures, culture and practice of ministry have been drafted	Procedures for the management of safeguarding risks in structures, culture and practice of ministry are in place	Action is being taken to manage safeguarding risks in structures, culture and practice of ministry	Action to manage safeguarding risks is embedded in structures, culture and practice of ministry	The management of safeguarding risks is a normative part of all structures, culture and practice of ministry, with active steps taken to ensure that this is maintained
1.3.2	The Church body has recognised the need to support the provision of ongoing safeguarding training	Policies are being drafted to support and encourage participation in safeguarding training	Some safeguarding training has been delivered with attendance monitored and recorded	There is a programme of training which has clear expectations of attendance which is recorded and monitored	The expectation of safeguarding training is embedded at all levels with regular reviews and discussion of additional training needs	Safeguarding training is undertaken at all levels and reviewed at an organisational level and in supervision and development conversations, with exploration of other relevant training opportunities
1.3.3	The Church body has discussed the promotion of the 'Caring for Others' (Bishops' Conference) or Integrity in Ministry conduct standards (Conference of Religious)	Promotion of the 'Caring for Others' or Integrity in Ministry standards has started	The 'Caring for Others' or Integrity in Ministry standards are consistently promoted	The 'Caring for Others' or Integrity in Ministry standards are embedded and understood	The 'Caring for Others' or Integrity in Ministry standards are referred to in safeguarding conversations and practice	The 'Caring for Others' or Integrity in Ministry standards underpin safeguarding procedures and practice
1.3.4	The Church body has recognised the need to learn from	There is active consideration of how to use learning from safeguarding cases to	There is evidence of some learning from outcomes of safeguarding cases	Learning from the outcome of safeguarding cases is routinely seen	Learning from the outcome of safeguarding cases is evidenced and routinely	A high support/high challenge culture includes the use of learning from safeguarding cases with evidence of how it has

					discussed and reflected on in leadership conversations, with evidence of this improving practice	improved practice and changed procedures
safeguarding cases	improve practice					

LGC4 – Ministry and Culture – the Church body's leadership will:
1. **Encourage and support a culture of transparency through their promotion of the communications standards.**
2. **Adhere to information sharing practices and record creation policies that have been agreed nationally.**
3. **Promote constructive engagement with the Catholic Safeguarding Standards Agency.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
1.4.1	The Church body's leadership has discussed the need for a culture of transparency, supported through a promotion of the communication standards	Organisational promotion of the communications standards is being developed	Promotion of the communication standards is in place	There is evidence that a culture of transparency is encouraged, including consistent promotion of the communication standards	Transparency is clearly evidenced in all safeguarding practice and the communication standards are referred to in recording	There is a culture of challenge and support to ensure transparency is consistently seen and the communication standards are adhered to
1.4.2	The Church body's leadership has discussed how it will adhere to nationally agreed information sharing and record creation policies	Adherence to the nationally agreed information sharing and record creation policies is being developed	The nationally agreed information sharing and record creation policies have been adopted	The nationally agreed information sharing and record creation policies are being actively used and seen in practice	Information sharing policies are routinely checked and referenced. Record keeping is reviewed to ensure it is up to date, of good quality and in line with nationally agreed policies	Information sharing policies and procedures are robust and regularly reviewed. Recording is quality assured by the leadership to ensure it is fit for purpose and in line with record creation policies and best practice. There is a culture that supports learning and improvement when standards for recording are not met.
1.4.3	The Church body's leadership has discussed how it will engage with CSSA	There is evidence of some initial engagement with CSSA, although no written guidance yet in place	Guidelines promoting engagement with the CSSA are in place and there is some evidence that they are in use	The CSSA have been routinely approached appropriately for advice on safeguarding practice. This is in line with written guidance	There is regular and proactive liaison with the CSSA to gain advice on safeguarding issues and the development of safeguarding practice. This is in	Liaison with the CSSA is actively encouraged and expected to discuss and seek advice for all appropriate safeguarding matters

					line with written guidance	

Self-Audit Religious Life

Standard 1 - Safeguarding is embedded in the Religious Life Group's leadership, governance, ministry and culture

1.1 Do you have a written Safeguarding Policy?
1.2 If yes, do you have a policy implementation plan? Does this define individual's roles in delivering the plan? When was this last reviewed/amended or updated and is there a clear expectation of the next review date?
1.3 Do you have a designated lead for safeguarding?
1.4 Are the leaders of the Religious Life Group aware of the basic principles of safeguarding? Do they understand their role and responsibilities in creating a safe environment?
1.5 Does everybody in the Religious Life Group understand their contribution to safeguarding?
1.6 Is safeguarding on the agenda of every leadership/trustee meeting? If not, when was it last discussed
1.7 How do you understand that RLSS will support you with your safeguarding work?

Evidenced:

Standard 1: Safeguarding is embedded in the Church body's leadership, governance, ministry and culture

- Copy of safeguarding implementation plan (including evidence of any reviews that have taken place);
- Evidence of engagement of leadership and trustees in leading on safeguarding which might include extracts from trustee meeting minutes or other leadership meeting minutes, minutes of safeguarding committee meetings, and any other safeguarding related groups where strategy, governance, and the role of leadership in safeguarding is discussed;
- Practice evidence of addressing low level concerns e.g., case recording, minutes of meetings, plans of intervention;
- Evidence of active communication and interaction at the leadership level with those who report having been harmed, either in groups or individually e.g., meetings, written correspondence, invitations to engage;
- A written document outlining the safeguarding responsibilities and roles for those in a range of leadership roles;
- Safeguarding related training presentation slides (to include reference to 'caring for others' where available) that address the responsibilities of leadership;
- Evidence of a whole church body approach to safeguarding e.g., awareness raising training for all roles that have contact with the public;
- Record of learning events/communication in response to learning from safeguarding cases;
- Record of contact with CSSA (emails/telephone discussions) evidencing that consultation has taken place relating to safeguarding matters;

Standard 2 - Communicating the Church's Safeguarding Message
Standard 2 - Communicating the Religious Life Group's Safeguarding Message

CMS1 – The Church body will:
1. **Have a written plan that describes how it will communicate its safeguarding messages, to whom, and in what manner.**
2. **Regularly update its communication plan, taking account of developments in its practice.**
3. **Link to other Church bodies and organisations to promote a safer environment within the Church and local community.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
2.1.1	Discussions regarding a plan to communicate the Church body's safeguarding messages are taking place	A plan that describes how the safeguarding messages will be communicated and to whom has been drafted	The communication plan is in place	The communication plan is being delivered	The communication plan is embedded and understood. Messages are consistent and appropriate for each audience, including those for whom English is not their first language	The plan for communicating safeguarding messages is consistently referred to, to ensure wide understanding of what needs to be communicated to whom and when, and there are processes in place to assure the effectiveness of the plan
2.1.2	Not applicable as no plan in place to review	Discussions regarding review processes for the communication plan are taking place	The processes for updating the communication plan are agreed	The communication plan has been updated to reflect developments in practice	The communication plan is regularly reviewed and updated to reflect developments in practice	The communication plan is routinely reviewed, including with stakeholders, and updated when practice development is considered and/or implemented, and to reflect changing safeguarding needs.
2.1.3	Consideration is being given to how to link to other church bodies and organisations to promote a safer environment	Discussions are established to link with other church bodies and organisations to promote a safer environment	Links with other church bodies and organisations to promote a safer environment are in place	Links with other church bodies and organisations to promote a safer environment have contributed to promoting a safer environment	Links to other church bodies and organisations are embedded and routinely used to promote a safer environment	Links to other church bodies and organisations are well established with clear systems to challenge, support and collaborate to promote a safer environment

