Catholic Safeguarding Standards Agency

Sisters of Notre Dame de Namur

Baseline Audit Report
September 2025

Catholic Safeguarding Standards Agency

Contents

1. Introduction

1.1 This is a baseline audit of the safeguarding arrangements of the Sisters of The Notre Dame de Namur. This audit has been undertaken as part of the CSSA's Baseline Audit phase of Religious Life Groups (RLGs).

1.2 The Sisters of Notre Dame de Namur are an international Congregation founded by Julie Billiart and Françoise Blin de Bourdon in Amiens, France in 1804. Governed by the Congregational Leadership Team (CLT), with members based in Africa, Asia, Europe, North America and South America, the congregation is organised into individual areas and provinces. Within this global structure, Britain Province comprises of Sisters living in England and Scotland. The aim of the Sisters of Notre Dame de Namur is "to contribute to the advancement of the Roman Catholic religion by means of involvement in education, broadly conceived. By caring for individual members of the Congregation throughout their lives with the Congregation, the charity aims to enable and support the sisters to live out their faith and to live life to the full supported by the community of Sisters and to put that faith into practice through a wide variety of religious and other charitable works."

1.3 The Sisters of Notre Dame de Namur oversee two key facilities in England where 56 Sisters currently reside. A further seventeen Sisters live independently in Liverpool, London, Sussex, Plymouth and Crawley. The Care Managers provided the following information during interviews regarding both communities. Within the Birkdale Community, there are currently 26 Sisters, and within the Childwall Community, 30 Sisters. Care for those who require support is not outsourced to an external provider; rather, the Sisters of Notre Dame de Namur directly recruit and manage their own staff, retaining full responsibility for all aspects of care provision. Managers at the sites confirmed that Birkdale employs 42 staff, including 29 carers, while Childwall employs 54 staff, including 30 carers. The Religious Safeguarding Lead also confirmed that the organisation employs a total of 107 staff across both sites. This figure includes care staff, as well as individuals in other key roles such as a Registered Nurse, domestic staff, maintenance and administration. The needs of the Sisters vary significantly, with some living independently without any support, while others require regular medication, personal care, or ongoing assistance due to more complex health conditions. It is important to note that while care is actively

provided, neither site is currently registered with the Care Quality Commission (CQC[1]), and as such, the services fall outside the regulatory framework that applies to registered care settings.

1.4 Within the Archdiocese of Liverpool, eight Sisters are actively involved in various ministries, including serving as Eucharistic Ministers and readers, volunteering at a Diocesan spirituality centre, facilitating within religious congregations, and providing spiritual accompaniment. One Sister serves as the Provincial Leader with responsibilities for spiritual accompaniment, while others offer volunteer chaplaincy services within the prison system, assist in pupil support at a Catholic academy, and contribute to convent life through voluntary roles such as visiting and driving. Two Sisters are currently retired and resident in Archdiocese of Liverpool and are not engaged in outreach Ministry. In the Diocese of Shrewsbury, one Sister is engaged in parish ministry across two parishes. Additionally, in the Diocese of Arundel and Brighton, one Sister participates in parish ministry at a Roman Catholic Benedictine monastery and a local parish. One other Sister currently resides in the Diocese of Plymouth and is retired and does not engage in outreach ministry.

1.5 This audit seeks to assess the effectiveness of current safeguarding arrangements, by considering practice over the last twelve months. The Sisters of the Notre Dame de Namur, British Province includes Sisters living across England and Scotland, however, this audit focuses solely on the activities, governance and operations of the Sisters residing in England and Wales. The Catholic Safeguarding Standards Agency (CSSA)[2] 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 significant outreach with vulnerable populations and/or a disproportionately high number of open safeguarding cases). 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

[1] https://www.cqc.org.uk/ CQC, is the independent regulator of health and social care in England
[2] Catholic Safeguarding Standards Agency

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 Sisters of Notre Dame de Namur have been assigned to a Level 3 audit.

2. Scope & Methodology

2.1 The CSSA analyst initially contacted the Provincial Leader on the 10 January 2025 to confirm a baseline audit for the week commencing the 21 April 2025.

2.2 In advance of the formal audit week, the Sisters of Notre Dame de Namur were requested to complete a Level 3 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 Sisters of Notre Dame de Namur were provided with the self-assessment tool and guidance on the 10 January 2025. The completion date for the self-assessment and supporting evidence was scheduled for the 10 March 2025.

2.3 On 16 January, the CSSA analyst held a telephone conversation with the Religious Safeguarding Lead to discuss the audit arrangements in further detail.

2.4 This baseline audit was undertaken following the submission of the self-assessment on 11 March 2025 and further evidence was reviewed by the analyst during a site visit on 23 April 2025.

2.5 Information from the self-assessment and supporting evidence provided by the Sisters of Notre Dame de Namur was reviewed by the CSSA analyst and this evidence was assessed against the Level 3 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 Sisters of Notre Dame de Namur on the 22, 23 and 24 April 2025:
    - Interviews held via Zoom on the 22 April 2025

        - Both Care Managers at Childwall and Birkdale
        - Interview with four Senior Carers from Childwall and Birkdale
        - Interview with two carers from Birkdale
        - Interview with two carers from Childwall
    - Interview held at the Provincial Offices in Childwall on the 23 April 2025
        - Interview with the Religious Safeguarding Lead
        - Interview with the Provincial Leader
        - Interview with Health and Wellbeing Advisor
    - In Interviews held via Zoom on the 24 April 2025
        - Interview with four Trustees
        - Focus Group of Members

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 auditors, RLSS and the Safeguarding Teams in the dioceses of Liverpool, Westminster, Shrewsbury, Southwark, Plymouth and Arundel and Brighton regarding the Sisters of Notre Dame de Namur'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 with the CSSA Maturity Matrix for Level 3 RLGs.

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

3.2 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.

3.3 The Sisters of Notre Dame de Namur have received an overall rating of Early Progress

Overall Grading	Early Progress
Standard 1 - Safeguarding is embedded in the Church body's leadership, governance, ministry and culture	Early Progress
Standard 2 - Communicating the Church's Safeguarding Message	Early Progress
Standard 3 - Engaging with and Caring for those who report having been harmed	Early Progress
Standard 4 - Effective Management of Allegations and Concerns	Early Progress
Standard 5 - Management and Support of Subjects of Allegations and Concerns (respondents)	Firm Progress
Standard 6 - Robust Human Resource Management	Early Progress
Standard 7 - Training and Support for Safeguarding	Early Progress
Standard 8 - Quality Assurance and Continuous Improvement	Early Progress

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 website of the Sisters of Notre Dame de Namur[4] states that the Sisters are committed to "promoting a culture of care and protection for all. This commitment directly relates to our mission to make known. God's goodness and to the Church's common belief in the preciousness, dignity and uniqueness of every person". Their safeguarding policy, based on an RLSS template and last reviewed in December 2024, reiterates their commitment to the One Church Approach to safeguarding and ensuring they respond to victim/survivors promptly and compassionately. The policy also outlines the actions to be taken when safeguarding concerns arise. Recent evidence seen by auditors, which will be examined in more detail under Standard 4, demonstrates that this zero-tolerance approach to abuse is widely known, modelled by leaders and, when concerns are raised, appropriate action is taken.

