Catholic Safeguarding Standards Agency

Hospitaller Order of Saint John of God

Baseline Audit Report
August 2025

Catholic Safeguarding Standards Agency

Contents

1. Introduction

1.1 This is a baseline audit of the safeguarding arrangements of the Congregation of the Hospitaller Order of St John of God, also referred to hereafter as the Hospitaller Order. This audit has been undertaken as part of the CSSA's Baseline Audit phase of Religious Life Groups (RLGs).

1.2 The Hospitaller Order of Saint John of God, founded in 1539 in Granada, Spain, began its work in England in 1880 with the establishment of a hospital in Scorton, North Yorkshire. Over the 20th century, the Order expanded its services to support people with disabilities, mental health needs, and the elderly. In 2003, the Order established religious management services to support the religious of other life groups in managing their care homes, responding to new care standards legislation and maintaining its original mission of caring for people with compassion and upholding the core values of the Order. These services are now part of the Hospitaller Services UK. The Hospitaller Order no longer has responsibility for them. In 2005, SJOG Hospital in Scorton closed, and Saint John of God Care Services (later called SJOG Hospitaller Services[1]) was formed as a separate charity from the Order. In 2010, the West European Province of the Hospitaller Order was officially established, merging the Irish and English Provinces and resulting in a Province with the three regions of Ireland, England and Malawi. By 2012, a new canonical structure was implemented to address concerns over the mission and the ageing Brothers and to meet safeguarding and regulatory standards. This new structure, set up by Vatican Decree, ensured that the services continued to align with the Church's mission, while operational control gradually transitioned to lay leadership. The Brothers remained involved in governance, but the services were primarily run and managed by non-religious staff. On 1 January 2019, the Saint John of God Hospitaller Services Group was formed across the UK and Ireland, combining nine companies founded by the Hospitaller Order of Saint John of God. While the Brothers in the UK may still volunteer their services, they no longer hold operational responsibility for these services.

[1] https://sjog.uk/ - The SJOG Hospitaller Service website provides further details on the support provided and the heritage of the organisation.

1.3 The Hospitaller Order describe their aim as "Without discrimination, we aim to ensure freedom of choice, personal advancement and support for the exercise of human and civil rights". There are currently ten members within the Hospitaller Order living within England and Wales. In Darlington (the Diocese of Hexham & Newcastle), there are four members. The Prior is a Trustee of the Order UK, currently serving as an Assistant Priest in the Darlington parishes and is a member of both the Province Safeguarding Committee and the Province Safeguarding Advisory Group. Additionally, two members serve as volunteer helpers in local Hospitaller Services, and another member is a resident in a nursing home with no active ministry. In Wolverhampton, there are four members. One is retired and holds no active ministry. Additionally, three other members serve as volunteer helpers in local Hospitaller Services, two in Wolverhampton and another in Birmingham. Within the Diocese of Westminster, there are two members. The Prior is also a Trustee of the Order and serves as a volunteer helper in Ollalo House[2]. Another member is also a volunteer helper at Ollalo House. Those who undertake volunteer roles within the Saint John of God Hospitaller Service are required to follow the organisational policies relevant to that service.

1.4 The Hospitaller Order in the UK have two employees, a cook in the Wolverhampton community and a handyman in Darlington community currently providing support to the respective communities . Urgent medical care or medical treatment is not provided within any of the premises. For more specialised care, the members are referred to external healthcare providers or facilities as necessary.

1.5 The Hospitaller Order are members of the RLSS.

1.6 This audit seeks to assess the effectiveness of current safeguarding arrangements, by considering practice over the last twelve months. CSSA has categorised RLGs 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), to Level 3 (a large community and/or one with

[2] Ollalo House is an Saint John of God Hospitaller Service provides accommodation and specialist support to street homeless men and women, victims of modern-day slavery or trafficking, and homeless patients undergoing TB treatment https://sjog-olallo.uk/

significant outreach with vulnerable populations and/or a disproportionately high number of open safeguarding cases).

1.7 The CSSA recognises the rich diversity of the Religious and acknowledges that the Religious Life Groups within any 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. The Hospitaller Order have been assigned to a Level 2 audit.

2. Scope & Methodology

2.1 The CSSA analyst initially contacted the Western European Province Safeguarding coordinator, hereafter referred to as the Safeguarding Coordinator, and the Regional Leader on the 8 January 2025 to confirm a baseline audit for the week commencing the 31 March 2025.

2.2 In advance of the formal audit week, the Hospitaller Order were requested to complete a Level 2 audit self-assessment tool providing information on their adherence to the Eight National Safeguarding Standards and progress in the overall implementation of said standards. The Hospitaller Order were provided with the self-assessment tool and guidance on the 8 January 2025. The completion date for the self-assessment and supporting evidence was scheduled for the 5 March 2025.

2.3 The CSSA analyst, Safeguarding Coordinator for the Hospitaller Order and the Prior (who also holds the role of Safeguarding Representative in the UK) spoke on the 21 January 2025 to discuss audit arrangements and further brief email communications were held between the analyst and the Safeguarding Coordinator to finalise arrangements for the site visit.

2.4 This baseline audit was undertaken following the submission of the self-assessment by the Safeguarding Coordinator on 10 March 2025. Further evidence was reviewed by the auditor during a site visit to the community in Darlington on 31

March 2025. Additional evidence was provided to the CSSA analyst on the 3 April 2025.

2.5 Information from the self-assessment and supporting evidence provided by the Safeguarding Coordinator was reviewed by the CSSA analyst and this evidence was assessed against the Level 2 Maturity Matrix to arrive at ratings for each standard and a combined overall grade.

2.6 The following methods were employed:

2.6.1 Interviews

- Interviews were conducted with key individuals and groups from the Hospitaller Order on 31 March 2025:
    - The Safeguarding Coordinator and the Prior (who also holds the role of Safeguarding Representative in the UK and will be referred to the Safeguarding Representative for the remainder of this report)
    - The Hospitaller Order Trustee Focus Group was held on Zoom to allow the participation of all trustees.

2.6.2 Document Review

- Review of the following key documents additionally took place
    - Self-assessment form
    - Supplementary evidence (Listed at Appendix A)

2.7 Liaison has also taken place between the analyst, RLSS and the Safeguarding Teams in the dioceses of Hexham and Newcastle, Birmingham and Westminster regarding the Hospitaller Order's engagement with their safeguarding expectations.

