Catholic Safeguarding Standards Agency

Religious of the Assumption

Baseline Audit Report
July 2025

Catholic Safeguarding Standards Agency

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1. Introduction

1.1 This report is a baseline audit of the safeguarding arrangements for the Religious of the Assumption[1] (ROTA). It is undertaken as part of the CSSA programme of baseline audits for Religious Life Groups (RLGs) in England and Wales.

1.2 ROTA are an international catholic congregation founded in 1839 with the aspiration of transforming society through education. Within ROTA's European Province sits the territory of England with 30 members (ROTA currently has no active presence in Wales) and this is itself split into the smaller communities of Kensington, St Catherine's, Twickenham and Wanstead. In line with their educational mission, part of the Kensington campus accommodates Milleret House which is the administrative hub of the English territory and offers outreach to the Kensington community via retreats and groups. St Catherine's is a care home setting for sick and elderly Sisters of the group and accommodates up to 12 residents. The home, which employs 13 nurses, senior carers and healthcare assistants, does not fall under the remit of the Care Quality Commission (CQC). The Twickenham community offers a praying presence for University students and practical living advice and spiritual guidance if requested. The Wanstead community is described as an ethnically diverse centre offering retreats and spiritual direction. In total ROTA have 24 employees including the nursing staff at St Catherine's as well as administrative, financial and maintenance staff; most of who have access to vulnerable adults in some form. In addition to the communities mentioned above, ROTA provide accommodation and support for volunteers in Newcastle with four volunteers and in Middlesborough with two volunteers.

1.3 This audit covers the period up to the 12 months preceding the audit week which took place in January 2025. It will cover ROTA's activities in the communities of Kensington, St Catherine's, Twickenham and Wanstead. A separate children's charity is responsible for the safeguarding arrangements for the after-school work

[1] The Religious if the Assumption's registered charity number is 233084.

activities. ROTA are members of the RLSS[2]. Any safeguarding work undertaken by the RLSS or the diocese safeguarding team will not be explored within the boundaries of this audit.

1.4 The CSSA has devised a categorisation scheme for Religious Life Groups taking part in safeguarding audits. This categorises groups on a scale from *Level 1* (a small community with minimal outreach and no known safeguarding concerns), *Level 2* (a medium sized community with some outreach with vulnerable populations and/or providing some diocesan activities such as a Parish Priest) or *Level 3* (a large community and/or one with significant outreach with vulnerable populations and/or a disproportionately high number of open safeguarding cases). ROTA have been assigned to a Level 2 audit due to the size of the group, and the activities they undertake including care provision.

1.5 The CSSA recognises the rich diversity of the Religious, and acknowledges that the Religious Life Groups within any particular category may vary significantly in terms of size, ministry and safeguarding practice. Consequently, CSSA Analysts may use professional judgement to ensure that Religious Life Groups are graded against the national standards in such a way that reflects their uniqueness.

2. Methodology

2.1 Both the Provincial Lead and the Safeguarding Lead, who are also both trustees for the charity, were initially contacted by the CSSA Analyst via e-mail on the 18th October 2024 to notify of the intention to complete a safeguarding audit and the relevant Level 2 audit documents were shared. A series of e-mails then followed between the CSSA Analyst and the Safeguarding Lead which determined a mutually suitable date and time for the audit week and in-person visit and set the submission date of the self-assessment form.

[2] RLSS are an independent team of Safeguarding professionals offering Safeguarding services to the Religious of the Catholic Church in England and Wales

2.2 The Level 2 self-assessment (an assessment tool which provides background information on ROTA's adherence to the eight individual National Safeguarding Standards[3]) was completed by the group and then e-mailed to the CSSA with accompanying evidence on the 12th December 2024. Following the review of the self-assessment and the supporting evidence provided, the CSSA Analyst completed the in-person visit at the Kensington community in Kensington Square, London on the 29th January 2025.