4.1.2 The Safeguarding Policy and procedure apply to all individuals within the Sisters of Notre Dame de Namur, regardless of their role, position, or the activities they undertake. All members, employees, and volunteers are expected to adhere to this safeguarding policy and the related procedures to ensure a safe environment for all individuals. The Religious Safeguarding Lead confirmed that all Sisters and staff are required to sign an acknowledgment form confirming they have read and received the safeguarding policy document. This ensures that every individual within the Sisters of Notre Dame de Namur are aware of their safeguarding responsibilities and the procedures to follow in case of concerns.

4.1.3 The Trustees of the Sisters of Notre Dame de Namur, all of whom are Religious Sisters, meet on a quarterly basis. While safeguarding had not previously been a

[4] https://www.snduk.org/safeguarding/

standing agenda item, the Trustees have recently committed to including it as a regular item on the agenda at every meeting. In addition to the Trustees' meetings, the Sisters of Notre Dame in the UK are governed by a Provincial Leadership Team (PLT), which is elected by the members of the British Province. This team is responsible for overseeing the province's ministries and ensuring alignment with the congregation's mission and values. Appointments to the Provincial Leadership Team are ratified canonically by the Congregational Leadership Team, ensuring consistency with the congregation's international governance structure. In August 2024, the PLT identified the need to establish a Safeguarding Support Committee. This committee will include the Mental Health and Wellbeing Nurse, the Religious Safeguarding Lead, a Trustee with experience working with other Religious Life Groups and in psychoanalysis, and a retired police officer with significant safeguarding experience. The Provincial Lead confirmed that safeguarding will be a standing agenda item on the Safeguarding Support Committee meeting.

4.1.4 The safeguarding policy mandates that all Sisters will undergo safeguarding training relevant to their role. Records of completion are kept, alongside additional training completed by those in specific roles. RLSS indicated that thirteen members of the Sisters of Notre Dame had completed training over the past 12 months, these courses include; care and safety management plans, safeguarding leads, advanced safeguarding, adult safeguarding, Basic safeguarding, and Trustee safeguarding. This policy does not discuss the training requirements for those who are employed through the Sisters of Notre Dame de Namur.

4.1.5 The policy outlines the specific safeguarding responsibilities assigned to key roles, including the Trustees, the Provincial Lead, the safeguarding lead, and all other members of the organisation. Each group's duties are detailed in relation to safeguarding governance, oversight, case management, and reporting obligations. A further section reinforces that all members, regardless of position, are responsible for understanding how to report concerns and their duty to disclose these concerns.

4.1.6 Safeguarding and personnel records are securely stored either electronically or in locked paper files with access restricted to those who need it. These records are also shared with RLSS when necessary, as outlined in the Safeguarding Policy. Allegations or concerns involving Sisters are held securely in the Provincial Lead's office. Where concerns relate to employees, these are stored in the relevant

manager's office. Where the concern involves a Sister receiving care, this is logged in their care plan and stored within their individual care file held by the manager. If the concern related to a safeguarding lead or the Provincial Lead, then the information would be held by the Superior General.

4.1.7 The Religious Safeguarding Lead who is also a Religious Sister, has a background in education and safeguarding making her highly qualified for her role. With experience as a headteacher, safeguarding coordinator, and assessor for Ofsted and early years education, she has a strong foundation in evaluating compliance, managing safeguarding concerns, and ensuring that policies are effectively implemented. Her leadership skills, combined with her knowledge of safeguarding practices in educational settings, enable her to assess risks, train staff, and create a culture of safety and accountability within the Sisters of Notre Dame de Namur. This expertise is invaluable in ensuring that safeguarding standards are met and adhered to throughout the community. The Religious Safeguarding Lead's role and responsibility document states that she is required to regularly brief both the Trustees and the Provincial Leadership Team on safeguarding matters, ensuring that governance bodies remain informed and able to provide appropriate oversight. However, there is currently no documented reporting line for the Religious Safeguarding Lead within the organisation. While her reporting to the Trustees and Provincial Leadership Team occurs in practice, it has yet to be formalised through governance documentation.

4.1.8 Within all interviews, Leadership members and Carers demonstrated an understanding of the need to address low level concerns and share information with the safeguarding lead and the RLSS, when necessary. The Sisters and safeguarding lead also recognised that on occasion statutory agency referrals may be made.

4.1.9 The Sisters of Notre Dame de Namur have entered into formal agreements with the RLSS and CSSA.

Areas for Development

4.1.10 The current safeguarding policy for the Sisters of Notre Dame de Namur was last updated in 2024 and is not scheduled for review until 2027. This three-year review period is too infrequent given the evolving nature of safeguarding legislation,

guidance, and best practice. To ensure the policy remains current and responsive, it is recommended that the policy should be reviewed annually.

4.1.11 The Sisters of Notre Dame de Namur have yet to develop a safeguarding implementation plan to support structured adherence to the eight National Safeguarding Standards in England and Wales. While they have informed the CSSA analyst that they intend to use the recommendations from this audit process to inform this plan, it should serve as a practical framework to structure safeguarding activity, clearly allocate responsibilities and resources, and provide a means for regularly monitoring and reviewing progress. It should be shared with and reviewed by the Trustees to ensure effective oversight and accountability.

4.1.12 The Sisters of Notre Dame de Namur currently rely on their Constitutions rather than adopting the Integrity in Ministry[5] framework, and there is no clear plan in place to embed the values and principles of the national safeguarding framework. While we recognise the value that their Constitutions bring, the expectation under Substandard LGC 3 is that Integrity in Ministry is adopted as the nationally agreed framework for promoting compassionate, transparent, and safe leadership in safeguarding. Continued reliance on internal documents without alignment to this standard does not meet national safeguarding expectations, and steps should be taken to ensure compliance.