CMS2 – The leadership of the Church body will:
1. **Actively engage with volunteers, parents, and guardians, adults at risk and children and young people, when deciding how to communicate their safeguarding messages most effectively.**
2. **Promote an understanding of their commitment to effective safeguarding amongst those that they serve, and to the wider public.**
3. **Demonstrate that they own the safeguarding messages that they produce.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
2.2.1	Leadership discussions regarding engaging key people (volunteers, parents/guardians, adults at risk, children and young people) in the process of deciding how to effectively communicate the safeguarding messages are taking place	There is some engagement of key people to support decision making regarding how to communicate safeguarding messages	The communication of safeguarding messages is based on the engagement of key people	The views of key people have clearly guided the communication of safeguarding messages	Key people have been involved in planning how to communicate the safeguarding messages	Key people are involved in planning how to communicate the safeguarding messages and feedback on the effectiveness of the communication plan is sought and acted on
2.2.2	Leadership discussions regarding how the commitment to effective safeguarding is promoted to ensure understanding from the community served and the wider public are underway	A plan to promote an understanding of the commitment to effective safeguarding has been agreed	A plan to promote an understanding of the commitment to effective safeguarding is in place and being delivered	A plan to promote an understanding of the commitment to effective safeguarding is embedded, resulting in consistent delivery	The church body continually promotes an understanding of their commitment to safeguarding and evaluates the impact	The church body evaluates the impact of their commitment to safeguarding through gathering feedback which is acted on where needed
2.2.3	Leadership discussions regarding their ownership of safeguarding messages have taken place	The safeguarding messages produced are disseminated by the leadership of the church body	Safeguarding messages and materials are clearly owned by the leadership of the church body (i.e. the messages are seen to have originated from and be driven by the leadership)	Safeguarding messages are routinely communicated by the leadership and supported by displays in premises	Safeguarding messages are routinely communicated throughout the church body and are on open display in premises, with checks to ensure that materials are up to date, relevant and accessible, including to those whose first language is not English	Safeguarding messages evaluated for their effectiveness

Self-Audit Religious Life

Standard 2 - Communicating the Religious Life Group's Safeguarding Message

2.1 Do you have a plan to ensure that everyone understands the importance of safeguarding? How is this plan communicated?
2.2 If yes, when was this plan last reviewed/amended or updated?
2.3 Do you have any links with other Church bodies or external organisations which help keep people safe?
2.4 How do you show your commitment to safeguarding amongst those you serve and the wider public?
2.5 How do you share the safeguarding message in the premises you live and/or work in? i.e. Posters, website, newsletters

Evidence:

Standard 2: Communicating the Church's safeguarding message

- Copy of safeguarding communication plan;
- Evidence of communication of safeguarding messages within the Church body e.g., newsletters, website, other online platforms, physical poster locations, Ad Limina, sermons, events;
- Evidence of communicating the church body's safeguarding arrangements and priorities with local voluntary and statutory organisations e.g. emails, meetings, joint events;
- References to communication of the safeguarding message in minutes of leadership or other meetings;
- Records of engagement or consultation with parents/carers, volunteers, children or adults at risk in gaining their views about how the safeguarding message should be communicated within the diocese and wider community.

Standard 3 - Engaging with and caring for those who report having been harmed

EC1 – The Church body will:
1. Respond to any disclosure of abuse with compassion and care, seeking to provide signposting as appropriate to support and advice, and offer pastoral care tailored to the needs of the individual.
2. Establish access to personnel with training relevant to specific needs, to deliver professional mental health and other appropriate support when required.
3. Collaborate with other organisations, both voluntary and statutory, who specialise in this area of work.
4. Look to learn from the experience of those that are provided with a service, to confirm that it is meeting their needs.
5. Reflect on any disclosures that it receives with a view to drawing learning from them to inform the CSSA and future safeguarding practice across the One Church.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
3.1.1	The Church body has discussed how disclosures of abuse are responded to, including the signposting to support and the access to pastoral care	Local policies, guidance and training for all members who may receive a disclosure and/or offer pastoral care are being drafted	Local policies, guidance and training for all members who may receive a disclosure and/or offer pastoral care is in place	Local policies, guidance and training for all members who may receive a disclosure and/or offer pastoral care is seen to be acted on and implemented in practice	The implementation of local policies, guidance and training for members who may receive a disclosure and/or offer pastoral care is monitored and reviewed, resulting in changes to increase effectiveness	Local policies, guidance and training for members who may receive disclosures and/or offer pastoral care is reviewed regularly including with those delivering and receiving services. There is evidence of this review leading to changes
3.1.2	The Church body has discussed how it will ensure that it has access to personnel with training relevant to the specific needs of those who disclose having been harmed	Arrangements to access personnel with relevant training are being put in place	Access to personnel with training relevant to specific needs is established and is seen to be utilised in practice	There is clear guidance on accessing personnel or organisations with specialist expertise and up to date information for signposting is available for all members who may need it	Mechanisms are in place to ensure that services provided are tailored to the needs of the individual making the disclosure, taking into account diversity and cultural needs, including making one off arrangements to meet particular needs	The Church body has mechanisms to ensure that services which it provides access to deliver effective interventions, including through feedback from the individual making the disclosure
3.1.3	The Church body has discussed how it will collaborate with other organisations	Arrangements to collaborate with other organisations are	The remit and skills of other organisations who specialise	There is consistent evidence of specialist	The need to access support or signposting to personnel or	Collaboration with personnel and organisations with specialist

	who specialise in working with people who have been harmed	in motion through scoping out availability and making initial contact	in safeguarding are understood and signposted to. Clear guidance is in place for when statutory agencies should be contacted	organisations, including statutory agencies, being referred to in safeguarding practice	organisations with specialist training/expertise is taken on a case-by-case basis based on the needs and/or wishes of the individual. Statutory agencies are contacted appropriately	expertise is ongoing to understand developments in services and ensure support and signposting for individuals is relevant and helpful
3.1.4	The Church body has recognised the need to learn from the experience of people provided with a service to confirm that it met their needs	How to learn from the experiences people provided with a service is being considered	Conversations to seek feedback from people provided with a service have taken place with consideration of how to learn from them	Gaining feedback from people provided with a service is routine and reflected on in developing practice	Gaining feedback in a variety of ways from people provided with a service is well established and the learning is used to develop practice and policies	Feedback from people provided with a service is gained in creative ways led by the people using the service. Views are reflected on and challenge is welcomed and acted on to ensure practice is constantly developing to meet the needs of individuals
3.1.5	The Church body has recognised the need to reflect on disclosures received to draw learning from them.	Arrangements for reflection on disclosures have been agreed	Reflection on disclosures to ensure learning to inform safeguarding practice takes place	There is evidence of disclosures being routinely reflected on at a number of levels (e.g. leadership, safeguarding practitioners) and of this informing safeguarding practice. Consideration has been given to commissioning a formal internal or external review of practice.	Learning from disclosures, including from internal and external reviews, is shared across the organisation.	Internal and external reviews of practice are regularly undertaken and learning is disseminated to individuals, the whole organisation and across the One Church