3. Audit Grading

3.1 Practice was assessed against the eight national safeguarding standards adopted by the Catholic Church in England and Wales[3] and graded in accordance

[3] Full details of the eight standards and underpinning sub standards are available here: The Eight National Safeguarding Standards (catholicsafeguarding.org.uk)

with the CSSA Maturity Matrix for Level 2 RLGs. Potential audit ratings against each standard, and the final overall ratings, are: Below Basic, Basic, Early Progress, Firm Progress, Results Being Achieved, Comprehensive Assurance and Exemplary.

3.2 The Hospitaller Order have received an overall rating of Comprehensive Assurance

Overall Grading	Comprehensive Assurance
Standard 1 - Safeguarding is embedded in the Church body's leadership, governance, ministry and culture	Exemplary
Standard 2 - Communicating the Church's Safeguarding Message	Results Being Achieved
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)	Results Being Achieved
Standard 6 - Robust Human Resource Management	Comprehensive Assurance
Standard 7 - Training and Support for Safeguarding	Results being achieved
Standard 8 - Quality Assurance and Continuous Improvement	Comprehensive Assurance

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 The Hospitaller Order safeguarding statement and an additional safeguarding commitment document have been displayed in all premises and on the West European Province website for the Hospitaller Order[4]. The safeguarding commitment document includes contact information for the Safeguarding Coordinator, Safeguarding Representative for the UK and the RLSS. In addition to the safeguarding statement, the Safeguarding Coordinator confirmed that safeguarding notice boards are displayed in every premises. This was verified by the CSSA analyst during a visit to the community in Darlington. These boards also include information regarding the CSSA's eight national safeguarding standards and a short summary of the six principles of safeguarding: empowerment, prevention, proportionality, protection, partnership and accountability, provided by the online training provider, High Speed Training[5].

4.1.2 There is a standalone Safeguarding Policy, which was last updated in November 2024. The policy is based on the RLSS template with adaptations made to make it appropriate to the Hospitaller Order. The Safeguarding Policy is available on the West European Province website for the Hospitaller Order.

4.1.3 The Hospitaller Order has submitted written documentation for audit, outlining recent updates to its safeguarding governance and structure. The framework is clearly defined and supported by flowcharts that show how responsibilities are fulfilled. Key components include the Board of Trustees, the Provincial Safeguarding Advisory Group (PSAG), and the UK-specific Provincial Safeguarding Committee, which includes both the Safeguarding Representative and Safeguarding Coordinator. The Provincial Safeguarding Committee is responsible for developing policies, creating a three-year action plan, providing training, and conducting

[4] https://sjogbrothers.eu/
[5] Principles of the Care Act 2014 | Safeguarding Information for Caregivers

annual internal audits to monitor progress. The Safeguarding Committee produces an annual report and reports directly to PSAG, which oversees compliance with safeguarding legislation, Church requirements, and national standards. PSAG also addresses national and intra-provincial developments, monitors case management, and ensures that staff training remains current. At the highest level, the five-member Board of Trustees is responsible for delivering and upholding safeguarding and pastoral policies in the UK. Together, these bodies ensure the UK community of the Order has access to appropriate safeguarding support, guidance, and oversight. The Order states that its governance model "reflects a strong commitment to safeguarding, acknowledges that safeguarding is a shared responsibility among all members, and ensures an effective response to any safeguarding concerns raised." Additionally, the Order has adapted an RLSS template to define the roles and responsibilities of its members in alignment with SJOG UK's structure. This document has been distributed to all UK members and outlines the duties of the Trustees, PSAG, the Safeguarding Committee, and both the Safeguarding Coordinator and Representative. It aims to ensure that safeguarding is effectively managed and embedded across the Order, highlighting the need for collaboration, compliance with Church and legal standards, and robust recruitment and vetting practices.

4.1.4 The relationship between the Safeguarding Coordinator and the Safeguarding Representative is clear and collaborative and both confirmed that they meet on a regular basis, at least once a month, to ensure that safeguarding remains a priority within the Hospitaller Order. The Safeguarding Coordinator, who works 20 hours per week (increased as required by need and changing circumstances), and the Safeguarding Representative share responsibility for the development, implementation, and oversight of safeguarding policies and procedures. Together, they advise the PSAG to ensure safeguarding standards are met, coordinate the distribution of safeguarding resources, and support training and development. They are jointly responsible for managing safeguarding concerns, incidents, and referrals, retaining oversight even when cases are delegated to external providers, and are expected to respond promptly and appropriately to any safeguarding risks or allegations should they arise. The Coordinator also maintains a key relationship with the RLSS, supported by the Safeguarding Representative, and may delegate responsibilities to them when appropriate. Over the past 12 months, there have been

no safeguarding allegations, concerns, or active cases requiring a formal response. While the Coordinator is accountable to the Provincial and the Representative reports to the Trustee Board, both roles are essential to ensuring legal compliance and effective safeguarding governance.

4.1.5 The Safeguarding Coordinator was appointed to the role in 2012. However, they confirmed that prior to this, they had worked for the Order for several years as a psychologist before the restructure of the Order and have over 20 years of experience in this field. As a lay member to the Order's international safeguarding commission, they offer a unique and valuable perspective on safeguarding issues globally. The Safeguarding Coordinator is a registered NBSCCCI[6] Safeguarding Trainer and maintains their accreditation, enabling them to continue delivering safeguarding training and support within the Order. In the UK, the Safeguarding Representative has held the role since 2012. With academic qualifications including a Master's degree in healthcare law and in Biomedical Healthcare Ethics, the Safeguarding Representative brings a strong ethical and legal perspective to the position. During interviews, the Safeguarding Representative stated that there was a broader lack of structured ethical standards or a dedicated ethics forum within the Order and its associated services. In response, during the COVID-19 pandemic, they developed a comprehensive document on ethical standards and the expectations for meeting the needs of vulnerable adults and children. The creation of the code of ethics aims to strengthen ethical guidance and promote consistency in safeguarding practices across the Order. This resource has attracted interest from English-speaking provinces of the Order, who are considering its adoption for future safeguarding training and development.