4.1.13 The Trustees and the Provincial Leadership Team (PLT) are two distinct governance bodies within the Sisters of Notre Dame de Namur UK. While the membership of these bodies is different, formal remits and governance structures defining the relationship between the Trustees and the PLT are not documented. The Provincial Lead and Religious Safeguarding Lead have confirmed that the newly formed Safeguarding Support Committee will report to the Trustees. Establishing clear governance documentation would be important to support transparency, accountability, and effective safeguarding oversight. Although the formation of a Safeguarding Support Committee has been discussed and its members identified,

[5] Integrity in Ministry is a code of conduct for Religious engaged in ministry in the Catholic Church in England and Wales. It has been written for the guidance of those in ministry and for the information of those people with and among whom Religious exercise their ministry.

it has not yet been formally established. There are no formalised terms of reference, reporting mechanisms to the Trustees, or documented lines of accountability. The absence of these governance structures significantly undermines the effectiveness of safeguarding oversight and weakens the organisation's ability to ensure clear responsibility, robust monitoring, and accountability in safeguarding matters.

4.1.14 Individual risk assessments are completed as part of care plans in residential settings, However, there is no organisational risk register or overarching safeguarding risk assessment process in place. This means the broader safeguarding risks to the congregation and those they serve are not proactively identified or mitigated. In addition, the Sisters of Notre Dame de Namur facilities are not registered with the CQC (Care Quality Commission), they would need to implement their own internal mechanisms to audit compliance and monitor the quality of care and overall safeguarding standards.

4.1.15 While safeguarding information is accessible internally, access for the public remains limited. The safeguarding policy is currently not available on the website. Additionally, safeguarding communications are not available in alternative formats or languages or accessible versions, which limits its reach and effectiveness.

4.1.16 The Sisters of the Notre Dame should update their Safeguarding Policy to include the latest version of Pope Francis' Apostolic Letter, "Vos Estis Lux Mundi" 2023, replacing the 2019 edition.

Graded: Early Progress

4.2 Standard 2 Communicating the Church's Safeguarding Message

Strengths

4.2.1 The CSSA analyst noted that the Sisters of Notre Dame de Namur safeguarding statement and contact information for the RLSS is displayed across multiple locations in the Convent of Notre Dame, Childwall and within the Provincialate . The buildings have limited public access and locked entry doors. The chapels at

Birkdale and Childwall are accessed through the main building and are available to Sisters who wish to pray and participate in mass and services.

4.2.2 The Religious Safeguarding Lead and Provincial Lead noted that communication with the Sisters is regular and often informal, as both are frequently present on site, visiting or phoning individuals as needed. These conversations often focus on the Sisters' care and protection and are said to be approached in a way that fosters openness and trust. It was acknowledged that the term "safeguarding" can sometimes prompt caution or anxiety, and therefore the Provincial Lead has recognised that efforts should be made to discuss these matters in more accessible and reassuring terms with the importance of openness being emphasised. The Sisters have explored developing a communications policy in accordance with the National Safeguarding Standards. Additionally, the Provincial Leadership Team recently attended an international meeting in Nairobi, where an Independent Safeguarding Consultancy presented to five provinces over two days. Information from this session has since been shared with Sisters in both locations.

4.2.3 Interviews with Sisters who reside in other Dioceses confirmed that they receive information and documentation via email and telephone. One Sister shared recent conversations with the Provincial Lead regarding her health and the possibility of relocating to Birkdale or Childwall and stated that she was being fully supported to explore all available options.

4.2.4 Within the context of care for the Sisters, senior carers and key staff members attend Monday morning meetings, where operational matters and updates are discussed. While safeguarding is not a fixed item on the agenda, it can be raised under any other business or is sometimes discussed within the health and safety section. Any changes or updates in safeguarding practice would be addressed during these meetings as needed. Minutes are taken to document discussions and actions.

4.2.5 The Sisters' self-assessment states that Catholic safeguarding updates, including relevant policies and procedures, will be circulated to the Trustees for their information, who are then expected to consider any resulting actions for the charity. However, it remains unclear which specific documents are included and how this process is managed.

4.2.6 The Sisters of Notre Dame confirm the use of an electronic communication system, including an internal intranet accessible to all Sisters and staff. This system provides each Sister with access to private email, congregational communications, and key organisational information. Each desktop features a safeguarding icon that links directly to the safeguarding policy, available training opportunities, and related guidance. Key staff also have access to this information and are responsible for disseminating it as appropriate across the community.

Areas for Development

4.2.7 The Sisters of Notre Dame de Namur have a website that includes a safeguarding statement, but it currently lacks further detailed information. While the statement outlines their commitment to safeguarding, there is no additional content or resources available for the public to access regarding specific safeguarding policies, procedures, or contact details. This lack of accessible information reduces transparency and makes it difficult for individuals to understand how safeguarding concerns are handled or to know how to raise concerns themselves.

4.2.8 The Sisters of Notre Dame de Namur do not have a communication plan. Therefore, information regarding how the Sisters will share their safeguarding messages internally and externally are not considered. The Sisters should develop a plan that describes how they will communicate their safeguarding messages, to whom and in what way. This may be part of an existing safeguarding policy or their safeguarding implementation plan. Additionally, this plan should be reviewed regularly to ensure effectiveness.

4.2.9 The Sisters of Notre Dame de Namur 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.

4.2.10 During interviews, some Sisters living outside the main communities expressed feeling somewhat distanced from the Provincial Leadership Team and safeguarding structures, largely due to geographic separation. They noted that their experiences differ from those living nearer the provincial office.

Communication is typically limited to policy updates or safeguarding training invitations, with few opportunities for deeper engagement. Maintaining contact is often left to individuals, with limited spontaneous visits or inclusion in wider team meetings. These insights suggest that a more structured and proactive approach may be needed to ensure continued oversight, inclusion, and safeguarding support for Sisters living more independently.

Graded: Early Progress

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

Strengths

4.3.1 During the audit period, no allegations were made against any member of the Sisters of Notre Dame de Namur. However, during the audit process, an anonymous referral was made to statutory agencies regarding the care of Sisters within one of the communities, this is further discussed in 4.4.1.

4.3.2 Laminated contact sheets displaying the details for the RLSS, the Religious Safeguarding Lead, and local police are visibly displayed within the Provincial Offices next to every telephone.

4.3.3 The safeguarding policy outlines the steps to be followed when a safeguarding issue arises and states that the person should contact relevant safeguarding bodies. The policy ensures survivors are informed about the next steps in the process and provided with an indicative timescale.

4.3.4 During interviews, the Trustees, Religious Safeguarding Lead and Provincial Lead confirmed their commitment to meeting with any survivor who comes forward, ensuring they listen attentively, contact the RLSS as needed, and consider statutory referrals when appropriate. The safeguarding lead is well-trained and experienced in handling disclosures of harm. She attended two key RLSS training courses in 2024: Advanced Safeguarding Training in March and Safeguarding Lead Training in November.