EC2 – The leadership of the Church body will:
1. **Actively reflect upon their response to those who report that they have been harmed, to enhance their commitment to it being compassionate and caring, and improving their practice.**
2. **Engage with those that report harm to try to learn from their experiences.**
3. **Support development in their practice that is aimed at enhancing a compassionate and caring response.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
3.2.1	The leadership of the Church body has discussed how it can begin to reflect on their response to those who report having been harmed	Reflections on responses to those who report that they have been harmed have begun	Reflections on responses to those who have report they have been harmed are established	Reflection and challenge is actively supported to learn from responses to those who have reported they have been harmed	Reflection, challenge and learning from the responses of those who have reported they have been harmed is embedded in leadership and there are examples of how this has improved practice	Reflection, challenge and learning from the responses of those who have reported they have been harmed is modelled by the leadership and embedded across the organisation
3.2.2	The leadership of the Church body has considered how they can engage with those who report they have been harmed	Plans for leaders to engage with those who report they have been harmed are in place	Leadership engagement with those who report they have been harmed is taking place	Leaders actively seek to engage with those who report harm and evidence learning from their experiences	Engagement with those who report harm with the explicit aim of learning from their experiences is well established throughout the organisation and modelled by leaders	Engagement with those who report harm is routine throughout the organisation and learning from this is seen in organisational development and practice
3.2.3	The Church body has discussed practice development for leaders aimed at enhancing a compassionate and caring approach	Practice development for leaders to enhance a compassionate and caring approach has been agreed	Practice development for leaders to enhance a compassionate and caring approach has been delivered	Learning from engaging with those who report harm is used to develop compassionate and caring practice amongst leaders	Development of practice for leaders includes consideration of trauma informed responses	A trauma informed approach is embedded in practice development for leaders and other members of the organisation

Standard 3 - Engaging with and caring for those who report having been harmed

3.1 Would the Religious Life Group, or individuals within it, know how to respond with compassion and care if they received a disclosure of abuse? Has training been offered to support them with this?
3.2 How would you ensure that those who might make a disclosure receive support and advice (as appropriate) and pastoral care tailored to their needs?
3.3 Are you aware of people and organisations, such as RLSS, with relevant training to deliver professional support when required?
3.4 How would you seek feedback from anyone who reports being abused and ensure that they receive ongoing support? How would you learn lessons from any disclosures of abuse?

Evidenced:

Standard 3: Engaging with and caring for those who report having been harmed

- Victim/survivor charter or offer;
- Evidence of active communication and interaction with those who report having been harmed, either in groups or individually (dates of groups held, records of meetings);
- Relevant sections of minutes of meetings/forums held which include the voice and views of those who have been harmed;
- Evidence of how the views of those who report having been harmed, have informed practice within the Church body e.g. minutes, strategies, reports;
- Evidence of training provided for those who may receive a disclosure of abuse which addresses issues of engagement with and care of those who report having been harmed by abuse e.g. training content and supporting materials;
- Evidence of victim/survivor involvement in training or learning events;
- Evidence of signposting to other organisations with appropriately trained personnel to support those who report having been harmed, with evidence that the specific needs of the individual being referred have been taken into account e.g., case records about the person's needs and preferences;
- Evidence of review of practice and associated learning in relation to the experience of the Church response to those who have been harmed;
- Practice examples of supporting those who report having been harmed;
- Feedback (anonymised) from those who have been engaged with and/or provided with care and support.

Standard 4 – Effective management of allegations and concerns
Standard 4 – Effective Management of Allegations and Concerns

EF1 – The Church body will:
1. Ensure that it receives and responds to allegations in line with the nationally agreed policies.
2. Receive allegations and concerns respectfully, identifying and addressing the difficulties faced by those making disclosures and those receiving and responding to them.
3. Will always collect such information into an allegation as necessary, providing that this does not conflict with, or jeopardise the actions to be taken by the statutory authorities.
4. Provide support for those disclosing or raising a concern, and those against whom an allegation or concern is raised.
5. Maintain an appropriate level of confidentiality in respect of allegations or concerns, in line with accepted standards.
6. Keep accurate records of any allegations disclosed in accordance with data protection principles, national policies and procedures, and in a way that makes the information recorded easily accessible.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
4.1.1	The Church body has agreed to make arrangements to ensure that allegations are received and responded to in line with nationally agreed policies	Procedures for ensuring allegations are received and responded to within the nationally agreed policies are drafted	Procedures for ensuring allegations are received and responded to within the nationally agreed policies are in place	Procedures for ensuring allegations are received and responded to within the nationally agreed policies are embedded and widely understood	Procedures for ensuring allegations are received and responded to within the nationally agreed policies are regularly reviewed	Procedures for ensuring allegations are received and responded to within the nationally agreed policies are quality assured
4.1.2	The Church body has discussed respectful receipt of allegations and concerns, identifying the difficulties faced by those making disclosures and those receiving them	A procedure (or guidance) for receiving allegations and concerns (which includes acknowledgement of the difficulties faced by those making disclosures and those receiving them) is being produced	A procedure (or guidance) for receiving allegations and concerns is in place and there is emerging evidence of its use in practice	A procedure (or guidance) for receiving allegations and concerns is well known and covered in training. Its application is evident throughout practice	A procedure (or guidance) for receiving allegations and concerns is embedded and reviewed to assure that it is effective	A procedure (or guidance) for receiving allegations and concerns is developed and reviewed with those using the service
4.1.3	The Church body is committed to ensuring that relevant information about an allegation is gathered without jeopardising the actions of statutory agencies	A responding to allegations procedure covering expected information gathering without jeopardising actions taken by statutory agencies is being drafted	A responding to allegations procedure covering expected information gathering without jeopardising actions taken by statutory agencies is in place. There is	Members responding to disclosures consistently demonstrate understanding of the importance of information gathering without jeopardising actions taken	Responses to disclosures are regularly reviewed to ensure appropriate information gathering	Responses to disclosures are routinely discussed in reflective supervision to ensure appropriate information gathering and that there is active engagement

			emerging evidence of its use in practice	by statutory agencies		with statutory agencies to guard against delays and ensure that all information is gathered
4.1.4	The Church body is committed to support those disclosing abuse and those against whom a concern is raised	Systems for supporting those disclosing abuse and those against whom a concern is raised are being developed	Systems for supporting those disclosing abuse and those against whom a concern is raised are in place. There is emerging evidence of its use in practice	Systems for supporting those disclosing abuse and those against whom a concern is raised are embedded and evident throughout practice	Systems for supporting those disclosing abuse and those against whom a concern is raised are subject to internal and external review	Systems for supporting those disclosing abuse and those against whom a concern is raised are reviewed following feedback from those receiving the support
4.1.5	The Church body has recognised the need for confidentiality in respect of allegations and concerns	A confidentiality policy that is compliant with statutory and Church expectations is being drafted	A confidentiality policy is in place and there is emerging evidence of its use in practice	The confidentiality policy is well known and there is evidence of its application throughout the Church body	The confidentiality policy is regularly reviewed to ensure it remains relevant	The confidentiality policy is quality assured to ensure it is being followed
4.1.6	The Church body has recognised the need for accurate recording of allegations and concerns and the need for compliance with statutory and Church expectations	An information recording policy that is compliant with statutory and Church expectations is being drafted	An information recording policy is in place and there is emerging evidence of its use in practice	The information recording policy is well known and there is evidence of its application throughout the Church body. Records are accurate, kept securely and easily retrievable	The information recording policy is regularly reviewed to ensure it remains relevant. Mechanisms are in place to ensure day to day compliance	The information recording policy is quality assured to ensure it is being followed

EF2 – The Church body will:
1. **Ensure that all allegations of abuse are passed on without delay to the appropriate statutory authorities for investigation.**
2. **Comply with the stipulations of Vos Estis Lux Mundi (2019) and the CDF's Vademecum (2022) regarding responding to and supporting those who report having been harmed.**
3. **Where relevant, inform the CSSA of the existence of the allegations and share with them the details that would enable them to provide support if required.**