4.1.6 The Hospitaller Order has signed formal contracts with the RLSS and CSSA, and the Safeguarding Coordinator and Safeguarding Representative actively engage with the RLSS for safeguarding queries.

4.1.7 The Hospitaller Order has five trustees, all of whom are religious. Safeguarding is a standing agenda item at trustee meetings, which are held every two months. Three of these meetings each year take place over a three-day period, allowing for

[6] https://www.safeguarding.ie/ - The NBSCCCI is the National Board for Safeguarding Children in the Catholic Church in Ireland.

more in-depth discussion and strategic planning. The Provincial Safeguarding Advisory Group (PSAG) and the Provincial Safeguarding Committee meet separately, with minutes from both meetings made available to the trustees. These meetings are conducted online to ensure full participation. Safeguarding remains a key agenda item across all meetings within the Order. While the PSAG typically meets 4 to 6 times a year, it has convened more frequently when required, including on a monthly basis. The Provincial Safeguarding Committee generally meets three to four times a year, though this can also vary depending on need.

4.1.8 The Safeguarding Coordinator has worked closely with the Hospitaller Order to develop a three-year action plan for 2025–2028. This is not the first plan introduced across the Order, with previous action plans having been implemented and reviewed. The current plan is reviewed during Safeguarding Committee meetings and is shared with the trustees to maintain ongoing oversight and accountability.

4.1.9 All members have been provided with a copy of Integrity in Ministry, and this was last discussed with the trustees in March 2025. The Integrity in Ministry document is displayed within the premises of the Hospitaller Order, serving as a visible reminder of the expected standards of conduct.

4.1.10 Within all interviews, members of the Hospitaller Order demonstrated an understanding of the need to address low-level concerns and share information with the Safeguarding Coordinator, Safeguarding Representative and the RLSS. They also recognised that on occasion statutory agency referrals may be made.

4.1.11 In May 2024, the Safeguarding Representative distributed a questionnaire to all members in the UK to assess the nature and extent of their ministry. This was designed to help identify gaps in risk management and determine DBS eligibility where appropriate. The Safeguarding Coordinator confirmed that this will be an ongoing process, recognising that the ageing population of the Brothers results in frequent changes to their roles. In addition, the Order's implementation plan acknowledges the specific safeguarding challenges related to older members. To inform future practice and support the creation of safe environments for all, the plan sets out a three-step approach: establishing a dedicated working group, conducting a needs analysis, and developing a targeted plan to address the identified needs.

Areas for Development

4.1.12 With the results of this audit, the current safeguarding action plan should be reviewed and updated to ensure that actions are clearly aligned to each of the Catholic Church's eight National Safeguarding Standards, supporting targeted improvement and measurable compliance across all areas

Graded: Exemplary

4.2 Standard 2 Communicating the Church's Safeguarding Message

Strengths

4.2.1 A safeguarding communication plan has been created in March 2025. The communication plan covers the entire Province and this includes the UK. The Safeguarding Committee (subcommittee of PSAG) develops and reviews the Communication Plan on an annual basis. The Safeguarding Representative (UK) is a member of the Safeguarding Committee.

4.2.2 As referenced in section 4.1.1, a safeguarding statement and safeguarding commitment, along with contact information for the RLSS, Safe Spaces, and the Safeguarding Coordinator and Representative, are displayed in all Hospitaller Order premises. However, as these premises have limited public access, the notice boards are primarily intended for members of the Order. To ensure wider accessibility, this information is also made available on the Hospitaller Order's website, allowing the wider community and external stakeholders to access it as needed.

4.2.3 The Provincial of the Hospitaller Order has issued a public message in 2025, available on the website, reinforcing the Order's commitment to safeguarding. The message emphasises that safeguarding aligns with the core values of Hospitality, Compassion, and Respect, and highlights the importance of protecting individuals from harm or abuse. It also stresses the need for safeguarding policies to be regularly updated in line with national and international standards. The message highlights that safeguarding is a shared responsibility among all members of the

Order and encourages individuals to report any concerns. This message concludes with the safeguarding commitment document previously discussed. Overall, it reflects the Order's dedication to continuous improvement in safeguarding practices.

4.2.4 The Hospitaller Order holds Regional Assemblies every two months, with all members invited to attend. Safeguarding is a standing item on the agenda at each assembly. The most recent assembly, held in February 2025, included a dedicated safeguarding section featuring a training session, DBS information, and discussions and updates on current safeguarding policies and procedures. This regular inclusion helps to reinforce safeguarding awareness and ensure members remain informed and engaged with key developments.

Areas for Development

4.2.5 The communication plan outlines actions, responsible parties, implementation dates, and review timelines. It would be beneficial for the Order to also consider how these actions will be implemented and through which formats, for example, email, notice boards, and regular meetings (monthly, quarterly, or annually). The plan should also address how feedback will be gathered from stakeholders, such as through surveys, feedback forms, or structured discussions. In addition, it should outline how ongoing communication will be maintained with other church bodies, local organisations, and the wider community. Finally, including a clear communication plan statement can help articulate the overall purpose and intent of the plan.

4.2.6 Currently, the Safeguarding Communication Plan indicates that safeguarding messages and contact information should be reviewed every nine months. Given the importance of maintaining up to date safeguarding information, the Order may wish to consider shortening this review period to ensure that any changes in personnel, procedures, or support services are reflected promptly.

4.2.7 The Hospitaller Order should provide documentation in a variety of formats to ensure accessibility for all members, as different individuals may have varying needs. This may include larger print, audio formats, or digital versions that can be easily read or heard, ensuring that all members can access important information regardless of their needs.

4.2.8 It is recommended that the Safeguarding Representative reviews and considers the value of gathering feedback from members and stakeholders, as part of reflective practice and ongoing development. This could support an evaluation of the current safeguarding approach, help identify areas for improvement and strengthen overall safeguarding practice across the Order.

Graded: Results Being Achieved

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

Strengths

4.3.1 The Hospitaller Order, UK has not received any disclosures or safeguarding concerns within the UK in the past 12 months. As a result, there has been no direct experience of engaging with individuals reporting harm during this period. Therefore, assessment in this area has been based on policy, available documentation, and theoretical discussions conducted during interviews. However, the Safeguarding Coordinator stated that the Hospitaller Order has benefitted from the experience of recent concerns in other parts of the Province outside the UK. This has provided the safeguarding and management teams with a range of skills and experience that are commensurate with those required to ensure practice that reflects compliance with safeguarding requirements in England and Wales.