4.3.5 The Trustees, Provincial, Care Managers and Religious Safeguarding Lead 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 allegations regarding their members or employees. They also acknowledged the importance of referring concerns to appropriate safeguarding bodies and the Sisters stated they can provide funding for survivor support services if necessary.

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 Religious Safeguarding Lead in the event of a safeguarding disclosure. They also understood the importance of documenting appropriate information in writing and sharing these concerns with the Religious Safeguarding Lead.

4.3.7 The CSSA analyst observed that staff rooms contained clearly visible information on notice boards, including the RLSS poster with contact details for the Religious Safeguarding Lead, the grievance policy, upcoming training opportunities, and the safeguarding policy. While there is a policy and employee handbook accessible in the manager's office that Sisters and others can use to raise concerns about their own care or on their behalf, these resources are not immediately visible or easily accessible in communal areas. Including a concerns form or a copy of the employee handbook on all notice boards would enhance transparency and accessibility, making it easier for Sisters and others to understand and exercise their right to raise safeguarding concerns without needing to seek out the manager's office. This would support a more open culture where individuals feel empowered and supported to report any issues promptly.

Areas for Development

4.3.8 While the policy mentions informing the complainant of the next steps and ensuring that the relevant bodies are contacted, there is no specific reference to providing ongoing emotional, psychological, or practical support for those who report harm. Having a designated support person or an advocate to liaise between the complainant, the safeguarding team, and external agencies could enhance the policy. There should be clear guidelines on how the Sisters of Notre Dame de Namur

will offer support services to survivors, which may include counselling, spiritual care, and assistance. The Sisters should also consider implementing a formal process for gathering feedback from survivors to ensure that any difficulties or gaps are addressed and improvements can be made.

4.3.9 Although the Sisters of Notre Dame de Namur have trained Sisters and staff on how to respond to disclosures, there is no formal written guidance available for them to refer to. It would be beneficial to create clear, written guidelines outlining how to respond to disclosures of abuse or concerns. This should include steps on listening, documenting, and reporting concerns appropriately. Providing this guidance would ensure all Sisters, including those not in active ministry, are equipped to identify and report safeguarding concerns they may encounter.

4.3.10 The Sisters have not yet engaged directly with survivors to inform future safeguarding practices as they have not yet had received any allegations. Leaders should consider how engagement with survivors through Religious Life Groups with direct experience or contact with the RLSS, can inform future safeguarding practices. This engagement could also provide an opportunity for bespoke training focused on survivor interaction, improving the Sisters' ability to offer informed and compassionate support

4.3.11 Support information should be displayed in communal areas, including details of the Religious Safeguarding Lead and relevant support agencies. In addition, this information should be made available on the organisation's website. Making this visible and easily accessible would help survivors access support services confidentially and without unnecessary barriers. Currently, there is no visible signage or material promoting support organisations beyond those referenced by the RLSS.

4.3.12 The Sisters of Notre Dame de Namur should establish a central register of local and national support organisations within the UK. This should be maintained by the Religious Safeguarding Lead and shared with all relevant individuals across the organisation. The register could include contact details for services related to mental health, abuse, substance misuse, victim support, dementia care, and support for older adults. An up-to-date and accessible directory would help ensure

the safeguarding lead and others can swiftly and appropriately signpost individuals to relevant support.

4.3.13 The Religious Safeguarding Lead 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 Sisters remain informed about developments in safeguarding practice. This engagement would demonstrate a commitment to working within the wider safeguarding community.

Graded: Early Progress

4.4 Standard 4 Effective Management of Allegations and Concerns

Strengths

4.4.1 During the audit process, an anonymous referral was made to statutory agencies regarding the care of Sisters within one of the communities. This information was shared with the RLSS, who coordinated an unannounced visit alongside a social worker. The Sisters of Notre Dame de Namur fully cooperated with all parties involved. Immediate actions, such as engaging with external agencies and reviewing internal care practices, were evidenced, helping to ensure that any immediate protection concerns were addressed while the investigation continued. The RLSS have confirmed that the case is now closed, with no further action required by statutory agencies. Additionally, the RLSS have undertaken follow-up discussions with the Sisters to support learning from the incident and to inform revisions to relevant policies and documentation.

4.4.2 The Provincial Leader confirmed that once a case is concluded and an outcome is reached, the trustees will meet to discuss any lessons learned, and this will be formally documented. The information will then be shared, informing any actions and prompting any necessary changes to policies or procedures.

4.4.3 The Trustees have stated that, in practice, they have oversight of safeguarding concerns. They have demonstrated a clear understanding of their responsibility to oversee these matters and recognise the importance of ensuring that relevant information is appropriately shared with them. In addition to their oversight responsibilities, the Trustees have stated their understanding of the legal obligations surrounding safeguarding incidents, specifically their duty to report any serious concerns or incidents to the Charity Commission.

4.4.4 The Sisters 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 lead.

4.4.5 Employees caring for the Sisters receive a safeguarding handbook, which includes abuse definitions, reporting procedures, and a body map for documenting injuries. This handbook is available to the Sisters but is not fully integrated into practice guidance for them. During interviews, carers demonstrated attentiveness to the Sisters' needs and showed a clear understanding of the importance of safeguarding. They discussed the procedures for reporting concerns clearly and confidently. Both carers and managers emphasised the importance of accurately documenting safeguarding information, with managers highlighting the necessity of promptly sharing this information with the safeguarding lead to ensure appropriate follow-up.

4.4.6 The Safeguarding Policy states that the Sisters of Notre Dame de Namur have a responsibility to ensure that all case files held are accurate, up to date and stored securely.

Areas for Development

4.4.7 The safeguarding policy for the Sisters of Notre Dame de Namur states that the RLSS is responsible for managing safeguarding concerns. In practice, allegations involving members are handled by the religious safeguarding lead in collaboration with the RLSS, while concerns involving parishioners or external individuals are referred to the relevant Diocese or host organisation. Additionally, interviews with care managers during the audit suggest that low-level concerns relating to staff or the care of Sisters are often managed by facility managers. While the policy clearly states that all individuals have a duty to disclose safeguarding

concerns to either the religious safeguarding lead or their immediate manager, it is not evident that these low level concerns are consistently escalated beyond the initial management level. Although the roles and responsibilities section of the Safeguarding Policy outlines the duty to disclose, the procedures section does not reinforce this. This creates a lack of clarity around escalation routes and oversight for certain types of concerns, particularly within the care facilities.

4.4.8 Regarding the new concern raised during the audit, the Sisters of Notre Dame de Namur had already engaged with the RLSS and were acting on the guidance provided by both the RLSS and relevant statutory agencies. As the initial concern originated from statutory agencies themselves, further referral was not required. However, it is recommended that the safeguarding policy be updated to explicitly include guidance on avoiding any action that could impede or interfere with statutory investigations. This will ensure clarity in future cases and reinforce the importance of working in partnership with statutory bodies.

