Catholic Safeguarding Standards Agency

Our Lady of Charity of the Good Shepherd

Baseline Audit Report
March 2026

Catholic Safeguarding Standards Agency

Contents

1. Introduction

1.1 This is the baseline audit of the safeguarding arrangements for Our Lady of Charity of the Good Shepherd. The Congregation of Our Lady of Charity of the Good Shepherd is an international religious congregation, often known as the Good Shepherd Sisters. The vision and mission of the Congregation are based on the Gospel message of Jesus, the Good Shepherd, and the foundations of social justice. Expanding on the vision of St. John Eudes from 1641, the Congregation of Our Lady of Charity of the Good Shepherd was founded in France in 1835 by St. Mary Euphrasia Pelletier to assist women and children most in need. "Our work and way of life are guided by our values of Zeal, Dignity and Respect, Compassion and Mercy, Reconciliation, Justice and Solidarity, Transparency and Accountability, Empowerment and Advocacy, Participation and Collaboration, and Good Stewardship".[1]

1.2 The Congregation in the UK are a province and are led by a Provincial Lead supported by three other sisters who act as Trustees. The province has sisters living in several parts of the UK, with a community resident in Southampton where one of the sisters acts as a co-ordinator providing a reference person and pastoral sister for the other sisters should they need something that has to come to head office for authorisation. Some sisters are resident in flats in Manchester and in a Care Quality Commission (CQC)[2] registered care home within the grounds of the convent there. Other sisters live independently in flats in Birmingham, London and Glasgow. The sisters in Southampton are mostly retired with one or two providing online support to vulnerable women they have worked with for an extended period. This audit reviews the safeguarding arrangements for the province in England with a focus on Southampton due to this being identified as being the area with the greater safeguarding risk.

1.3 The CSSA assess Religious Life Groups (RLG) against a categorisation scheme based on the safeguarding risk that is likely to be associated with their activities

[1] Our Lady of Charity of the Good Shepherd

[2] Care Quality Commission

and size, from Level 1, a small community with minimal outreach and no known safeguarding concerns with a further distinction made between Apostolic and Enclosed Orders, Level 2, a medium sized community with some outreach with vulnerable populations and/or providing some Diocesan activities such as a Parish Priest and Level 3 a large community and/or one with significant outreach with vulnerable populations and/or a disproportionately high number of open safeguarding cases. Our Lady of Charity of the Good Shepherd was audited as a Level 1 Apostolic RLG.

1.4 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 Safeguarding Standards in such a way that reflects their uniqueness.

2. Methodology

2.1 The CSSA initially notified Our Lady of Charity of the Good Shepherd of their intention to audit on 23 October 2024. There was a failure by CSSA to supply the correct information to the designated safeguarding lead at this time, and this was rectified on 18 December 2024 with the provision of a self-assessment document with an agreed completion date of 10 February 2025. An initial pre-audit meeting was held between the CSSA analyst and the safeguarding lead on 23 October 2024 to discuss the audit requirements. Between 18 December 2024 and 3 April 2025 multiple attempts at contacting the safeguarding lead and the Provincial Lead had failed to secure any reply, the return of the self-assessment document or a confirmed date to audit. The audit was handed over to a new quality assurance analyst on 24 April 2025. Contact was attempted again on 28 April 2025. The self-assessment documentation was received on 7 May 2025, and an audit date was set for 16 June 2025.

2.2 In advance of the audit week Our Lady of Charity of the Good Shepherd submitted a Level 1 self-assessment tool providing information on their compliance

with the eight National Safeguarding Standards[3] and their progress in the implementation of them.

2.3 Information provided within the self-assessment was analysed by the CSSA, alongside additional documentary evidence provided by the community together with that provided on the Congregation's website. Further confirmation of engagement was sought from the Religious Life Safeguarding Service (RLSS)[4]. This evidence was assessed against a bespoke Level 1 Maturity Matrix[5] to arrive at ratings for each standard and a combined overall grade.

2.4 The following methodology was used to complete the audit:

2.4.1 Interviews were held with the following:

- The Provincial Lead
- The Trustees
- The Provincial safeguarding lead (also a Trustee)
- The Co-ordinator of the Southampton community
- A focus group of the community of sisters in Southampton

2.4.2 A document review was carried out on the following:

- The Level 1 CSSA self-assessment form
- The policy folder for staff at Southampton

No other documentary evidence was provided for scrutiny at the time of the audit. Post audit the Provincial Lead and Provincial safeguarding lead provided the following:

- A previous Provincial Safeguarding Policy (dated 2020)

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[3] Full details of the eight standards and underpinning sub standards are available here: The Eight National Safeguarding Standards

[4] The Religious Life Safeguarding Service (RLSS) is an independent team of safeguarding professionals offering safeguarding services to the Religious of the Catholic Church in England and Wales.