4.3.2 The safeguarding notice board displayed in all premises includes the six principles of safeguarding and a summary for each principle. By clearly outlining the six safeguarding principles, the notice board serves as a constant reminder of the Order's commitment to survivors. It helps members recognise the importance of listening with empathy, respecting survivors' choices, ensuring their safety, and knowing where to direct them for appropriate support. This notice equips members with a basic framework for responding confidently and compassionately to disclosures of harm.

4.3.3 The Hospitaller Order Safeguarding Policy specifies that action must be taken in accordance with the Church's Mandatory Reporting Policy and outlines the

procedure to follow if they become aware of a safeguarding issue. The policy states how the religious life group will respond to concerns and outlines the expectations and commitments to survivors of abuse. The policy states that the person alleging harm will be informed about the next steps and if possible, provided with an indicative timescale. In collaboration with the Religious Safeguarding Lead (RLSS), the Safeguarding Coordinator or Representative will ensure that the survivor is informed about the next steps in the process and all external referrals will be made within 24 hours, unless exceptional circumstances apply and are authorised by the Provincial. However, this exemption is not consistent with the Church's Mandatory Reporting Policy and should be removed to ensure full compliance with the mandatory reporting expectations of the wider Church.

4.3.4 The Safeguarding Policy outlines the actions required when members of the Hospitaller Order are engaged in ministry with the Saint John of God Hospitaller Services (a separate organisation) or with other organisational or religious bodies. The policy states that members must be aware of and compliant with the safeguarding policies and procedures of the host organisation. Any safeguarding concerns that arise in those contexts should be reported directly to the respective organisation. However, the Hospitaller Order may offer support to its members in facilitating this process if necessary.

4.3.5 During interviews, all leadership, including trustee members, confirmed that they would approach any survivor who comes forward with empathy and understanding. They confirmed that they would prioritise acceptance and reassurance during disclosures, focusing on affirming the individual rather than investigating the matter. The trustees also acknowledged the importance of learning from these processes, recognising that receiving a disclosure can be challenging for the individual involved. They highlighted the need for counselling or additional support for those receiving disclosures, emphasising the importance of offering appropriate care and assistance to those in this position. The trustees confirmed that coaching from the Safeguarding Coordinator has been beneficial in supporting their understanding and response to safeguarding matters.

4.3.6 All participants in the interviews stated that, in the event of receiving a disclosure, they would listen to the individual and offer support either pastorally or through appropriate referrals. All members were aware of the need to contact the

Safeguarding Coordinator or Safeguarding Representative in the event of a safeguarding disclosure. They also understood the importance of documenting appropriate information in writing and sharing all concerns, including low-level concerns, with the Safeguarding Coordinator.

4.3.7 The Safeguarding Coordinator and Safeguarding Representative are suitably trained to receive and respond to disclosures of harm and have established connections with the RLSS. Additionally, the Safeguarding Coordinator is familiar with organisations outside of the RLSS and statutory agencies that may be contacted for support. All members and staff in leadership positions recognise the importance of sharing information with the RLSS when necessary and informed the CSSA analyst that they would work closely with the RLSS for support whenever they become aware of any safeguarding concerns.

4.3.8 The Safeguarding Coordinator confirmed that, when necessary, the Hospitaller Order can provide funding for support services for survivors. The Order's safeguarding statement reaffirms its commitment to assisting those who come forward, stating: "We are committed to supporting those who come forward to access therapeutic supports and justice." This commitment is further reinforced in the safeguarding commitment document, which states: "The Order is committed to supporting individuals who have experienced hurt to access therapeutic services." Additionally, it is noted that if existing services such as Towards Healing or Safe Spaces are not appropriate or accessible for a survivor, the Safeguarding Coordinator will seek to identify and assist in arranging suitable alternative support. During interviews, the trustees acknowledged the importance of taking prompt action in delivering support, recognising that any delays could result in further harm to those affected.

Areas for Development

4.3.9 The current policy primarily focuses on the roles of the RLSS, Safeguarding Coordinator, and Safeguarding Representative. However, it would be beneficial to provide practice guidance for individuals who may receive disclosures of abuse, allegations, or concerns. This could include step-by-step instructions on how to record a disclosure, whom to report it to, and the appropriate actions to take. Including a flowchart or bullet points would make this information more accessible

and ensure that all members, regardless of their position, understand their responsibilities and are equipped to respond effectively to safeguarding issues.

4.3.11 The Hospitaller Order should consider incorporating content from the Safeguarding Commitment document into the main Safeguarding Policy to further strengthen and clarify its commitment to supporting survivors. The Commitment document outlines the therapeutic support available to survivors, and integrating this information into the policy would ensure clearer, more accessible guidance on the support services provided, reinforcing the Order's dedication to supporting survivors.

4.3.12 The Safeguarding Coordinator discussed the option of a support person being made available to accompany and assist the survivor throughout the safeguarding process. It is recommended that the order develop practice guidance that outlines this provision, detailing how support persons are identified or selected, their specific role, and any training or preparation they are required to undertake. Furthermore, this guidance should also ensure that survivors are fully informed about the support person's responsibilities and the nature of the support they can offer. This approach would help promote transparency, trust, and contribute to the survivor's empowerment throughout the process.

4.3.13 The Hospitaller Order should consider establishing a central register of local and national support organisations within the UK. This register should be maintained by the Safeguarding Coordinator and Safeguarding Representative, and could include contact information for mental health, abuse, substance misuse, victim support, dementia care, and services for older adults. Having an up to date, accessible directory would ensure that those responsible for safeguarding can quickly and appropriately signpost individuals to relevant support.

4.3.14 The Order should consider proactively engaging with local statutory and voluntary organisations, such as local safeguarding partnerships or community-based support services. Regular meetings or participation in multi-agency forums would enable the sharing of best practices, facilitate collaborative working, and ensure the Order remains informed about developments in safeguarding practice. This engagement would demonstrate a commitment to working within the wider safeguarding community.