4.4.9 As there is currently no centralised log for safeguarding concerns, it is unclear whether low-level concerns including those that arise in informal or pastoral contexts are consistently reported to the Trustees and Religious Safeguarding Lead. Without a standardised system for recording and tracking these concerns, it becomes difficult to ensure effective oversight, identify patterns, or aim to ensure timely escalation. Interviews with the managers provided instances where lessons had been learned from addressing minor concerns, but these were not always shared across the religious life group. To address this gap, the safeguarding lead should implement a centralised log for all safeguarding concerns across all facilities, ensuring that concerns are consistently recorded in a standardised format. Trustees should regularly review this log, formally documenting lessons learned, patterns identified, and emerging risks. This would enhance safeguarding oversight, facilitate timely responses, and support the ongoing improvement of policies and practices.

4.4.10 The Sisters of Notre Dame de Namur 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 practices, reflect the values and needs of the broader community, and are continually improved through feedback from various perspectives.

4.4.11 The Sisters of Notre Dame de Namur do not currently have a dedicated Data Protection Policy. Instead, data protection responsibilities are distributed across several procedural documents, including those covering Record Keeping, Confidentiality, and the Disclosure and Barring Service. While these documents contain helpful elements, such as guidance on confidentiality and the consequences of data breaches, they do not collectively provide a clear or comprehensive framework. This approach can make it difficult to ensure consistent understanding and implementation across the organisation. Given the Sisters employ 107 staff and manage sensitive data related to Sisters, carers, and safeguarding concerns, the need for a Data Protection Policy is significant. A standalone policy would outline how personal data is collected, stored, shared, and disposed of, and define processes for access requests and breaches, ensuring compliance with UK GDPR and the Data Protection Act 2018. Although the safeguarding policy states that case files must be accurate, up to date, and securely stored, it does not detail how this is achieved. Currently, safeguarding records are kept in different locations depending on whether they relate to a Sister, a carer, or someone receiving care, which raises concerns about consistency and security. To address this, the Sisters should introduce a comprehensive Data Protection Policy that encompasses safeguarding information, ensuring appropriate safeguards are in place for all sensitive data.

Graded: Early Progress

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

Strengths

4.5.1 The Sisters of Notre Dame de Namur have no experience of managing respondents and therefore there is no practice evidence available to assess how they would respond in such a situation. As a result, the assessment in this area is based on a review of policies, available evidence, and theoretical discussions during interviews.

4.5.2 The safeguarding policy outlines "appropriate action must be taken if there are reasonable grounds to believe that someone who holds any role within the Church is going to or has committed a crime, is going to or has caused harm, poses a risk or is otherwise unsuitable to work in their role". The policy references unacceptable behaviours and draws from *Vos Estis Lux Mundi* (2019), reinforcing its application in all relevant situations involving members of religious life groups, laypersons, volunteers, or employees.

4.5.3 The Sisters of Notre Dame de Namur have shown a proactive commitment to safeguarding by actively engaging with the RLSS through ongoing training and collaboration. The RLSS provide personnel that are trained in managing, monitoring and supporting respondents of allegations. In the event of any allegation or disclosure, the Sisters have acknowledged the importance of consulting with the RLSS to ensure the appropriate actions are implemented, and stated they would seek support from the RLSS, if a Safety Management Plan was needed. This approach was clearly reflected in their response to the recent allegation, where they worked closely with the RLSS, cooperating to ensure the situation was managed properly and in line with best practices.

4.5.4 The Trustees showed a clear understanding of the need for confidentiality when managing allegations and recognised that respondents may require emotional, psychological, legal, or practical support. The Sisters stated they would liaise with the RLSS to ensure respondents are appropriately supported.

4.5.5 Those in positions of leadership acknowledge that respondents may need to be withdrawn from ministry and indicated that, should such a situation arise, the respondent would receive ongoing support from the safeguarding lead, Trustees, and RLSS. Although alternative accommodation has not yet been required, Trustees confirmed that such support would be made available if needed.

Areas for Development

4.5.6 The Sisters of Notre Dame de Namur Safeguarding Policy addresses key aspects of managing safeguarding allegations; however, the Sisters would benefit from further clarification on the process and the types of support available to respondents. While the Sisters demonstrated an understanding of the emotional, mental health, physical, and legal needs that a respondent may experience,

including the importance of a support person, this is not clearly articulated within the any current guidance. Including additional practice guidance would ensure a consistent, fair, and transparent approach. This guidance should outline what support may be offered, the role of the RLSS, and how the wellbeing of the respondent will be balanced with safeguarding responsibilities.

4.5.7 The Sisters of Notre Dame de Namur should consider whether their policies and procedures would benefit from liaison with other Religious Life Groups that have had recent experience of supporting Respondents to ensure they are as effective as possible.

4.5.8 The Sisters indicated that, in the event of an allegation or disclosure, they would seek canonical advice through their members, potentially drawing on the support from those known to them who hold doctorates in Canon Law. These two Sisters are qualified canonists, with one Sister also fulfilling the role of Judge in a number of Diocesan and Regional tribunals in England, Wales and Northern Ireland.

Graded: Firm Progress

4.6 Standard 6 Robust Human Resource Management

4.6.1 Safer Recruitment Practice Guidance is recorded within the broader safeguarding policy. It outlines that all congregation members, staff, and volunteers are required to undergo DBS checks, including enhanced checks, consistent with statutory and Church safeguarding requirements. All appointments are subject to the receipt of satisfactory DBS checks and references. New staff members must also sign to confirm their understanding of the safeguarding policy and their individual responsibilities. Those working directly with vulnerable people are additionally asked to self-disclose any relevant convictions. The safeguarding lead confirmed that Sisters involved in active ministry are expected to follow the safeguarding policies and procedures of the organisations in which they serve. They are required to complete DBS checks in line with their ministry status, typically through their parish or diocese, especially in roles such as Eucharistic Ministers, with automatic update services in place. For staff, DBS-related details, including check date, status, and certificate number, are recorded in individual personnel files and securely

stored at the relevant site. The Religious Safeguarding Lead retains oversight of DBS compliance through the UCheck dashboard, enabling ongoing monitoring of status and ensuring all records remain current. The RSL has confirmed that all existing DBS checks are currently up to date.

4.6.2 The care home managers stated in interview that during the recruitment of employees, they follow a structured process, including advertising, application review, interviews, recruitment checks, and an induction period. However, they acknowledged the absence of appropriate guidance that clearly outlines the full recruitment process in detail. Additionally, they confirmed that, depending on the role, more senior staff may be involved in the interview process alongside the managers. The Safeguarding Policy specifies that "upon appointment, all new employees should be provided with and sign to confirm they understand all relevant policies and procedures, including a copy of this document, with their responsibilities within it clearly highlighted."