2.3 Prior to the inspection the RLSS were contacted to verify the group's engagement. During the in-person visit the CSSA Analyst had the opportunity to meet with and interview the Safeguarding Lead (who is also a trustee and territorial bursar), the lay Safeguarding Representative (who is also the trustee administrator) and the Care Manager of St Catherine's community. Other evidence that has been considered in the preparation of this report in reaching decisions regarding scoring for the individual safeguarding standards can be found in the appendix.

2.4 The evidence provided in both the self-assessment form and the in-person visit has been assessed against the Level 2 Maturity Matrix and ratings for each standard have been assigned (see Section 3 Audit Grading), together with an overall grade.

2.5 No case audit work has been undertaken during the course of this audit as there have been no safeguarding allegations or concerns reported involving ROTA within the last 12 months and hence there are no current case files to pass comment on.

3. Audit grading

3.1 Practice was assessed against the eight national safeguarding standards and graded in accordance with the CSSA Maturity Matrix for Level 2 Religious Life Groups. Potential audit ratings against each standard, and the final overall rating are scored as: Below Basic, Basic, Early Progress, Firm Progress, Results Being Achieved,

[3] A description and full details of the Standards can be found on the CSSA website here

Comprehensive Assurance and Exemplary. ROTA have received an overall rating of **Results Being Achieved**.

Overall grading	Results Being Achieved
Standard 1 - Safeguarding is embedded in the Church body's leadership, governance, ministry and culture	Firm Progress
Standard 2 - Communicating the Church's safeguarding message	Firm Progress
Standard 3 - Engaging with and caring for those who report having been harmed	Results Being Achieved
Standard 4 - Effective management of allegations and concerns	Results Being Achieved
Standard 5 - Management and support of subjects of allegations and concerns (respondents)	Comprehensive Assurance
Standard 6 - Robust human resource management	Results Being Achieved
Standard 7 - Training and support for safeguarding	Results Being Achieved
Standard 8 - Quality assurance and continuous Improvement	Firm Progress

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4. Audit findings against each standard

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

Strengths

4.1.1 ROTA have a current Safeguarding Policy in place which was last reviewed in September 2024 and has been tailored to the territory of England. The policy is reviewed annually and approved by the trustee board as evidenced in trustee meeting minutes and relevant parties are consulted as evidenced in e-mail trails. Although the next annual review date is set for September 2025 the document is currently under review again with some new inclusions. The document in review also contains a Practice Guidance and Whistleblowing Policy section which are positive additions to the current document and will assist in strengthening safeguarding practices within the group. The Safeguarding Policy begins with a Statement of Principles that outlines a zero tolerance to abuse and advises that safeguarding is the responsibility of everyone in the church. It covers definitions of abuse and accompanying legislation, practice guidance, procedures on encountering abuse and roles and responsibilities of key members are described. St Catherine's also have a Policy and Procedures for Safeguarding Adults document.

4.1.2 Reviewed policies are passed to the board of trustees to discuss and sign off. When the safeguarding policies have been approved by trustees they are circulated to all members, volunteers and employees who are required to sign to say they have read and understand the document.

4.1.3 ROTA have appointed a Safeguarding Lead, who has completed role-specific training, and a Safeguarding Representative. The Safeguarding Representative is a lay person who is also the trustee administrator and safeguarding forms only part of her role. Both the Safeguarding Lead and Safeguarding Representative report feeling well-supported by the trustees in their safeguarding responsibilities and a positive culture of safeguarding amongst leaders, members and employees is described.

4.1.4 There are six trustees of ROTA, including the Safeguarding Lead, all of whom are Sisters. Trustee meetings are held at least quarterly. The Safeguarding Lead reports that in the past 12 months, with encouragement from the RLSS, the group have increased the profile of safeguarding and it now features as a separate standing item on all trustee meeting agendas. The Care Manager provides a report for the trustees updating on matters at St Catherine's and includes any safeguarding concerns if they arise. Although there have been no serious safeguarding concerns raised in the last 12 months there is a recognition from the group that low-level concerns can escalate and so records of all concerns are discussed. Policy directs that the Safeguarding Lead is informed of all safeguarding concerns. The Safeguarding Lead is a trustee and therefore any new allegations of abuse would automatically be known by a trustee. However, the Safeguarding Policy and the Staff Handbook also outline the process of reporting to the trustees in case in future the Safeguarding Lead does not also hold a trustee position.