Graded: Results Being Achieved

4.4 Standard 4 Effective Management of Allegations and Concerns

Strengths

4.4.1 The Hospitaller Order, UK has not received any safeguarding allegations or concerns in the last 12 months and has no outstanding allegations or concerns prior to 2024. Therefore, assessment in this area is reliant on policy review, evidence and theoretical discussions in interview. However, the Safeguarding Coordinator confirmed the Orser has benefitted from the experience of recent concerns in other parts of the Province outside the UK. This has provided the safeguarding and management teams with a range of skills and experience that are commensurate with those required to ensure practice that reflects compliance with safeguarding requirements in England & Wales.

4.4.2 Each member of the Hospitaller Order has received a resource pack that includes several key safeguarding documents. This pack contains the Hospitaller Order Safeguarding Role & Responsibilities Guidance (as outlined in 4.1.3), the RLSS Guidance for RLG leadership managing active safeguarding cases, and the guidance to persons accused of causing harm. Additionally, the pack includes the Mandatory Reporting Policy, contact information for the local area adult safeguarding team provided by the Safeguarding Representative, a Safeguarding Concern Record form, and the Code of Ethical Standards for Hospitaller Healthcare Ministry. These resources aim to equip members with the necessary tools and information to manage safeguarding concerns appropriately and in compliance with the Order's policies. It would be beneficial for the Hospitaller Order to record this in their communication plan and regularly review the effectiveness of these resources to ensure ongoing alignment with best practices.

4.4.3 The Safeguarding trustees have oversight of any disclosures received. The trustees have demonstrated a clear understanding of their responsibilities to manage safeguarding concerns and the importance of ensuring that such

information is shared with them. Currently, the Hospitaller Order do not have any open cases and have not received any safeguarding concerns or complaints in the past 12 months. The trustees confirmed that, in the event of a safeguarding concern, a joint decision would be made regarding any report to the Charity Commission. The responsibility for preparing and submitting the report, however, would rest with the Safeguarding Representative, in line with their designated role.

4.4.4 All members, regardless of their leadership position, are aware of their responsibility to support individuals who make disclosures and to listen to their concerns. They also understand the importance of referring any safeguarding concerns to the Safeguarding Coordinator or the Safeguarding Representative. The members were able to identify who they could approach for support if they had concerns about their own or other members' welfare and confirmed that they would feel comfortable raising any concerns with leadership if needed. This is further supported by the implementation of the Whistleblowing Policy November 2024 which states "This policy outlines what SJOG personal religious/lay/volunteer/ trustee board member, etc, should do if they suspect something or someone at SJOG is putting them or others in danger or is illegal and unethical".

4.4.5 All safeguarding concerns relevant to the UK are kept in a locked filing cabinet within the Hospitaller Order premises. In addition to this, the Provincial's personal assistant in Ireland keeps a concern log to document all allegations presented to the Hospitaller Order in the Province.

4.4.6 The Safeguarding Coordinator confirmed that once a case is concluded and an outcome is reached, the safeguarding committee will meet to discuss any lessons learned, and this will be formally documented. The information will then be shared with the trustees, informing the action plan and prompting any necessary changes to policies or procedures.

4.4.7 The safeguarding policy for the Hospitaller Order states that "all records are potential evidence in a criminal trial, civil case or statutory/public inquiry and must be stored in a safe and retrievable format with an auditable record of provenance and integrity". Any written or paper documentation regarding safeguarding in the UK, for the Hospitaller Order is kept in a confidential and securely locked cabinet

within the Hospitaller Order premises, which is only accessible to the Safeguarding Representative and coordinator.

Areas for Development

4.4.8 Given that many safeguarding-related policies and documents are interconnected, it may be helpful to develop an overarching safeguarding policy, under which separate practice guidance documents can sit. This overarching policy would provide a clear, consolidated framework outlining the Order's safeguarding principles, roles, responsibilities, and procedures, while signposting to more detailed guidance such as responding to disclosures and managing allegations. This structure would simplify access to essential information, reduce the risk of gaps or inconsistencies, and improve communication across the organisation. While the policies and guidance documents could remain separate, ensuring they are clearly referenced and linked would support coherence and ease of use, ultimately strengthening safeguarding practices and compliance.

4.4.9 The Safeguarding Coordinator and trustees have the necessary safeguarding experience and understand the importance of not jeopardising an ongoing statutory investigation. The Safeguarding Coordinator states that the Hospitaller Order Training provided to all by the Safeguarding Coordinator includes the importance of not taking any action that may obstruct or jeopardise investigations and/or proceedings by the authorities regarding safeguarding allegations and concerns. It emphasises the responsibility that everyone holds in this regard and their role in recording, reporting, supporting, co-operating and not compromising or jeopardising statutory investigations and processes. However, the safeguarding policy should clearly outline that it is everyone's responsibility, to avoid involvement in matters that could jeopardise an ongoing investigation. This includes ensuring that all staff and members understand the importance of maintaining appropriate boundaries and refraining from actions or discussions that could compromise the integrity of the investigation process.

4.4.10 The Hospitaller Order should consider engaging stakeholders and other religious life groups to help quality assure their policies. This collaborative approach would ensure that the policies align with best practice, reflect the values and needs

of the broader community, and are continually improved through feedback from various perspectives.

4.4.11 It is recommended that the Hospitaller Order implement a centralised concerns log to formally record and track all safeguarding issues, including low-level concerns. The Hospitaller Order presently maintains a central register of safeguarding allegations/concerns from throughout the Province, including Ireland, Malawi and non-recent allegations from the UK. This is held in the Provincial's Headquarters in Dublin and supported administratively by the Provincial's PA (Personal Assistant). However, some concerns are documented locally at the community house in Darlington, meaning that there is no consistent or centralised system for logging all safeguarding matters including the low-level concerns. This represents a gap in practice, as the absence of a comprehensive concerns log may hinder the organisation's ability to identify patterns or recurring issues across different communities. A centralised log would support more effective monitoring, strengthen accountability, and help inform targeted training. By basing training on the safeguarding issues that arise, the RLG can better prepare staff and volunteers and strengthen how it responds to safeguarding overall.