4. **Inform the trustees of the existence of allegations and confirm the responses being made.**
5. **Routinely seek to draw and share learning from any concerns that are raised as a way of developing its own and the wider 'One Church' practice.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
4.2.1	The Church body has committed to ensure that all allegations are passed on without delay to statutory authorities	A local policy to ensure allegations of abuse are reported to statutory authorities without delay is drafted	A local policy to ensure allegations of abuse are reported to statutory authorities without delay is in place and there is emerging evidence of appropriate reporting in practice	A local policy to ensure allegations of abuse are reported to statutory authorities without delay is embedded and widely understood. It is seen to be systematically implemented in practice	A local policy to ensure allegations of abuse are reported to statutory authorities without delay is regularly reviewed to ensure that it remains current. Mechanisms are in place to ensure compliance with its expectations	A local policy to ensure allegations of abuse are reported to statutory authorities without delay is quality assured, including with feedback from stakeholders, to ensure that it is achieving its purposes in practice
4.2.2	The Church body has committed to ensure that it will Comply with the stipulations of Vos Estis Lux Mundi (2019) and the CDF's Vademecum (2022) regarding responding to and supporting those who report having been harmed	A local policy to ensure allegations of abuse are responded to in accordance with Canon Law and other Church standards is drafted	A local policy to ensure allegations of abuse are responded to in accordance with Canon Law and other Church standards is in place and there is emerging evidence of responses in practice	A local policy to ensure allegations of abuse are responded to in accordance with Canon Law and other Church standards is embedded and widely understood. It is seen to be systematically implemented in practice	A local policy to ensure allegations of abuse are responded to in accordance with Canon Law and other Church standards is regularly reviewed to ensure that it remains current. Mechanisms are in place to ensure compliance with its expectations	A local policy to ensure allegations of abuse are responded to in accordance with Canon Law and other Church standards is quality assured to ensure that it is achieving its purposes in practice
4.2.3	The Church body has committed to inform the CSSA of the existence of the allegations and share with them the details that would enable them to provide support if required	A local policy (or guidance) as to when the CSSA should be informed about allegations has been drafted	A local policy (or guidance) as to when the CSSA should be informed about allegations is in place and there is emerging evidence of contacts being made	A local policy (or guidance) as to when the CSSA should be informed about allegations is embedded. It is seen to be systematically implemented in practice	A local policy (or guidance) as to when the CSSA should be informed about allegations is regularly reviewed to ensure that it remains current. Mechanisms are in place to ensure compliance with its expectations	A local policy (or guidance) as to when the CSSA should be informed about allegations is quality assured to ensure that it is achieving its purposes in practice
4.2.4	The trustees of the Church body have recognised their need to be informed	A local policy to ensure allegations of abuse are	A local policy to ensure allegations of abuse are	A local policy to ensure allegations of abuse are	A local policy to ensure allegations of abuse are reported to	A local policy to ensure allegations of abuse are

	of the existence of allegations and to confirm the response being made	reported to trustees is drafted	reported to trustees is in place and mechanisms for reporting are established	reported to trustees is embedded and there is ongoing evidence of routine and exception reporting	trustees is regularly reviewed to ensure that it remains effective. Trustees are encouraged to review responses to allegations	reported to trustees is quality assured to ensure that it is achieving its purposes in practice. Trustees are encouraged to reflect on and challenge responses to allegations
4.2.5	The Church body has committed to drawing and sharing learning from allegations that it receives	Arrangements for drawing and sharing learning from allegations are being developed	Reflections on allegations received with a view to drawing learning are seen to take place. Principles on when to liaise with the CSSA for developing learning from concerns are being drafted	There is evidence of allegations being routinely reflected on at a number of levels (e.g. leadership, safeguarding practitioners) and of this informing safeguarding practice. Consideration has been given to commissioning a formal internal or external review of practice. Principles on when to liaise with the CSSA to develop learning from concerns are in place and acted on	Learning from allegations, including from internal and external reviews, is shared across the organisation. Learning from the CSSA is shared throughout the organisation and wider 'One Church'	Internal and external reviews of practice are regularly undertaken and learning is disseminated to individuals, within and outside the organisation. The CSSA are approached for consultation and advice when needed and challenge is accepted to enhance reflection and learning. The Church body sees itself as a learning organisation and uses reflection on responses to allegations to support practice development for themselves and the wider 'One Church'

Evidenced:

Standard 4: Effective management of allegations and concerns

- A written plan for supporting those who make an allegation;
- Evidence of consultation with, liaison with other agencies including the RLSS, CSSA and other Church bodies where appropriate;
- Evidence of referral to statutory authorities, and evidence of taking the advice of and working together, where appropriate;
- Records of allegations/concerns received and records of the rationale underpinning the actions taken;
- Case records that demonstrate the process from receipt of referral information through various stages of response in accordance with agreed policy and procedure;
- Evidence of how records are kept confidentially and in accordance with data protection principles;
- Minutes of meetings, internal audit/quality assurance exercises and reports; action plans evidencing leadership oversight of effective management of allegations and concerns;
- Evidence of escalation of, or sharing of, relevant information with trustees e.g., emails, reports, minutes of meetings;
- Practice examples of appropriate referral to the Bishop/Religious Leader or delegate of matters for consideration as to whether canonical processes apply e.g., emails, reports, minutes of meetings;
- Evidence of how learning from allegations takes place e.g., practice reviews and events to share learning, records of reflective discussion.

Standard 5 – Management and Support of Subjects of Allegations and Concerns (Respondents)
Standard 5 – Management and Support of Subjects of Allegations and Concerns (respondents)

SMR 1 Management-The Church body will:

1. Have access to personnel that have been trained in providing management, monitoring and support of respondents.
2. Ensure that any canonical investigation into an allegation will take place in compliance with can. 1717 §§1- 3, other relevant provisions of the 1983 Code of Canon Law and any lawfully promulgated revisions, Sacramentorum Sanctitatis Tutela (as amended in 2010), Vos Estis Lux Mundi (2019), and the CDF's Vademecum (2022).
3. Access suitably accredited professionals to conduct risk assessments to inform the provision of safeguarding plans.
4. Seek advice and guidance from the CSSA when faced with a need to create and put in place a safeguarding plan for individuals with roles within the Church, without abrogation of responsibility by the Church body for putting plans in place.
5. Establish effective mechanisms for regular review of continuing safeguarding plans.
6. Maintain confidentiality whilst meeting disclosure requirements to statutory and canonical authorities.
7. On completion of any statutory investigation, the Church body will take forward the preliminary investigation in compliance with can. 1717 §§1- 3 and can. 695 (where applicable) and the relevant provisions of Vos Estis Lux Mundi (2019) and other applicable law and instruction from the Holy See.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
5.1.1	Discussions have been held on how the Church body will ensure access to trained personnel (to provide management, monitoring and support of respondents)	Policies and procedures regarding ensuring access to trained personnel have been drafted	All policies and procedures which ensure access to trained personnel are in place	Access to trained personnel is well established	Access to trained personnel is well established. There are mechanisms to review the quality of the work undertaken	Trained personnel and professionals conduct safety plans in all cases. All work is quality assured, including through feedback from respondents
5.1.2	The Church body is considering how they will ensure any canonical investigation into an allegation will take place in compliance with can. 1717 §§1- 3, other relevant provisions of the 1983 Code of Canon Law and any lawfully promulgated revisions, Sacramentorum Sanctitatis Tutela (as amended in 2010), Vos Estis Lux Mundi (2019), and the CDF's Vademecum (2022)	Policies to ensure any canonical investigation into an allegation will take place in compliance with applicable law and instruction from the Holy See are drafted	Policies to ensure canonical investigation will take place in compliance with applicable law and instruction from the Holy See are in place	Canonical investigations take place in compliance with applicable law and instruction from the Holy See	Canonical investigations are quality assured	Reflection and challenge is encouraged to ensure effectiveness of Canonical investigations
5.1.3	Discussions have been held on how the Church body will ensure access to suitably accredited professionals to conduct risk assessments to inform safety plans	Policies and procedures ensuring professionals conduct risk assessments to inform safety	Policies and procedures ensuring professionals conduct risk assessments to inform	Professionals are conducting risk assessments that inform safety plans	Access to professionals to conduct risk assessments/safety plans is well established	Trained professionals conduct risk assessments/safety plans in all cases. All work is quality assured, including