4.1.5 In addition to trustee meetings which have safeguarding as a standing agenda item, ROTA have Provincial Council meetings. The Provincial and her Council are responsible for the spiritual and missionary outreach of the whole Province. These meetings are held monthly virtually and in-person every three months.

4.1.6 The Staff Handbook records that there is a good relationship between St Catherine's and the local primary health care services and acute hospital services and the importance of maintaining this relationship is emphasised. The Care Manager has supervision with employees at St Catherine's four times per year and safeguarding is a fixed topic of discussion at every meeting.

4.1.7 The RLSS have confirmed that ROTA have liaised with their membership team, safeguarding team and training team, including liaison regarding their revised Safeguarding Policy. Attendance at 16 safeguarding training sessions in total has been verified by the RLSS. Representatives from ROTA attend the annual Safeguarding Conference which further evidences a willingness from the group to learn and to network.

4.1.8 The Safeguarding Representative reports that the group receives regular updates on safeguarding practice from the CSSA, from the RLSS and from their lawyers. The Safeguarding representative then assesses the information received to see who requires it and forwards it on to the relevant people.

Areas for development

4.1.9 In order to offer greater transparency and demonstrate how safeguarding processes are embedded, it would benefit ROTA to publicise their safeguarding policy. To this end it is recommended that the Safeguarding Policy is featured on ROTA's website.

4.1.10 The principles of Integrity in Ministry should be promoted to members. Trustees were provided with a copy when it was released and it was circulated amongst members and key employees but the document has not been revisited since. ROTA should provide a hard copy of the document in communities for Sisters to read or identify other methods of communicating the importance of the document.

4.1.11 Records show that two of the six trustees have completed the RLSS trustee training. The remaining trustees should also complete this training.

4.1.12 There is no Safeguarding Action Plan in place. ROTA should devise a plan so that actions can be delegated and progress towards achieving the eight safeguarding Standards can be tracked and assured by the leadership group.

Graded: Firm Progress

4.2 Standard 2 Communicating the Church's safeguarding message

Strengths

4.2.1 Safeguarding posters were seen on display in prominent positions by the CSSA Analyst during the audit in-person visit which is an effective method of relaying

critical safeguarding messages and illustrating a commitment to safeguarding to members, employees and the public.

4.2.2 The Staff Handbook lists the Safeguarding Policy and the St Catherine's Safeguarding Policy as documents that employees are required to be familiar with.

4.2.3 A good piece of practice in terms of diversity has been identified in ROTA's publishing of safeguarding posters with an additional named person to contact for relaying safeguarding concerns. The group have recognised that some of their employees speak limited English and that this might be a barrier to them in understanding safeguarding messages. They have therefore publicised this additional contact who is able to relay key messages to those for whom English is not their first language to improve understanding and a greater confidence in reporting abuse if witnessed.

Areas for development

4.2.4 ROTA do not possess a Communications Plan and so there is no formal plan about how communications should be conducted. It is therefore recommended that ROTA compile a Communications Plan, or incorporate one into an overall Action Plan, to guide what information should be shared with which audience and consider the most effective means to pass on messages.

4.2.5 The website for ROTA appears professional and easy to navigate. In order to increase the prominence of safeguarding within the group ROTA should consider creating a safeguarding link or have a dedicated safeguarding section to notify of relevant policy and advise of safeguarding contacts. This was recognised by ROTA in their self-assessment and audit interviews.