4.6.3 The current safeguarding policy does not account for scenarios involving new vocations, and the Provincial Leader noted that it is no longer considered practical within the UK. Instead, any individual expressing interest in joining the Sisters would likely be referred to communities elsewhere for further discernment and consideration.

4.6.4 The Religious Safeguarding Lead confirmed that the Sisters of Notre Dame de Namur employ a total of 107 staff on their payroll for both facilities. The Sisters of Notre Dame de Namur Trustees state they would receive confirmation of any new recruits.

4.6.5 The Health and Wellbeing Advisor has been in post for three years, during which time the role has evolved significantly. Originally focused on a single care facility previously owned by the Sisters of Notre Dame de Namur, the position was initially specific to that house. It has since expanded to encompass regular visits to both main care houses, as well as providing support to Sisters living independently in the community. A Registered General Nurse with a Registered Manager's Award and qualifications as an NVQ Level 2 and 3 Health and Social Care assessor and verifier, she plays a key role in promoting the wellbeing of the Sisters. Her responsibilities include overseeing and auditing medication (a task assumed after

the retirement of the nurse at Childwall), monitoring health concerns, and supporting care planning in collaboration with senior carers and house managers. She acts as a liaison for staff, provides professional advice on health-related matters, and identifies Sisters who may require additional care or a transition into a care setting. She also offers tailored support to leaders and those living alone. A draft role description has been created to reflect the current scope of her work.

4.6.6 Regular meetings between the Health and Wellbeing Advisor and senior care staff are now established as part of routine practice. These occur on a scheduled basis (monthly), with a formal agenda set in advance. Minutes are taken during each meeting to document discussions, decisions, and any actions required. This process ensures consistent communication, accountability, and coordination in the delivery of care, and allows for timely identification and resolution of any issues concerning the health and wellbeing of the Sisters. In addition to the meetings, weekly informal walkarounds of the premises are conducted to identify any environmental concerns or risks; however, these are not currently recorded through a formal risk assessment process.

Areas for Development

4.6.7 The whistleblowing section of the Sisters of Notre Dame de Namur Safeguarding Policy states that individuals can raise safeguarding concerns without fear of victimisation and should refer issues of malpractice or safeguarding failings to the RLSS. It outlines that the RLSS will take appropriate action and provide written feedback with a rationale. However, the policy could be strengthened by explicitly mentioning protections under UK whistleblowing law, the option to raise concerns anonymously, additional internal reporting routes, and access to support for whistleblowers. Including these elements would align the policy more closely with best practice and legal standards.

4.6.8 There is a grievance policy in place which provides a process for staff to raise concerns related to their own employment or working conditions. However, there is currently no separate complaints policy for addressing concerns raised by safeguarding service users, families, or external parties. Introducing a formal complaints policy would ensure clarity on how such concerns are received, investigated, and responded to, and would demonstrate the organisation's

commitment to transparency, accountability, and continuous improvement in safeguarding and care practices. It is also recommended that the complaints policy be made publicly available on the organisation's website to ensure accessibility and promote confidence in the organisation's approach to handling concerns.

4.6.9 The Religious Safeguarding Lead, Care Managers, and Provincial Lead have confirmed that, over the past few years the increasing care needs of the Sisters, due to a general decline in health, has significantly impacted the roles of staff. Many staff members who were originally employed under different expectations have experienced a substantial shift in their responsibilities, particularly relating to the care of more vulnerable adults. However, these changes have not been formally reflected in updated job descriptions. This lack of alignment between actual duties and documented roles has led to a number of HR challenges, including role clarity and performance management. Addressing this gap by reviewing and updating job descriptions will be essential to ensure staff are supported, roles are clearly defined, and compliance with employment and safeguarding standards is maintained.

4.6.10 The Health and Wellbeing Advisor is responsible for maintaining care plans and risk assessments for individuals currently receiving care. These documents are essential to ensure personalised, safe, and effective care. However, at present, clarity is needed regarding the review process for these care plans and risk assessments. Clear guidelines should be established to specify the frequency of reviews, the circumstances or triggers that require an update, and the roles and responsibilities of those involved in the review and approval process. Improving this clarity will help ensure that care plans and risk assessments remain accurate, up-to-date, and responsive to the changing needs of the individuals, thereby supporting their overall wellbeing more effectively.

4.6.11 The expectation of the Catholic Safeguarding Standards Agency (CSSA), within its policy, *"Making a complaint to the Catholic Safeguarding Standards Agency (CSSA) about a diocese, eparchy or religious life group in England and Wales,"* is that it is responsible for investigating complaints about Catholic dioceses, eparchies, and religious life groups, and serves as the final stage for unresolved safeguarding complaints. Therefore, the Sisters of Notre Dame de Namur should

ensure any adopted complaints policy should explicitly acknowledge the role of the CSSA and ensure that individuals are aware of their right to escalate safeguarding concerns to the CSSA for independent investigation.

4.6.12 To further strengthen recruitment practices, it would be beneficial to develop a standalone Safe Recruitment Guidance document. This should clearly outline each stage of the recruitment process, including requirements such as obtaining written references from previous employers, conducting safeguarding-aware interviews, and completing all necessary background checks. Where applicants have lived or worked abroad, the guidance should also require checks from relevant religious or governmental bodies in their country of origin. Additionally, the guidance should address how to manage cases involving blemished DBS disclosures to ensure a fair and consistent approach. Oversight of the recruitment process by the Trustees and relevant leadership teams should be explicitly incorporated into the guidance to maintain accountability and ensure safeguarding standards are upheld. Establishing this guidance will support consistent, safe recruitment across all settings and demonstrate a proactive approach to safeguarding.

4.6.13 The Sisters should establish a clear mechanism for receiving feedback on policies, allowing for continuous improvement and ensuring that they meet the needs and expectations of those who may need to use them.

4.6.14 To improve consistency, oversight, and safeguarding compliance, it is recommended that the Sisters of Notre Dame implement a centralised DBS tracking system covering all members, staff, volunteers, and carers across all facilities. This document should also include those Sister living independently in other Dioceses. This system would bring together currently separate registers into a single, unified record, enabling leadership to monitor DBS statuses more effectively. It should include clear tracking of expiry dates, recheck schedules, and confirmation of certificate receipt. Centralising DBS processes and records would enhance safeguarding practice by ensuring timely renewals, reducing risk, and promoting greater organisational accountability and oversight.