		plans have been drafted	safety plans are in place			through feedback from respondents
5.1.4	Discussions on when to seek advice from the CSSA when a safety plan is needed for individuals with roles within the Church body have taken place	Guidance to seek advice from the CSSA when a safety plan is needed for individuals with roles within the Church body has been drafted	There is clear guidance to seek advice from the CSSA when a safety plan is needed for individuals with roles within the Church body	Advice and guidance has been sought from the CSSA when a safety plan is needed for individuals with roles within the Church body. This is in line with written guidance.	Advice and guidance is routinely sought from the CSSA when a safety plan is needed for individuals with roles within the Church body. This is in line with written guidance.	A culture of reflection and challenge is encouraged when a safety plan is needed for individuals with roles within the Church body
5.1.5	The need to review safeguarding plans is recognised	Mechanisms to review any safeguarding plans are being developed	Mechanisms to review any safeguarding plans are in place	Safeguarding plans are regularly reviewed to ensure continuing effectiveness	Safeguarding plans are updated when individual circumstances change to ensure effectiveness	Safeguarding plans are updated and reviewed in conjunction will all relevant stakeholders
5.1.6	The need for Confidentiality agreements is recognised	Template Confidentiality agreements have been drafted	Confidentiality agreements are in place and they meet disclosure requirements to statutory and canonical authorities	Confidentiality agreements are in use	Confidentiality agreements are used in every case and explained to respondents clearly	Confidentiality agreements are reviewed as necessary
5.1.7	The Church body is considering how they will ensure, on completion of any statutory investigation, that the Church body will take forward the preliminary investigation in compliance with can. 1717 §§1- 3 and can. 695 (where applicable) and the relevant provisions of Vos Estis Lux Mundi (2019) and other applicable law and instruction from the Holy See	Policy is drafted to ensure that, on completion of any statutory investigation, the Church body will take forward preliminary investigation in compliance with applicable law and instruction from the Holy See	Policies to ensure preliminary investigations take place in compliance with applicable law and instruction from the Holy See are in place	Preliminary investigations take place in compliance with applicable law and instruction from the Holy See	Preliminary investigations are quality assured	Reflection and challenge is encouraged to ensure effectiveness of preliminary investigations

SMR2 Support – The Church body will:
1. **Adhere to national policies and/or practice guidance that set out how a respondent is to be informed when an allegation has been made, and supported thereafter.**
2. **Be mindful of the impact on the wellbeing of the respondent and appoint a support person with the responsibility for listening to and addressing the pastoral needs of the respondent.**
3. **Access suitably accredited professionals to deliver professional mental health and other appropriate support when required.**
4. **Ensure that the respondent has access to suitable legal representation when subject to statutory/canonical investigation.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
5.2.1	The need for local procedures to adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made are being discussed	Local procedures that adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made have been drafted	Local procedures that adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made are in place	Local procedures that adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made are well established	Local procedures that adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made are reviewed to ensure effectiveness	Local procedures that adhere to national policies/practice guidance regarding informing and supporting a respondent when an allegation has been made are quality assured, including gaining feedback from respondents
5.2.2	The impact on the wellbeing of respondents to allegations and the need to appoint a support person to listen and address their pastoral needs is recognised	There is some evidence in guidance or practice of respondents' wellbeing being monitored and their being provided with a support person	There is an expectation that respondents' wellbeing is monitored and that they are always provided with a support person, this is consistently seen in practice	The wellbeing of respondents and their access to and engagement with a support person is monitored throughout the investigation of an allegation	Clear evidence is available throughout practice examples of feedback from respondents in respect of their wellbeing and access to a support person. Appropriate contact is made with the support person to ensure that any relevant information is shared	The Church body evaluates the wellbeing of respondents and their access to support systematically, drawing learning to inform future practice
5.2.3	The need for access to professionals to deliver mental health and other support to respondents is recognised	Access to professionals to deliver mental health and other support to respondents is being discussed	Access to professionals to deliver mental health and other support to respondents is established	Access to professionals to deliver mental health and other support to respondents is routinely acted on	Access to professionals to deliver mental health and other support to respondents is reviewed to ensure it is fit for purpose	Access to professionals to deliver mental health and other support to respondents is always offered and acted on and services used are reviewed to ensure they are effective
5.2.4	The Church body has recognised the need for respondents to have access to suitable legal representation when	Local procedures for managing allegations, referencing the	Local procedures for managing allegations, referencing the	Local procedures for managing allegations, referencing the	Local procedures for managing allegations, referencing the	Respondents are supported to access legal representation that meets their

subject to statutory/ canonical investigation	need for respondents to have access to suitable legal representation when subject to statutory/ canonical investigation, are being drafted	need for respondents to have access to suitable legal representation when subject to statutory/ canonical investigation, are in place	need for respondents to have access to suitable legal representation when subject to statutory/ canonical investigation, are embedded, with respondents routinely advised and signposted to sources of legal representation	need for respondents to have access to suitable legal representation when subject to statutory/ canonical investigation, are reviewed to ensure their effectiveness. Regular checks are made with respondents to support their access to legal representation	needs throughout the duration of investigations. Learning from this aspect of practice is incorporated into reviews of procedures

Self-audit:

Standard 5 – Management and Support of Subjects of Allegations and Concerns (respondents)

5.1 Do have arrangements to access personnel that have been trained in risk assessment and providing management, monitoring and support of respondents, such as RLSS?

5.2 Are you aware of what your role would be in the implementation, monitoring and review of any Care & Management Plan that might be agreed within your Religious Life Group?

5.3 Could you signpost a respondent to sources of legal support for them in Statutory and/or Canonical Investigations?

5.4 How would you support the respondent's wellbeing (emotionally, spiritually and physically)?

5.5 Do you have a process for facilitating leave from sacred ministry and managing the return of the respondent to ministry if there is no case to answer?

Evidenced:

Standard 5: Management and support of subjects of allegations and concerns (respondents)

- Case records that demonstrate consideration of the particular health and welfare needs of respondents;
- Records that demonstrate that a support person with responsibility for listening and addressing pastoral needs is offered and put in place if required; and that demonstrate that if support is declined, the offer remains open to the individual;
- Information that demonstrates individuals put in place for the purpose of monitoring or support are suitably trained and experienced people;
- Records that show, that where required, suitably accredited professionals to deliver professional mental health and other appropriate support are accessed;
- Safeguarding risk assessments undertaken by appropriately qualified and experienced assessors;
- Safeguarding Plans that make a clear connection between risk information and the actions being taken to protect others; that detail the arrangements for risk management including roles and responsibilities; that detail support arrangements, tailored to the need of the individual; which are reviewed within timescale or sooner if circumstances change;
- Case records that demonstrate actions taken if risks change or new information arises;
- Practice examples of canonical investigations taking place in compliance with applicable law and instruction from the Holy See;
- Case records that demonstrate practice guidance on informing and supporting respondents has been followed;
- Case records that demonstrate how confidentiality is maintained, whilst ensuring that this is not an inappropriate barrier to information sharing with relevant authorities.