Graded: Firm Progress

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

Strengths

4.3.1 It is acknowledged that without any current or previous casework or allegations of harm, ROTA have limited working practice with which to evidence Standards 3, 4 and 5. That said, the appropriate recording and reporting of low level concerns has been evidenced. In addition, the signs of abuse to be aware of, and the procedures for reporting it, are covered in the Safeguarding Policy and the training accessed by Sisters, volunteers and employees supports an understanding of engaging with those reporting harm and the importance of a compassionate approach to working. In addition, the Care Manager was able to evidence that regular consultation with the Local Authority Safeguarding Board, RLSS and Social Services occurs and that preparatory actions, such as knowing where to signpost to, have taken place to support anyone who reports being harmed. The Care Manager is on site most days and there are 13 employees on duty 24 hours a day should any residents wish to raise a concern about their care or the care of another resident.

4.3.2 The Safeguarding Policy has a list of some safeguarding bodies and outlines the safeguarding representatives, the RLSS and the CSSA as useful contacts. There is also an obligation to report safeguarding concerns to trustees and leaders so that learning can be undertaken. Within the safeguarding policy that is yet to be approved by trustees is a whistleblowing section.

Areas for development

4.3.3 Along with additions to the ROTA website as recommended in 4.2.5 above ROTA should provide signposting for support for complainants on their website. At present there is nothing mentioned but the inclusion of support available, such as the Safe Space resource, will help engage with those who report having been harmed.

4.3.4 Although the Safeguarding Policy lists some support sources, the policy itself is not widely available to those who may have been abused and so having support options freely visible, such as Safe Spaces posters in public areas, would improve the service to those reporting harm.

Graded: Results Being Achieved

4.4 Standard 4 Effective management of allegations and concerns

Strengths

4.4.1. Despite not having any open or previous safeguarding cases ROTA have robust processes in place for managing allegations should the need arise. Policy directs someone receiving a disclosure of abuse to complete the Safeguarding Report Form and describes the onward reporting expectations. During interview the Safeguarding Lead and Safeguarding Representative were fully able to describe the process for managing an allegation of abuse if they were to receive one directly or from another employee or ROTA member and of the thresholds for onward reporting to statutory services. A good awareness of actions to be taken in handling low-level and serious concerns was demonstrated and it is clear that both parties would be confident in assessing the information received and recording their decision making. Records show that investigative actions such as interviewing a resident and member of staff have been taken in managing low level concerns raised.

4.4.2 Although, as mentioned above, the process for trustee notification should be formalised, at present the system operates well with the Safeguarding Lead being a trustee and trustees being able to approve decision making. However, if a safeguarding matter was urgent and involved an employee or a member then the action would be taken in the first instance and trustees informed afterwards.

4.4.3 A Safeguarding Reporting Form is available for recording safeguarding disclosures and concerns. The report has space for personal details and those of

people affected, description of the incident and any actions taken. Instructions at the top of the form remind those completing it that it should be treated confidentially, that the police and social services should be contacted in an emergency and that the Safeguarding Lead must be advised as soon as possible. Directions for completion of this form are also documented in the Safeguarding Policy. The Safeguarding Lead advises that this form has never yet been needed but is available should it be required. A secure lockable cabinet is available for any completed documents to be kept in.

4.4.4 ROTA have a Privacy Notice, a Data Retention Policy and a Data Breach Policy and Procedures document. These documents outline the importance of storing personal and sensitive information securely, who to share information with and when, and how long to keep certain documents. These policies, as well as the Safeguarding Policy, are reviewed and agreed by trustees and are all within their review periods.

4.4.5 ROTA have evidenced a working relationship with the RLSS and guidance demonstrates a commitment to report allegations on to them. In the self-assessment and during interviews ROTA have shown they are prepared to seek the advice and support of the RLSS in dealing with allegations if needed. St Catherine's also procure the services of a healthcare consultant who is available to support the work of the Care Manager.

Areas for development

4.4.6 Meeting minutes evidence that leaders of ROTA have oversight of any safeguarding concerns that might be raised and are able to assess the outcomes. Evidence of leaders quality assuring the responses to allegations from the Safeguarding Lead and Safeguarding Officer would support development of this Standard.