Graded: Results Being Achieved

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

Strengths

4.5.1 The Hospitaller Order UK has not yet had direct experience in managing respondents. As a result, the assessment in this area is based on a review of policies, available evidence, and theoretical discussions held during interviews. As noted in 4.3.1, the Safeguarding Coordinator was able to share experiences of recent concerns and allegations in other parts of the Province outside the UK and confirmed that, although such situations have not arisen in the UK, they would ensure a thorough, compassionate response to all allegations and concerns. This would involve listening to the individual, organising and facilitating connections to

therapeutic supports, engaging with relevant authorities, and consulting with the Provincial. Additionally, a support person would be offered to the respondent, and a discussion would take place about what support they would find most helpful. For individuals against whom allegations are made, the Order would also provide access to support and implement Covenants of Support, which include a care and safety management plan informed by professional risk assessments. This process would be carried out with the support and guidance of the RLSS, ensuring that all steps taken align with best practices.

4.5.2 The Hospitaller Order confirmed they would follow the RLSS guidance for "RLG leadership when managing an active safeguarding case". The Safeguarding Representative confirmed this guidance and the "Guidance to Person Accused of Causing Harm" is provided to all members within the resource pack mentioned in 4.4.2. Members are therefore aware of the support and guidance they may receive in the event of an allegation.

4.5.3 The Order maintains strong links with the RLSS for ongoing support and has access to a Canon Lawyer, who, although not on retainer, is available to provide advice when needed, having done so in the past with cases outside of the UK. The trustees have also expressed a commitment to seeking external expertise when necessary, highlighting their intention to engage creatively, adapt to challenges, and foster a culture of learning within the organisation, in alignment with their values as a "learning church."

4.5.4 The Hospitaller Order understand the importance of maintaining appropriate levels of confidentiality in respect of allegations. They also understand the difficulties that respondents may face when an allegation is made and that there may be a need for mental health, emotional, physical and legal support. While members were not familiar with the specific support they would receive if an allegation were made against them, they express confidence that the Safeguarding Coordinator and Safeguarding Representative would be able to offer support and provide this information if necessary.

4.5.5 The Safeguarding Coordinator possesses experience from their background and training, enabling them, with support from RLSS, to effectively manage respondents and ensure proper liaison with statutory authorities. As mentioned

earlier, trustees maintain oversight of any safeguarding cases and have demonstrated through interviews their commitment to quality assuring their practices and improving policies and procedures when necessary.

4.5.6 There is an awareness across leadership that there may be occasions when respondents need to be stepped down from ministry and there would be ongoing support for the respondent in this circumstance, through the Safeguarding Coordinator, the other members and the RLSS. The trustees also confirmed that funding or alternative accommodation would be provided should a respondent be asked to leave their accommodation during an investigation.

Areas for Development

4.5.7 The Hospitaller Order should consider liaising with other Religious Life Groups that have recent experience in supporting Respondents in the UK. This collaboration could provide valuable insights and help ensure that their policies and procedures are as effective as possible. Additionally, the Hospitaller Order may wish to adapt the RLSS guidance to reflect their own commitment to supporting Respondents, tailoring it to their unique context while maintaining alignment with best practice standards.

Graded: Results being achieved

4.6 Standard 6 Robust Human Resource Management

4.6.1 The Hospitaller Order confirmed that no individual has entered formation in the UK for over 40 years. The current safeguarding policy does not account for scenarios involving new vocations, and the Safeguarding Representative noted that it is highly unlikely that the Province in England would accept any new candidates given its ageing and diminishing numbers. Instead, any new candidates would be referred to the European formation programme established in Italy.

4.6.2 The Hospitaller Order's Safeguarding Policy includes Safer Recruitment Practice Guidance, outlining clear expectations that appointments will not be confirmed until a satisfactory DBS check has been received. It also notes that all new employees will receive relevant safeguarding policies and procedures upon

appointment and will be required to sign to confirm receipt. Furthermore, the RLSS Roles and Responsibilities guidance (as discussed in 4.1.3) reinforces the duty of the Safeguarding Representative UK, Safeguarding Co-ordinator, and PSAG to ensure appropriate vetting and recruitment checks are in place. This document also advises that if an individual has been in the UK for less than six months and has not previously resided in the UK, an overseas criminal records check must be obtained in addition to a DBS check. These measures, while comprehensive, are split across two documents, and the Order may wish to consider consolidating this information into one place to improve clarity and accessibility, as also noted in 4.4.8.

4.6.3 The Safeguarding Coordinator maintains a detailed and up to date central record for all members of the Hospitaller Order in the UK. This record includes the activities undertaken by members, information on DBS checks, specifying the level of the check, the issue date, and the renewal due date. It clearly notes where members do not hold a DBS check, providing a rationale based on their role, such as being retired or no longer involved in ministry that would require such checks. This approach ensures DBS requirements are applied appropriately and proportionately. The records are securely stored on the Safeguarding Coordinator's laptop, allowing for both safe storage and ease of access when needed. The Hospitaller Order Trustees confirmed they maintain oversight of DBS checks for their members and would oversee recruitment processes for any new employees. They also stated that any instances of non-compliance are actively addressed during trustee meetings.

4.6.4 The Hospitaller Order in the UK has two employees, a cook in the Wolverhampton community, and a handyman in the Darlington community providing support to the respective communities, both have been in their role for a significant number of years. The Hospitaller Order do not have any further employees or volunteers.

4.6.5 The Hospitaller Order complaints policy was adopted in November 2024 and is a separate document from the safeguarding policy and provides a clear process for addressing concerns including a stage one, stage two (appeal) and stage three (External). It ensures confidentiality and has specific sections dedicated to data protection. The policy review date is November 2025. There is also a standalone

whistleblowing policy which is also discussed in 4.4.4. Both the whistleblowing and complaints policy have been distributed to all members of the Hospitaller Order.

Areas for Development

4.6.6 The CSSA Policy "Making a complaint to the Catholic Safeguarding Standards Agency (CSSA) about a diocese, eparchy or religious life group in England and Wales" states that "The CSSA will investigate complaints about the Catholic dioceses, eparchies, and religious life groups" and "The CSSA is the final stage for unresolved complaints". Therefore, the Hospitaller Order should ensure this is fully incorporated into any complaints policy to reflect that the CSSA will investigate unresolved complaints by the Hospitaller Order.