Standard 6 – Robust Human Resource Management

HRM1 Recruitment – The Church body will:
1. Ensure that all selection and screening procedures have been completed and the results acted upon.
2. Require all overseas personnel, and those that are new to ministry, to have received training in the safeguarding standards and to have a good understanding of their content, prior to being involved in active ministry.
3. Require the completion of all vetting checks in a timely way.
4. Keep accurate records of those who have committed offences, noting their location, and management plans, and sharing this information with the CSSA upon request

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
6.1.1	The Church body has had discussions to work towards ensuring that those working with children or adults at risk are appropriately recruited, vetted, and supported to deliver safeguarding standards in practice	Policies to ensure all selection and screening procedures are followed have been drafted	Policies to ensure all selection and screening procedures are followed are in place	Policies to ensure all selection and screening procedures are followed are embedded and checks to ensure compliance are being developed	All selection and screening procedures are reviewed for compliance	Selection and screening procedures are quality assured
6.1.2	The need to ensure all overseas personnel, and those new to the ministry, will receive training in the safeguarding standards is recognised	Plans are being drafted to ensure all overseas personnel, and those new to the ministry, will receive training in the safeguarding standards	Plans to ensure all overseas personnel, and those new to the ministry, will receive training in the safeguarding standards are in place	All overseas personnel, and those new to the ministry, are receiving training in the safeguarding standards	All overseas personnel, and those new to the ministry, are expected to show a good understanding of the safeguarding standards prior to being involved in active ministry	The training for overseas personnel, and those new to the ministry is reviewed and updated based on feedback and quality assurance
6.1.3	The Church body have sought advice regarding completing vetting checks in a timely way	Procedure to ensure the timely completion of vetting checks is drafted	Procedure to ensure the timely completion of vetting checks is in place	Timely completion of vetting checks is undertaken and an accurate record of results kept	Consideration of reviewing the vetting processes is underway	Vetting check processes are reviewed regularly
6.1.4	The Church body recognises the need to keep accurate records of	Consideration of how to keep accurate records of those who have	A system to keep accurate records of those who have	A system for keeping accurate records of	A system for keeping accurate records of those	A system for keeping accurate records of those

those who have committed offences	committed offences is in progress	committed offences is in place	those who have committed offences, noting their location and management plans is in place. Procedures to share information in a timely way are being developed	who have committed offences, noting their location and management plans is regularly reviewed to ensure records are up to date and relevant. Information is shared with the CSSA on request	who have committed offences, noting their location and management plans is regularly quality assured to ensure records are fit for purpose. Information is shared with the CSSA in a timely way

HRM2 Human Resource Management and Support – The Church body will:
1. **Create and publish a complaints policy that sets down how a complaint can be made, and how it will be responded to.**
2. **Respond to all complaints in a way that aims to achieve an early resolution.**
3. **Ensure that the whistle blowing policy is readily available to all personnel to enable them to report a concern.**
4. **Provide or access training in the supervision and management of known or suspected offenders.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
6.2.1	The Church body has agreed the need for a complaints policy to be adopted	A complaints policy that sets out how a complaint can be made and how it will be responded to is drafted	A complaints policy that sets out how a complaint can be made and how it will be responded to is in place and publicly available	The complaints policy that sets out how a complaint can be made and how it will be responded to is actively promoted	The complaints policy that sets out how a complaint can be made and how it will be responded to is regularly reviewed. The policy is actively promoted to individual and groups of stakeholders with feedback sought to ensure that they are aware of it	The complaints policy is robust. Responses to complaints are reviewed and there is a culture of learning from concerns that are raised. Relevant stakeholders are involved in the ongoing development of the complaint policy
6.2.2	There is no complaints policy in place, however the church body has discussed the need for complaints practice which aims to achieve early resolution	There is a complaints policy in place, and the Church body has agreed the need for complaints practice which aims to achieve early resolution	Complaints practice that demonstrates that a complaint will be responded to in a way that aims to achieve early resolution is in place	Complaints practice which demonstrates that a complaint will be responded to in a way that aims to achieve early resolution is promoted	Complaints practice ensures complaints are responded to in a way that aims to achieve early resolution and takes into account diverse needs	Complaints practice which ensures complaints are responded to in a way that aims to achieve early resolution and takes into account diverse needs is reviewed with

						feedback from complainants
6.2.3	The Church body has agreed the need for a whistle blowing policy to be adopted	A whistle blowing policy is drafted	A whistle blowing policy is in place and available to all relevant personnel, to enable them to report a concern	A whistle blowing policy is easily available to all relevant personnel, and is actively promoted, to enable them to report a concern	The whistle blowing policy is regularly reviewed. The policy is actively promoted to all relevant personnel with feedback sought to ensure that they are aware of it	The whistle blowing policy is robust. Responses to whistle blowing are reviewed and there is a culture of learning from concerns that are raised. Relevant personnel are involved in the ongoing development of the whistleblowing policy
6.2.4	Access to training in the supervision and management of known or suspected offenders is being considered	Access to training in the supervision and management of known or suspected offenders is being arranged	Access to training in the supervision and management of known or suspected offenders is in place	Training in the supervision and management of known or suspected offenders is embedded for all relevant staff	Training in the supervision and management of known offenders is quality assured	Regularly reviews using feedback from delegates are undertaken to ensure training is relevant and fit for purpose

Standard 6 – Robust Human Resource Management

6.1 Has everyone within your Religious Life Group had a vetting check (such as DBS) within the last three years? If not, please provide a reason.
6.2 How do you monitor the vetting status of your members or volunteers?
6.3 What action would you take if a vetting check returned an adverse finding, such as a criminal caution or conviction?
6.4 Do all personnel receive training in safeguarding and have a good understanding prior to being involved in active ministry?
6.5 If you have overseas members or volunteers, what steps do you take to ensure their vetting, general suitability and preparedness prior to them commencing active ministry?
6.6 Do you have a system to, should it become necessary, keep accurate records of those who pose safeguarding concerns and their management plans?
6.7 Do you have complaints and whistle blowing policies?

Evidenced:

Standard 6: Robust human resource management

- Records of safer recruitment procedures being followed e.g., application/registration forms, references, relevant screening;
- Evidence of DBS recheck timescales being tracked;
- Blemished DBS risk assessments and evidence of decision making process;
- Induction process resources;
- Training records of clergy and religious from overseas being trained in the Standards before commencing ministry;
- Training materials and attendance lists;
- Whistleblowing policy for the diocese;
- Complaints policy for the diocese;
- Records demonstrating safeguarding complaints are responded to in accordance with policy.

Standard 7 – Training and Support for Safeguarding
Standard 7 – Training and Support for Safeguarding

TS1 Training – The Church body will:

1. Ensure that all its members who require it, including those in formation, have access to and avail themselves of nationally agreed safeguarding training to support their contribution to the Church body's safeguarding practice.

2. Look at ways in which the specific training needs of key personnel, such as safeguarding leads or those in leadership roles, can be met.