Graded: Results Being Achieved

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

Strengths

4.5.1 The Safeguarding Lead and Safeguarding Representative are well-versed in actions to be taken should a Sister be accused of abuse and are able to ensure they would be stood down from duties whilst any investigations occurred. Any internal investigations that take place would be done so in collaboration and deference to Canonical and statutory investigations. ROTA is large enough that it operates with some degree of resilience and so would be able to perform critical functions if a Sister was withdrawn from duties pending an investigation. Professional counselling and psychological support would be offered to the respondents of allegations with psychiatric support being made available if it was needed. An internal welfare support person would be allocated to anyone alleged to have committed abuse and ROTA have several individuals trained in Safeguarding for Spiritual Accompaniment by the RLSS that can assist with this. The allocated person would be expected to liaise with the RLSS and seek additional support from local and national services if it was required.

4.5.2 A duty of care to respondents as well as complainants was acknowledged during interviews and is specified in the Safeguarding Policy. Financial, spiritual and emotional support would be offered to any Sister alleged to have abused another person and they would also be directed to civil legal advice via the group's legal representative.

4.5.3 Through discussions with the Safeguarding Lead and Safeguarding Representative an understanding was demonstrated about what may be expected of them in fulfilling any safeguarding plans drawn up by the RLSS or other external agency, including monitoring, support and contributing towards regular reviews of the plan. The Safeguarding Lead and Representative also commented that they would consult the CSSA or RLSS for guidance should any legal provision be required for one of their members. They were also able to say how they might treat any respondents of allegations with sensitivity, understanding and compassion and

balance this with a need to take action in protecting any potential victims of abuse. The self-assessment indicates that the Provincial and her Council and the trustees would facilitate leave from ministry for an accused member if necessary and would work towards a safe and managed return should this be appropriate.

4.5.4 ROTA have several communities around England as well as links to the wider organisation internationally and report there is scope for Sisters to move to another community should they have to change residence.

Areas for development

4.5.5 In the absence of any case work to draw learning from it may benefit ROTA to liaise with other RLGs with a similar makeup for peer learning purposes.

Graded: Comprehensive Assurance

4.6 Standard 6 Robust human resource management

Strengths

4.6.1 ROTA have 24 employees and six volunteers for whom DBS checks are completed via the RLSS and references taken prior to appointment. The Safeguarding Policy mandates that all Sisters in active ministry, employees and volunteers have DBS certificates at the correct level and that these are renewed at least every three years. The policy states that records for members will be retained by the Safeguarding Representative whilst the DBS records for employees and volunteers will be retained by the Territorial Bursar. Records show that this aspect of the policy is applied effectively. Any blemished DBS returns are passed to the trustees for an assessment prior to a decision to appoint being made. At St Catherine's any minor blemishes would be considered following completion of a risk assessment which assesses the incident disclosed against the tasks of the role. The Care Manager was able to talk through the process of referring safeguarding concerns to the DBS if this is required in future.

4.6.2 The Safeguarding Policy has been reviewed to include a whistleblowing section. This should support anyone with a serious concern to report it. ROTA have a separate Bullying and Harassment Policy and those spoken to knew where to locate and follow this should it be needed. Definitions of harassment and the procedures to follow in making a complaint are also covered in the Staff Handbook.

4.6.3 The RLSS have confirmed that ROTA have been using their service to process DBS checks and to date have requested 35 Enhanced DBS checks. The Safeguarding Policy outlines that at the point of recruitment applicants are required to provide two references and undergo a DBS check with a satisfactory result. The Care Manager advised that applicants for vacancies within St Catherine's are always asked a scenario-based question during the interview process and serial numbers are checked to ensure the correct medical qualifications are held prior to appointment. During the in-person visit the training manual and the induction manual that new St Catherine's employees receive were produced for the CSSA Analyst. Both are very thorough and included were the expectations of weekly competency meetings with a mentor during the probationary period and three-monthly supervision sessions thereafter with a manager which includes safeguarding as a standard supervision agenda item.