4.6.7 The Order should consider publishing the complaints policy online to ensure they are easily accessible to their target audiences and the wider community. Additionally, they should establish a clear mechanism for receiving feedback on these policies, allowing for continuous improvement and ensuring that they meet the needs and expectations of those who may need to use them.

Graded: Comprehensive Assurance

4.7 Standard 7 Training and Support for Safeguarding

4.7.1 There is a clear expectation of safeguarding training for members, with detailed records kept by the Safeguarding coordinator. This includes copies of safeguarding training certificates and a central log that tracks the level of training completed based on each individual's role and when this was undertaken.

4.7.2 The Hospitaller Order's Safeguarding Policy states that all members and personnel must complete safeguarding training covering both children and adults, as well as any other training relevant to their roles. Annual refresher training is also expected. Those in active ministry, including trustees, the Safeguarding Coordinator, and the Provincial, are required to undertake advanced training equivalent to Level 2, while those not in active ministry are expected to complete basic training. The Safeguarding Coordinator, a registered NBSCCCI Safeguarding Trainer, provides and supports role-specific training alongside the existing training

undertaken by members. Recent training delivered to members in the UK focused specifically on how to receive a disclosure and the appropriate actions to take in response, in line with UK safeguarding guidance and legislation. In 2024, all members with capacity completed the CareSkills Academy online certificate in 'Safeguarding & Protection of Adults', with no current need for renewal. The UK Safeguarding Representative is expected to complete training equivalent to Level 3. They most recently undertook 'Safeguarding Vulnerable Adults' Level 3 in March 2025 and previously completed Level 2 training in 'Safeguarding Adults' and 'Child Protection' in 2021.

4.7.3 Province-led safeguarding training has also taken place over the past 12 months as part of Provincial Assemblies, each of which included a dedicated safeguarding agenda item. The Safeguarding Coordinator facilitated training during these assemblies, including sessions in April 2024 (Leeds), July 2024 (online), September 2024 (Wexford), and February 2025 (Leeds). These sessions covered key topics such as the safeguarding and standards of the Catholic Church in the UK, safeguarding children, definitions and types of abuse, and best practices for receiving and reporting concerns.

4.7.4 The Safeguarding Representative (UK) monitors attendance at training, with records maintained, and members are regularly reminded and encouraged to attend. The Safeguarding Committee (a subcommittee of the PSAG) is responsible for developing and overseeing the training plan. Feedback is sought following each training session, and it has been noted that members actively seek further guidance and follow-up on the content delivered. As part of the Three-Year Safeguarding Plan (2025–2028), a training needs analysis has been identified as a priority safeguarding activity for 2025.

4.7.5 The trustees and Safeguarding Representative state they have not encountered any concerns regarding compliance that required attention. However, they have indicated that if any non-compliance with training expectations were to arise, they would take appropriate action to address the issue. All trustees have completed the safeguarding training for trustees.

4.7.6 The RLSS has confirmed that although the Hospitaller Order have membership they have not accessed training through their service.

Areas for Development

4.7.7 Although it initially appeared that members had not completed training specifically focused on safeguarding children, certificates have since been provided confirming that this training has in fact been undertaken. The issue arose due to the training log not being correctly completed, which gave a misleading impression. It is therefore recommended that the Order ensures its training records are accurately and consistently maintained to reflect completed training. Additionally, review dates for safeguarding training should be clearly noted to support ongoing policy compliance

4.7.8 It is recommended that the Hospitaller Order strengthen its engagement with RLSS-provided training by proactively liaising with the RLSS to identify upcoming opportunities and secure spaces in advance. The Safeguarding Coordinator should work with the Trustees to ensure timely communication and prioritisation of this training, enabling members to access relevant courses as part of their ongoing safeguarding development. This would support alignment with policy commitments and enhance consistency in safeguarding practice across the Order.

Graded: Results being achieved

4.8 Standard 8 Quality Assurance and Continuous Improvement

Strengths

4.8.1 Safeguarding expectations are considered at every Trustee and Leadership meeting. Any developments in policy and procedure are brought by the Provincial Safeguarding Committee, then the PSAG and then to Trustees to make sure that they are compliant with the eight Safeguarding Standards of the Catholic Church in England and Wales.

4.8.2 The Leaders of the Hospitaller Order acknowledged the importance of engaging with Survivors of abuse and would meet with any Survivors who came forward if the Survivor chose to do so.

4.8.3 A Safeguarding Action Plan is in place and is reviewed by the province safeguarding committee at their meetings which are held at least four times a year. All actions are allocated to either the Safeguarding Coordinator, Province Safeguarding Committee or the PSAG ensuring clear responsibilities. This approach ensures accountability and facilitates action when necessary.

4.8.4 The Hospitaller Order fully engaged with the CSSA Baseline Audit process. It is their intention to update the current action plan based upon the recommendations of this audit with a view to improving their Safeguarding practice and ensuring their adherence to the eight Safeguarding standards of the Catholic Church in England and Wales.

4.8.5 The Safeguarding Co-Ordinator confirmed that, at Province level, the Hospitaller Order conducts annual internal audits using guidance from the National Board for Safeguarding Children in the Catholic Church in Ireland (NBSCCCI)[7], and has also engaged in several external independent reviews. These processes have provided valuable learning opportunities that have been incorporated into safeguarding practices across the Order, including within the UK. In addition, the Safeguarding Co-Ordinator submits an annual report to the Provincial outlining any safeguarding concerns received. Each March, the Provincial confirms in writing to the NBSCCCI that the internal audit has been completed, that he has received the necessary reports, and that any identified learning will be implemented and reflected in practice. While the Order has not commissioned independent reviews specifically for the UK, it has participated in a CSSA audit and intends to implement the findings, with plans to adopt a similar audit process going forward.

4.8.6 The Safeguarding Coordinator confirmed that the Regional Assembly held in February 2025 included the regular standing agenda item on safeguarding, with a focused session providing all members with updates on the UK National Safeguarding Standards and the Integrity of Ministry framework. The session was designed to ensure members were informed of the current safeguarding standards within the Catholic Church's in the UK, including information regarding expectations, structural updates, and reporting procedures. Delivering this session at an assembly ensured consistent messaging across the Order and supported the

[7] National Board for Safeguarding Children in the Catholic Church in Ireland - Home

ongoing embedding of safeguarding awareness and responsibilities throughout the community.