Graded: Early Progress

4.7 Standard 7 Training and Support for Safeguarding

4.7.1 The safeguarding policy states that all Sisters of Notre Dame de Namur will undergo safeguarding training relevant to their specific roles to ensure they are equipped with the necessary knowledge and skills to uphold safeguarding standards. It also specifies that refresher training will be undertaken "if and when necessary".

4.7.2 The managers of Birkdale and Childwall oversee the training for staff, ensuring that all required training is completed. A log of completed training is maintained in each individual staff file. The Religious Safeguarding Lead maintains a record of her own training undertaken with the RLSS, as well as the safeguarding training she has delivered to the Sisters, using RLSS training materials. The training record also includes sessions delivered to the Business Manager, Care Managers from both Birkdale and Childwall, the Provincial Treasurer, and the Health and Wellbeing Advisor. A recent review of training needs, conducted by the Religious Safeguarding Lead in collaboration with the Health and Wellbeing Advisor, highlighted a growing requirement for enhanced safeguarding awareness across caring roles. As a result, the 'Safeguarding Adults' module, based on the Care Certificate, is now being introduced as part of the mandatory training programme for all care staff. This training is being led by the Health and Wellbeing Advisor, who is a qualified trainer and registered nurse.

4.7.3 The Religious Safeguarding Lead confirmed that Sisters are encouraged, as far as they are able, to engage with basic safeguarding training. They confirmed that some participated in a safeguarding session led by the Religious Safeguarding Lead in April 2024, while others attended Zoom based sessions on Basic Safeguarding delivered by the RLSS between February and April 2025.

4.7.4 The Health and Wellbeing Advisor, who is a registered general nurse as well as an assessor and verifier for NVQ Levels 2 and 3 in Health and Social Care, confirmed that training boards displaying advertised courses are present in both staff rooms. Care managers stated that most carers hold an NVQ Level 2 qualification, and it is expected that those who do not yet possess this qualification will attain it. Senior Carers are expected to hold at least an NVQ Level 3, with the opportunity to progress

to Level 4. Given her experience and qualifications, the Health and Wellbeing Advisor is expected to support staff in achieving these training goals.

4.7.5 The Trustees stated that staff training is primarily overseen at an operational level by the Care Managers. The Trustees are not directly involved in day-to-day training management, but they stated that if any issues related to staff training arise, the managers should inform the safeguarding lead who would inform them. This ensures that the Trustees remain aware of any significant concerns or challenges related to training and can take appropriate action if necessary.

4.7.6 The Trustees and operations manager reported that they have not encountered any compliance issues requiring intervention to date. However, they confirmed that if non-compliance with safeguarding training expectations were to arise, appropriate action would be taken. In cases involving a Sister, the matter would be addressed through direct conversation, with Trustees reinforcing the importance of adhering to training requirements. For employees or carers, such non-compliance would be managed in accordance with established HR policies, and could potentially lead to disciplinary action, including dismissal, if necessary.

4.7.7 The Religious Safeguarding Lead receives regular email updates from the RLSS regarding upcoming training opportunities, which are currently shared informally and formally with the community. To strengthen communication and ensure safeguarding remains a priority, the Sisters should ensure their communication plan reflects how upcoming training will be discussed more formally.

Areas for Development

4.7.8 Whilst the safeguarding policy directs that members undergo safeguarding training relevant to their role it offers no more specificity than that. The Sisters of Notre Dame de Namur should create a Training Needs Analysis to identify the training needs for individuals by the roles that they undertake and the expected frequency of refresher training. Compliance should then be reported to the safeguarding committee and to Trustees for their meetings to reassure them that safeguarding training is proceeding according to expectations. They should also request feedback. This will ultimately strengthen safeguarding practices and ensure that training is tailored to the specific requirements of the Sisters and staff.

4.7.9 Training records for staff are currently maintained separately by individual managers, with information stored in personal staff files. While this allows for basic documentation, it limits accountability, consistency, and organisational oversight, particularly in relation to safeguarding. To address this, it is recommended that a centralised training matrix be developed to cover all staff across both sites. This matrix should include comprehensive records of all completed training, upcoming renewal dates, and any missed training along with documented reasons. It should be accessible to both the Religious Safeguarding Lead and Trustees to provide a clear and up to date overview of training compliance. Although safeguarding is a key component, the purpose of a centralised training record is to ensure consistent and transparent tracking of all training activities across the Sisters of Notre Dame. At present, safeguarding training records for the Sisters are maintained by the Religious Safeguarding Lead; however, these records do not fully capture the full extent of training undertaken or address wider training needs. Centralising training data for both staff and Sisters (including Sisters living outside of the Birkdale and Childwall communities) would enhance visibility, support compliance, and promote a consistent safeguarding approach. Recognising the scope of this task, it is therefore recommended that the Sisters of Notre Dame clearly define shared responsibility for collating and maintaining these records, involving the Religious Safeguarding Lead, site managers, and the Business Manager.

4.7.10 Trustee training has not been recorded by the safeguarding lead and clarity is needed on when this was last undertaken. Trustees should complete, and refresh, RLSS Safeguarding Trustee training to ensure that they understand their responsibilities in full in relation to safeguarding

Graded: Early Progress

4.8 Standard 8 Quality Assurance and Continuous Improvement

Strengths

4.8.1 The Sisters of Notre Dame have acknowledged the importance of strengthening their safeguarding arrangements and have identified the establishment of a dedicated safeguarding committee. While there are currently

no formal documents or procedures in place, the committee's membership has been identified, reflecting a commitment to developing a clear and accountable safeguarding structure. Moving forward, it will be essential for the Sisters to formalise this committee's role, responsibilities, and operational framework to ensure effective oversight and compliance with safeguarding requirements across all their ministries.

4.8.2 The Sisters of Notre Dame de Namur recognise the importance of listening to and engaging with Survivors of abuse. The Trustees have affirmed their commitment to meeting with any Survivor who chooses to come forward, if that is the Survivor's request. This reflects the organisation's dedication to openness, accountability, and the ongoing need to learn from the experiences of Survivors to strengthen safeguarding practices.

4.8.3 The Sisters of Notre Dame de Namur intend to use 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.

Areas for development

4.8.4 Formalising internal quality assurance mechanisms to assess progress against the National Safeguarding Standards will help ensure continuous improvement and accountability for the Sisters. Establishing clear Key Performance Indicators (KPIs), such as compliance with safer recruitment, vetting procedures, and safeguarding training, will allow for regular, evidence-based reporting to leadership. To support this, the Religious Safeguarding Lead or Safeguarding Committee should produce an annual safeguarding report for the Board of Trustees. This report should include key activity from the year, such as training compliance, incident data, policy updates, risk assessments, and identified areas for improvement. Together, these measures will enable Trustees to fulfil their legal responsibilities and provide effective strategic oversight of safeguarding practices.