4.6.4 ROTA received a new member approximately 18 months prior to the in-person visit. A DBS check was conducted, ID checks were made and references were contacted following a three month period of aspirancy. Following this initial stage a clinical assessment and a spiritual assessment were carried out. The spiritual assessment covers safeguarding and looking for signs of abuse. This procedure is covered in the Safeguarding Policy.

4.6.5 Overseas visiting personnel would be expected to compete safeguarding training and demonstrate a good understanding of safeguarding prior to undertaking any form of ministry. Testimonials of Suitability, references and overseas police checks would also be sought.

Areas for Development

4.6.6 Although making a complaint is an area covered in the Staff Handbook document, ROTA do not have a standalone complaints policy for safeguarding nor is this a topic featured in the Policy and Procedures for the Protection of Vulnerable Adults.

Graded: Results Being Achieved

4.7 Standard 7 Training and support for safeguarding

Strengths

4.7.1 Every Sister who is in active ministry must complete safeguarding training and annual updates are expected. Any safeguarding training courses or learning opportunities are disseminated amongst members and leaders actively encourage attendance. Those Sisters who are infirm and not practicing ministry are not expected to complete safeguarding training. A central record of training completed, by who and when is retained by the Safeguarding Lead. The Safeguarding Lead tracks this and asks anyone who has not completed, or is behind on refresher training, to complete it as a priority.

4.7.2 St Catherine's has a training matrix and a training feedback form to be completed by every learner following their training event. The matrix has a specific section for the mandatory safeguarding training for employees. This includes training from RLSS, Safeguarding Levels 1 and 2 delivered by Flexebee[4] and training offered by Care UK.

4.7.3 The Safeguarding Policy sets out the minimum training expectations for members, leaders and board members with the commitment to undertake yearly refresher training. Records are maintained and reports are passed to the board of trustees for oversight and enforcement of any shortfalls in training. For employees,

[4] Flexebee (www.flexebee.co.uk) are a private training specialist offering accredited courses

training is visited in supervision with managers which is another route to addressing gaps in safeguarding training.

4.7.4 RLSS training has been received by ROTA including three specialised Safeguarding Leads training, three Safeguarding for Trustees training sessions, two Safeguarding for Young People, six Basic safeguarding and two Care and Safety Management Plans.

4.7.5 St Catherine's uses Quality Compliance Systems (QCS) portal which is a management system for care and nursing homes. Employees each have login credentials and can use the system to access national Care Quality Commission policies and procedures and updates and changes to procedures. The training manual for St Catherine's outlines comprehensive face-to-face and e-learning with competency tests after each.

4.7.6 St Catherine's have a training feedback form for completion at the conclusion of all training events. Any completed forms and feedback received is then discussed in monthly meetings between the Care Manager and her Support Manager and changes or adjustments are considered and implemented if necessary to improve practice and learning.

Areas for Development

4.7.7 One training database for all members and employees is recommended. The matrix used by St Catherine's is a robust system and the group may wish to consider applying a system such as this to the whole group.

4.7.8 A training Needs Analysis would benefit ROTA in identifying which members and employees require which training and plan when and how this could be accessed.

4.7.9 Trustees should have oversight of safeguarding training to ensure training is being completed as expected. As mentioned in paragraph 4.1.11 all trustees should also complete safeguarding training for trustees.

Graded: Results Being Achieved

4.8 Standard 8 Quality Assurance and Continuous Improvement

Strengths

4.8.1 Although still within the specified review period, the Safeguarding Policy for ROTA is currently in the process of being reviewed. The RLSS have confirmed that ROTA have contacted them for their advice regarding what the review should encompass.

4.8.2 The Safeguarding Lead understands the importance of the eight National Safeguarding Standards and has considered how to apply these in the group's safeguarding practice. Leaders are aware that any non-compliance with the safeguarding Standards should be brought to their attention and that appropriate action must be taken.

4.8.3 Records seen by the CSSA Analyst during the in-person visit show that general learning is considered on a daily basis in St Catherine's. The employees of the home have daily meetings which reflect on the occurrences of the day and draw any learning points from it and this would include any safeguarding related learning points.