Areas for development

4.8.7 The Hospitaller Order currently share a report with their members every four years. The Order should consider sharing their annual safeguarding reports with all members and publishing this document with mechanisms in place to support feedback from stakeholders.

Graded: Comprehensive Assurance

5. Summary of Overall Findings

5.1 The Hospitaller Order describe themselves as an ageing community in the UK who no longer have responsibility for the direct delivery of services. The basic safeguarding expectation placed upon them is to comply with the individual diocesan safeguarding arrangements and the evidence seen demonstrates that they fulfil this. As a separate charity from the Diocese, they also have Safeguarding expectations placed upon them across the eight Safeguarding standards of the Catholic Church in England and Wales. They have been rated as achieving comprehensive assurance against two of the standards, results being achieved against a further five standards and as exemplary against the remaining standard. This gives an overall rating of comprehensive assurance.

5.2 The main area identified for improvement is the enhancement of the current communication plan and the presentation of policies related to managing both survivor and respondent situations. To improve clarity and accessibility, it is recommended that these policies be consolidated into a single, comprehensive document; alternatively, if kept separate, they should be clearly referenced and cross-linked to ensure consistency and ease of use. In addition, the Hospitaller Order should strengthen its safeguarding processes by actively seeking feedback and engaging more proactively with survivors, respondents, members, Religious Life Groups (RLGs), and other partner organisations. This collaborative and transparent approach would support continuous learning, improve quality assurance and

ensure safeguarding practices remain effective. Finally, the Order should review its safeguarding training provision to ensure it is fully aligned with the safeguarding policy.

5.3 The Hospitaller Order have demonstrated that their current practice exceeds minimum safeguarding practice expectations such that an overall rating of comprehensive assurance is warranted.

6. Recommendations

To support improvement, the following recommendations are made:

Within 3 months

- The Hospitaller Order should publish their complaints policy on their website.
- The Hospitaller Order should ensure the Annual report is available to all members and consider its inclusion on the website to ensure transparency and accountability and allow feedback from stakeholders.
- The Hospitaller Order should review and update its safeguarding training to ensure it aligns with the safeguarding policy, is role-specific, and includes child safeguarding where applicable.
- The Hospitaller Order should remove the clause within its safeguarding policy "unless exceptional circumstances apply and are authorised by the Provincial" in respect of statutory referrals.

Within 6 months

- The Hospitaller Order should ensure that the complaints policy includes a provision that any unresolved complaints may be investigated by the CSSA.
- To create a central register of local and national support agencies within the UK. This should include information on organisations that provide support for issues such as abuse, mental health, trauma, substance misuse, domestic violence, safeguarding, and spiritual care. The register

should be regularly updated, easily accessible to staff and members. The Order may wish to include this information on their website.

- To create a concerns log to monitor low level concerns and allegations within the UK.

Within 12 months

- The Order should consider liaising with other Religious Life Groups that have recent experience in managing allegations and concerns, as well as supporting both survivors and respondents, to identify transferable lessons and ensure that their policies and procedures are as effective as possible.
- The Order should proactively engage with local statutory and voluntary organisations, such as local safeguarding partnerships or community-based support services to enable the sharing of best practices, facilitate collaborative working, and ensure the Order remains informed about developments in safeguarding practice.
- The Hospitaller Order should consider the following amendments to the policy or incorporating additional guidance on the following:
    - The policy should clearly outline the Order's expectations and commitment to survivors, with options for survivors to provide feedback where possible.
    - Information should be provided regarding the role of a "support person," including their responsibilities and the type of support they can offer to survivors throughout the process.
    - Support for those subject to an allegation should include details of the expected support for individuals who are subject to an allegation, referencing the information provided in the safeguarding commitment document.
    - Clear guidance for all individuals who may receive disclosures of abuse, allegations, or concerns, should be provided. Ensuring that roles and responsibilities are understood and that individuals are prepared to respond appropriately.

7. Arrangements for Follow-up

7.1 In line with an overall rating of comprehensive assurance , the earliest date of the next audit of the Hospitaller Order by the CSSA is within three years in March 2028. If the CSSA becomes aware of a significant Safeguarding concern or allegation in the intervening period, then an earlier audit will be required.

8. Appendix

Evidence submitted

Excerpt Trustee Minutes - Feb 2025.pdf
BROS IN ENGLAND - March 2025 - Updated.pdf
BROS IN ENGLAND - Updated March 2025.pdf
CODE OF ETHICAL STANDARDS (VERSION 2).pdf
Communication Plan 2025 - Updated.pdf
Community House UK - Safeguarding Commitment.pdf
ETHICAL STANDARDS.pdf
Guidance To Person Accused of Causing Harm.pdf
General Commission - Safeguarding & Protection Document 2021 .pdf
Guidance for RLG Leadership managing an active safeguarding case.pdf
Training Plan 2025 - Updated.pdf
Index of Documents - SJOG 2025.pdf
LA CONTACTS.pdf
LEEDS ASSEMBLY2025 .pdf
Mandatory Reporting Guidance for RLGs.pdf
Redacted - Safeguarding Trainer.pdf
Message from the Provincial 2025 - Website.pdf
Note re Provincial Safeguarding Advisory Group & Safeguarding Committee.pdf
Overview Notes - February 2025 Assembly.pdf
Resource Pack - Index.pdf
RLG Safeguarding Role and Responsibilities Guidance - SJOG UK.pdf
SAFEGQUESTION.pdf

Safeguarding Adults Policy OPP40.pdf
Safeguarding Children and Young Adults OPP42.pdf
Safeguarding Policy - Information Note April 2025.pdf
SAMPLE AGENDA TRUSTEES UK.pdf
Sample Content -Safeguarding Training & Update.pdf
Sample PSAG Agenda - 1.07.24.pdf
Sample PSAG Agenda - 28.02.25.pdf
Sample Safeguarding Committee Agenda - 17.02.25.pdf
Sample Safeguarding Committee Agenda - 20.03.25.pdf
Self Assessment RLG Level 2 - SJOG 2025.pdf
SJOG - Safeguarding Children Policy With Signature copy.pdf
THE GOOD SHEPHERD MINISTRY WOLVERHAMPTON.docx
Three Year Safeguarding Plan 2025 -2028 Updated.pdf