4.8.5 Trustees should ensure safeguarding is a standing agenda item and discuss the progress of the intended implementation plan that will be created post audit. The Trustees should make sure that any actions set are allocated to individuals or groups who are given appropriate resources and time to complete them. Progress

should be reported to Trustees in their meetings so any issues can be identified and addressed.

Graded: Early Progress

5. Summary of Overall Findings

5.1 The Sisters of Notre Dame de Namur in England and Wales comprise 73 Sisters, most of whom reside at Birkdale or Childwall care communities. While their active ministry is decreasing due to age and infirmity, the Sisters have made meaningful progress in strengthening safeguarding practices to meet current needs. Both staff and Sisters actively participate in safeguarding training, with key modules such as *Safeguarding Adults* included. Safeguarding is now a standing item on the agenda for trustees' meetings, reflecting a strong commitment to accountability. These developments form part of a broader effort to improve coordination and consistency in safeguarding across their sites.

5.2 The primary focus should now be on enhancing cohesion and consistency in safeguarding practices across all locations operated by the Sisters of Notre Dame de Namur. Key priorities include improving the recording and oversight of safeguarding training, DBS checks, and ensuring clear, centralised monitoring systems are in place. The organisation should develop and implement a safeguarding implementation plan, with annual safeguarding reports submitted to the Board of Trustees to ensure transparency and track progress against agreed objectives. In addition, the Sisters should consider how to engage with survivors through Religious Life Groups with direct experience or contact with the RLSS, where appropriate, to inform and shape safeguarding practice. Establishing mechanisms for ongoing feedback and policy review, from staff, Sisters, and Survivors, will support the development of safeguarding framework. These steps will help embed a strong, sustainable safeguarding culture that promotes transparency, accountability, and continuous improvement across all areas of work.

5.3 The Provincial Lead has confirmed that the Sisters of Notre Dame de Namur have continued to adapt their policies in response to the long-term effects of the COVID-19 pandemic and the closure of one of their facilities. These changes have had a lasting impact on the organisation. However, it is now crucial that the implementation of safeguarding recommendations is prioritised without further delay. Clear action and accountability are needed to ensure that safeguarding practices are robust, consistent, and aligned with current expectations and standards.

5.4 The Sisters of Notre Dame de Namur have demonstrated that their current practice exceeds minimum safeguarding practice. They have been rated as achieving Early Progress against seven of the standards and Firm Progress against the remaining standard. This gives an overall rating of Early Progress.

6. Recommendations

To support improvement, the following recommendations are made:

Within 3 months

- Create an implementation plan to serve as a practical framework to structure safeguarding activity, clearly allocate responsibilities and resources, and provide a means for regularly monitoring and reviewing progress. It should be shared with and reviewed by the Trustees to ensure effective oversight and accountability.
- Create a centralised safeguarding concerns log with standardised recording format for all facilities. Trustees should regularly review this to track patterns and risks.
- Create a Training Needs Analysis to identify training requirements by role.
- Display support information visibly in communal areas and on the website, including contacts for the Religious Safeguarding Lead and relevant support agencies.
- The Sisters of Notre Dame should formally establish the Safeguarding Support Committee through the development of appropriate. governance documents. These should include clear terms of reference,

defined roles and responsibilities, reporting mechanisms to the Trustees, and lines of accountability.

- Update the Safeguarding Policy to include clear escalation procedures for low-level concerns, ensuring they are consistently addressed beyond initial management and ensuring alignment between the "Roles and Responsibilities" and "Procedures" sections. Once updated, ensure the revised policy is effectively disseminated to all managers, staff, and Sisters, with clear communication and guidance to support consistent understanding and implementation.

Within 6 months

- The Sisters should share important information such as contact information for the safeguarding lead and policies (such as the safeguarding, complaints and whistleblowing policies) on the website for the Sisters of Notre Dame de Namur.
- Establish a process to regularly gather feedback from members and staff on safeguarding training and use this to inform the training needs analysis.
- Develop and implement a comprehensive data protection policy.
- Develop a communication plan for safeguarding messages, both internally and externally.
- To create a complaints policy and reflect CSSA's role as the final safeguarding complaints stage and ensure public accessibility.
- Set up a centralised DBS register covering all staff, Sisters, carers, and volunteers.
- Initiate the development of a centralised training matrix for all staff and Sisters. Consolidate training records from all facilities into a single accessible tracking system to allow effective oversight by trustees.
- Ensure job descriptions reflect evolving staff roles and care needs.
- Clear guidelines should be established to specify the review process for care plans.
- Implement mechanisms to measure and review the effectiveness of safeguarding communications and continuously improve them.

Within 12 months

- Consult with survivors (directly or via Religious Life Groups) to inform future safeguarding practices. Additionally, liaise with other Religious Life Groups which have experience of managing allegations and concerns, supporting Survivors and supporting Respondents to see if there are any transferable lessons that can be learned.
- Review and align all safeguarding policies with input from the Safeguarding Lead, Health and Wellbeing Advisor and Care Managers. Update safeguarding policy and/ or implement guidance to:
    - Include commitment to survivor and respondent and the type of support available, including emotional, legal and practical assistance.
    - Finalise full alignment of recruitment policies across sites, including overseas safeguarding checks.
    - Review and update safeguarding policies to include guidance on avoiding interference with statutory investigations.
    - Update the Safeguarding Policy to include the latest version of Pope Francis' Apostolic Letter, "Vos Estis Lux Mundi" 2023, replacing the 2019 edition.
- Produce an annual safeguarding report summarising key activity, including training compliance, incidents, risk assessments, and lessons learned.
- Establish a formal feedback mechanism for continuous policy improvement**.** Consider allowing feedback on policies or general experiences with the through the website.

7. Arrangements for Follow-up

7.1 In accordance with the CSSA pathway for RLG with an overall grading of Early Progress (or lower), the Sisters of Notre Dame will be requested to produce an action plan to implement the recommendations of this report. The RLSS will be advised of the outcome and requested to support the Community accordingly. The CSSA will request an update from the Sisters of Notre Dame in six months and will undertake a re-audit in one to two years subject to progress made. If the CSSA becomes aware of a significant Safeguarding concern or allegation in the intervening period, then an earlier audit may be required.

8. Appendix

Evidence List

SND Safeguarding Policy

Training Log

GP33 Bullying and Harassment

GP34 Protection of Vulnerable Adults

GP35 Seeking Employment References

GP36 Rehabilitation of Offenders

GP37 Disclosure and Barring Service

GP38 Confidentiality

GP39 Record keeping & Access to Records

Initial Conversation 16.01.25

Role and responsibilities of safeguarding lead

Role and responsibilities of Trustee