4.8.4 The Safeguarding Policy directs that any concerns surrounding compliance with safeguarding expectations are passed to the Provincial Lead and the trustees and, where appropriate, to the congregational leadership. The Safeguarding Lead and the Provincial Lead would make any referrals to the Charity Commission if needed.

Areas for Development

4.8.5 An annual review of safeguarding practice by leaders and trustees would offer an improvement to quality assurance and continual improvement. ROTA should have a structure in place for reflecting on any experiences and sharing from the learning achieved.

4.8.6 ROTA should create a Safeguarding Action Plan. To this end they are prepared to incorporate any recommendations that the CSSA may make regarding safeguarding practice into such a plan which can be reviewed by trustees.

4.8.7 During the in-person visit the Safeguarding Lead advised that completing the self-assessment facilitated a chance to reflect on current safeguarding practice within the group. They noted that at present there is no forum for safeguarding but that they are planning to set up a focus group for the Safeguarding Leads, Care Manager, director of Young Adults Ministry and others to offer a space for reflection and learning. This is considered to be a positive plan in terms of continuous improvement and one which ROTA is encouraged to pursue.

Graded: Firm Progress

5. Summary of overall findings

5.1 In the evidence provided for the safeguarding audit and during the in-person visit, ROTA demonstrated that a culture of safeguarding exists within the group. The Care Manager at St Catherine's is particularly aware of safeguarding expectations and has established systems in place and readily accessible records to evidence the work undertaken.

5.2 Safer Recruitment is an area of particular strength. Safeguarding Policy mandates thorough pre-employment checks are carried out ahead of any commencement in post and the same applies for members and volunteers. Records are up-to-date, easy to follow and stored securely.

5.3 Minimal formalised planning in relation to safeguarding was evident during the audit. Having structured plans in document form will offer focus, set out the resources for safeguarding and give a forecast to offer direction from leaders which would help drive safeguarding within the group.

6. Recommendations

To support improvement, the following recommendations are made:

Within 3 months

- Publish on ROTA's website a safeguarding statement or commitment, the Safeguarding Policy, sources of support (Safe Spaces for instance) and contact details of Safeguarding Leads for anyone wishing to report abuse.

Within 6 months

- Re-publicise and promote Integrity In Ministry and its principles with group members.
- Develop, agree and implement a Safeguarding Action Plan, including or with a separate Communications Plan.
- Complete a Training Needs Analysis for all members, employees and volunteers and record training completions within a single database to enable training compliance to be reported to leaders.
- A Complaints Policy is created and published which outlines how a complaint can be made and how it will be responded to. This could be a standalone document or incorporated into the Policy and Procedures for the Protection of Vulnerable Adults.

Within 12 months

- All trustees should complete specialised trustee safeguarding training.
- A programme of quality assurance is established to assess the quality of the safeguarding work being undertaken with feedback being offered. Links are made with other groups for peer learning.
- An annual review of safeguarding practice by leaders is held which offers a reflection on experiences and shares learning within the group.

7. Arrangements for follow-up

7.1 In line with the overall rating of Results Being Achieved the minimum period prior to ROTA's next safeguarding audit by the CSSA will be two years. However, this period may be reduced if the CSSA becomes aware of any significant concerns or allegations indicative of a weakening of safeguarding arrangements that are raised in the meantime.

8. Appendix

Documentary evidence reviewed

- ROTA's website[5]
- Safeguarding display posters
- The Charity Commission website for ROTA[6]
- Safeguarding Reporting Form
- Office staff DBS register
- Sisters DBS register
- Protection of children and vulnerable adults policy v3
- Protection of children and vulnerable adults policy under review December 2024
- Website Privacy Notice
- Breach Policy Procedure
- Data Retention Policy
- Fire Safety Policy
- ROTA staff, trustees and Sisters Privacy Policy
- Sisters and staff training log
- Staff handbook

[5] ROTA's website can be found here
[6] The Charity Commission website for ROTA can be accessed here