3. Regularly review what training is provided and seek ways in which this can be developed further.

4. Produce a training needs analysis to facilitate the provision of training.

5. Avail themselves of locally provided safeguarding training from relevant organisations in the area.

6. Keep records of those who avail themselves of training opportunities and proactively engage with those who do not attend.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
7.1.1	The need to provide and access ongoing training and support to everyone involved in safeguarding to deliver the expectations of the safeguarding standards is agreed and discussions regarding how training needs will be met are underway	The principles for what training provision should be available to whom is agreed and progress is being made to ensure relevant training can be accessed	A programme of training provision is in place	A programme of training provision is embedded and plans are in place to review what is provided	The programme of training provision has been reviewed and developed where necessary based on feedback and learning	Training content is quality assured against best practice examples, ensuring that changes to safeguarding practice are rapidly incorporated
7.1.2	The need to provide and access ongoing training and support to everyone involved in safeguarding to deliver the expectations of the safeguarding standards is agreed and discussions regarding how training needs will be met are underway	The principles for what training provision should be available to whom is agreed and progress is being made to ensure relevant training can be accessed	A programme of training provision, (including nationally agreed safeguarding training, and training specific to safeguarding leads and those in leadership roles), is in place	A programme of training provision, (including nationally agreed safeguarding training, and training specific to safeguarding leads and those in leadership roles), is embedded and reviewed	The programme of training provision, (including nationally agreed safeguarding training, and training specific to safeguarding leads and those in leadership roles) is reviewed and developed	Training content is quality assured against best practice examples, ensuring that changes to safeguarding practice are rapidly incorporated
7.1.3	Not applicable without a training provision in place	Not applicable without a training provision in place	Not applicable without a training	There is a plan to review the training provision to	The programme of training provision has been reviewed	The programme of training provision is regularly reviewed to ensure it is

	Basic	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
			provision in place	ensure effectiveness	and developed where necessary	meeting the needs of staff All training is reviewed, including via feedback from delegates, to ensure it is fit for purpose
7.1.4	The need to create a Training Needs Analysis is recognised	A Training Needs Analysis is being developed	A Training Needs Analysis has been completed	There is a procedure in place to review the Training Needs Analysis	The Training Needs Analysis is regularly reviewed and updated	The Training Needs Analysis is dynamic based on what training is required and what is available
7.1.5	The need for staff to attend locally provided safeguarding training from relevant organisations is recognised	There has been consideration of how staff can attend locally provided safeguarding training from relevant organisations. Links have been made with local providers and details of training circulated	There is some evidence of staff attending locally provided safeguarding training from relevant organisations	There is evidence of staff routinely attending locally provided safeguarding training from relevant organisations in the area	There is pro-active identification of individual and groups of staff who would benefit from local training provision, with new opportunities being sought out to meet any gaps in provision	The effectiveness of locally provided safeguarding training is reviewed and there is a system in place to seek out new training opportunities
7.1.6	The need to provide and access ongoing training and support to everyone involved in safeguarding to deliver the expectations of the safeguarding standards is agreed and discussions regarding how training needs will be met are underway	There are discussions regarding how attendance at training can be facilitated, encouraged and recorded	There is guidance regarding how attendance at training can be facilitated, encouraged and recorded	Attendance at training is facilitated, encouraged and recorded. There is a process in place to proactively encourage those who do not attend	Training opportunities are discussed in staff meetings and actively promoted. Non-compliance with training expectations is addressed	Training opportunities are discussed in staff supervision as a standing item, including when training is not being attended. Staff are encouraged to reflect on how training enhances their practice

TS2 Support – The Leadership of the Church body will:
    1. **Prioritise the provision of effective safeguarding training which delivers and promotes critical reflection on practice.**
    2. **Raise an alert to its trustees and notify the CSSA on any failures to meet its training requirements which may impact negatively on its practice.**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
7.2.1	The leadership have acknowledged the need to prioritise effective safeguarding training	There is a policy in which the leadership have identified the importance of effective safeguarding	Leaders are seen to promote the prioritisation of the provision of effective	Leaders clearly promote the prioritisation of safeguarding training throughout the Church body	The prioritisation of training is a standing agenda item for Leadership meetings and the importance	The prioritisation of training provision is seen throughout the organisation and it and the importance of critical reflection on practice is

		training in the Church body	safeguarding training		of critical reflection on practice is recognised in leadership forums	modelled by Leadership
7.2.2	The need for a procedure to raise any concerns regarding failures to meet training requirements with trustees is recognised	A procedure to raise any concerns regarding failures to meet training requirements with trustees is being drafted	A procedure to raise any concerns regarding failures to meet training requirements with trustees is in place	Trustees have active oversight of training compliance. Any failures to meet its training requirements have been raised to trustees and the CSSA by the leadership of the church body	Trustees feedback to relevant stakeholders on training compliance. The leadership of the church body discuss what needs to happen to remedy any failures to meet its training requirements	The leadership of the church body welcome reflection and challenge to ensure it meets its training requirements

Standard 7 – Training and Support for Safeguarding
7.1 What safeguarding training have your members completed?
7.2 How often do they attend refresher training?
7.3 How do you record, monitor and ensure attendance at safeguarding training?
7.4 How do you know the training is effective?
7.5 How do you assess what further training is needed?
7.6 Has your Safeguarding Lead attended training relevant to their lead role?

Evidenced:

Standard 7: Training and support for safeguarding

- Training records including a training needs analysis, record of courses offered, expected; attendees, and tracking of attendance;
- Training feedback;
- Training materials;
- Evidence of attendance at training with external organisations;
- Extracts from minutes of leadership meetings containing reference to safeguarding training provision and attendance;
- Evidence of church leaders promoting attendance at safeguarding training (emails, newsletters, other internal communication).

Standard 8 – Quality Assurance and Continuous Improvement

QA1 Quality Assurance – The Church body will:

1. Put in place and maintain arrangements that will evaluate compliance with the agreed safeguarding standards in all its various activities.

2. Proactively engage with and hear the voice of those who report having been harmed to inform and improve practice.

3. Regularly track the level of compliance as shown by its own auditing processes.

4. Report any deficits in its compliance to the agreed standards along with details of any actions to be taken to address the situation to the competent ordinary or superior, to its trustees, and to the Catholic Safeguarding Standards

5. Analyse concerns and allegations, and complaints received and create innovative ways in which it can draw learning from its practice to build improvements.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
8.1.1	Discussions regarding the mechanisms needed for quality assurance/evaluation of compliance have begun	Arrangements that will evaluate compliance with the agreed safeguarding standards have been drafted	Arrangements that will evaluate compliance with the agreed safeguarding standards are in place	Arrangements that evaluate compliance with the agreed safeguarding standards are embedded with evidence of delivery in practice	There is an internal audit programme that evaluates compliance with the agreed safeguarding standards and makes recommendations for change	The internal audit programme takes a high support/high challenge approach to evaluate compliance with the agreed safeguarding standards and recommendations for change
8.1.2	The importance of engaging with and listening to those who report having been harmed is recognised	Policies to engage with and hear the voices of those who report having been harmed are being developed	Policies to engage with and hear the voices of those who report having been harmed are in place	Policies to engage with and hear the voices of those who report having been harmed are in place with emerging evidence of their delivery in practice	The Church body proactively seeks to engage with and hear the voices of those who report having been harmed and this leads to changes in practice where needed	The Church body creatively seeks to engage with and hear the voices of those who report having been harmed and uses this to inform and develop policy and practice
8.1.3	There is recognition of the need for ways of tracking the level of compliance with the organisation's own processes	Ways of tracking the level of compliance with the organisation's own processes	An internal audit process is being developed to guide the tracking of the level of compliance	An internal audit process is established to guide the tracking of the level of compliance with the	An internal audit process is established to guide the tracking of the quality of practice against the organisation's own processes	Internal and external audit outcomes guide the tracking of the quality of practice and compliance with the

		are being considered	with the organisation's own processes	organisation's own processes		organisation's own processes
8.1.4	The Church body acknowledges the need to report deficits in its compliance to the agreed standards	The Church body monitors deficits in its compliance to the agreed standards	The Church body reports deficits in its compliance to the agreed standards to the competent ordinary or superior, to its trustees, and to the CSSA	The Church body reports the actions it will take to address deficits in its compliance to the agreed standards to the competent ordinary or superior, to its trustees, and to the CSSA	The Church body tracks the effectiveness of the actions it has taken to address deficits in its compliance to the agreed standards	The Church body reports on the effectiveness of the actions it has taken to address deficits in its compliance to the agreed standards to its trustees and the CSSA
8.1.5	The Church body acknowledges the need to learn from concerns, allegations and complaints	Ways to learn from concerns, allegations and complaints are being actively considered	The Church body tracks the outcomes of concerns, allegations and complaints	Learning from concerns, allegations and complaints is consistently encouraged and seen	There is routine analysis to learn from concerns, allegations and complaints and clear links between this and improvements in practice	There is routine analysis to learn from concerns, allegations and complaints and clear links between this and improvements in practice

QA2 Continuous Improvement – The Church body will:
1. **Create a three-year rolling safeguarding implementation plan.**
2. **Specify who is responsible for implementing agreed actions within the plan.**
3. **Make available the necessary resources to track and complete the agreed actions.**
4. **Produce and publish an annual safeguarding report for members, trustees, and other stakeholders.**
5. **Regularly review its implementation of and adherence to the national mandatory safeguarding policies (at least every three years).**

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
8.2.1	Discussions regarding a 3 year rolling safeguarding implementation plan have begun	A 3 year rolling safeguarding implementation plan has been drafted	A 3 year rolling safeguarding implementation plan is in place	A 3 year rolling safeguarding implementation plan is embedded with all members of the church body	A 3 year rolling safeguarding implementation plan is established with stakeholders aware of its content	A 3 year rolling safeguarding implementation plan is available for scrutiny by all stakeholders
8.2.2	There has been some consideration of who will be responsible for implementing action within the plan	It has been agreed who will be responsible for implementing actions within the plan	Those who will be responsible for implementing actions within the plan are aware of their responsibilities	Those responsible for implementing actions within the plan are undertaking their responsibilities	Those responsible for implementing actions within the plan are making progress with, and accountable for, their responsibilities	Those responsible for implementing actions within the plan are making progress with their responsibilities and are welcoming of support and challenge

						regarding progress
8.2.3	The need to allocate resources to track and complete the agreed actions is recognised	Resources to track and complete the agreed actions have been considered	Resources to track and complete the agreed actions have been implemented	Resources are in place to track and complete the agreed actions	The agreed actions are being tracked to ensure completion in a timely way	Where there are difficulties with completion of the agreed actions these are recognised, raised and resolved at an early stage
8.2.4	The need for an annual safeguarding report for members, trustees and other stakeholders is recognised	Consideration with regard to producing an annual safeguarding report for members, trustees and other stakeholders is in progress	A plan for producing an annual safeguarding report for members, trustees and other stakeholders is agreed	An annual safeguarding report for members, trustees and other stakeholders is in progress	An annual safeguarding report for members, trustees and other stakeholders has been published	An annual safeguarding report is promoted, with comment and challenge welcomed
8.2.5	Not applicable without a plan in place	Not applicable without a plan in place	A programme to regularly review the plan's implementation and adherence to national mandatory safeguarding policies is under consideration	A programme to regularly review the plan's implementation and adherence to national mandatory safeguarding policies is agreed	A programme to regularly review the plan's implementation and adherence to national mandatory safeguarding policies is underway	A programme to regularly review the plan's implementation and adherence to national mandatory safeguarding policies is embedded and involves leadership, members, stakeholders and survivors

QA3 Continuous Improvement – The Church body will:

1. Facilitate the independent review of their compliance with the safeguarding standards undertaken by the Catholic Safeguarding Standards Agency (CSSA) or the subcontractor appointed by the CSSA in accordance with the contractual agreement between them.
2. Adopt the recommendations arising from any CSSA review incorporating these into its safeguarding implementation plan.
3. Provide updates to the CSSA on progress in implementing the recommendations.
4. Publish any CSSA review and report this to its stakeholders.

	Basic – the standard is accepted and the church body is committed to action	Early Progress	Firm progress	Results being achieved	Comprehensive assurance	Exemplary
8.3.1	The Church body has entered a contractual agreement with the CSSA and is discussing ways to facilitate independent review of their compliance with the safeguarding standards	The Church body has agreed arrangements with the CSSA for an independent review of their compliance with the	The church body has facilitated an independent review of their compliance of the safeguarding standards with the CSSA	The church body has had discussions with the CSSA about further quality assurance activity	The church body has identified other areas for thematic audit	The church body routinely engages with the CSSA to identify and participate in quality assurance activity

		safeguarding standards				
8.3.2	Where a review has already taken place the Church body is considering how to take forward any recommendations	Where a review has already taken place the Church body is working on incorporating any recommendations into its safeguarding implementation plan	Where a review has already taken place the Church body has incorporated recommendations into its safeguarding plan	Where a review has already taken place the Church body is actively monitoring progression against the recommendations	Where a review has already taken place the Church body is actively promoting adoption of recommendations to facilitate improvement	Where a review has already taken place the Church body is actively seeking feedback from all stakeholders regarding the impact of any changes in practice
8.3.3	The Church body is aware of the need to update the CSSA on progress in implementing recommendations	There is consideration of how to update the CSSA on progress in implementing the recommendations	There is a plan to update the CSSA on progress in implementing the recommendations	The church body has updated the CSSA on progress in implementing the recommendations	The church body has updated the CSSA on the impact of the recommendations on practice	The church body has updated the CSSA on any other improvements they have made
8.3.4	CSSA initial findings, prior to sharing of reviews and reports, have been received and receipt acknowledged	CSSA initial findings, prior to sharing of reviews and reports, have been shared with stakeholders	CSSA reviews and reports have been received and receipt acknowledged	CSSA reviews and reports have been shared with stakeholders	CSSA reviews and reports have been shared and discussed with stakeholders	CSSA reviews and reports have been shared and discussed with all stakeholders with opportunities for feedback and reflections

Standard 8 – Quality Assurance and Continuous Improvement
8.1 How do you evaluate the quality of your own safeguarding practice?
8.2 Are concerns about safeguarding compliance reported to trustees, the regulator and statutory authorities (police and/or Charity Commission) when appropriate?

Evidenced:

Standard 8: Quality assurance and continuous improvement

- Self-evaluation against the national Safeguarding Standards and self-developed action plan;
- Policies and procedures that are relied upon; records of review and revision;
- Practice or case reviews, learning events, completion of actions arising from reviews;
- Internal or external audit reports; action plans demonstrating progress towards or completion of actions arising;
- Records of escalation of inability to comply with the standards to Trustees and notification to the CSSA; an action plan that addresses steps towards compliance; Records demonstrating how feedback informs the development of safeguarding practice e.g., workplans, working groups, action plans; consultation exercises;
- Evidence of liaison with the CSSA for purposes of consultation (emails, written records);
- Evidence of implementing CSSA recommendations (action trackers, written records);
- Annual safeguarding report;
- Management information produced for committees or trustees.