[5] APPENDIX-5-LEVEL-1-APOSTOLIC-MATURITY-MATRIX-FINAL.docx

- Minutes from Trustee meetings
- Correspondence between the Provincial Lead and the sisters living in Southampton regarding the purchase and move to the new property.

2.4.3 No new allegations or concerns have been reported to, or about Our Lady of Charity of the Good Shepherd in England within the previous 12 months therefore it was not possible to examine casework during this audit or assess some aspects of direct safeguarding practices.

3. Audit grading

3.1 Practice was assessed against the eight National Safeguarding Standards adopted by the Catholic Church in England and Wales and graded in accordance with the CSSA Maturity Matrix for Level 1 Apostolic Religious Life Groups.

3.2 Potential audit ratings against each standard, and the final overall ratings, are: Not Met, Met with Recommendations and Met.

Overall grading	Not Met
Standard 1 – Safeguarding is embedded in the Church body's leadership, governance, ministry and culture	Not Met
Standard 2 – Communicating the Church's safeguarding message	Not Met
Standard 3 – Engaging with and caring for those who report having been harmed	Not Met
Standard 4 – Effective management of allegations and concerns	Not Met

Standard 5 - Management and support of subjects of allegations and concerns (respondents)	Not Met
Standard 6 - Robust human resource management	Met with Recommendations
Standard 7 - Training and support for safeguarding	Not Met
Standard 8 - Quality assurance and continuous improvement	Not Met

4. Audit findings against each standard

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

4.1.1 Our Lady of Charity of the Good Shepherd has a Congregational safeguarding policy and safeguarding team based at the generalate in Rome. The congregational safeguarding policy[6] clearly requires that each province has a local safeguarding policy that reflects the requirements of the country in which the province is based. There is no current local safeguarding policy in place in the UK. The last policy was created in 2020 however there is no evidence to show that this has been updated or reviewed since its inception, resulting in it being out of date and not in alignment with the eight National Safeguarding Standards.

4.1.2 The UK province has a designated safeguarding lead who is experienced and who has undertaken safeguarding training. The community in Southampton do not have a named safeguarding lead or representative in place.

[6] https://www.olcgs.org/safeguarding

4.1.3 There are four Trustees of Our Lady of Charity of the Good Shepherd all of whom are religious sisters and include the Provincial Lead and designated safeguarding lead. Safeguarding is not a standing agenda item for the quarterly Trustees meetings and the minutes provided included limited references safeguarding discussions. The Provincial Council meets at least every three months on a more informal basis and it was reported that safeguarding was only discussed at these meetings if needed. Minutes are not always kept for these meetings so there was no evidence of any safeguarding discussions available for scrutiny for the purpose of this audit. No annual safeguarding reports are created (although minimal information in respect of safeguarding is included within the Annual Report and Financial Statements submitted to the Charity Commission) and there is no documentation that shows oversight of matters such as the safety of the sisters, safer recruitment, or safeguarding training. At time of audit there was no evidence to show that the Trustees were meeting the Charity Commission expectations to identify safeguarding risks[7] and have robust policies in place to manage them.[8] In summary there is no formal governance structure in place for the oversight or management of safeguarding in the UK province of Our Lady of Charity of the Good Shepherd.

4.1.4 The environment at the community house in Southampton was not deemed to be safe at time of audit. There are eight sisters currently living in the house with an age range of 65 through to 96 years of age with a varying degree of vulnerability due to health and mobility issues. The sisters are led by a co-ordinator who acts as a point of contact between the house and the Provincial Lead and Trustees. The house is a Victorian villa with narrow corridors and steep stairs. All individual rooms have fire doors that were reported as too heavy for some of the sisters to open independently. This resulted in doors having to be always propped open except at night. This has a direct impact on privacy during the day and safety at night. The stairs are steep, and the floors are uneven with multiple trip hazards. The house has

[7] An undated document entitled "Southampton Risk Assessment" was provided after the audit visit. The status of this document Is unclear as It Is not referenced In any minutes or practically used within the Southampton setting.

[8] Safeguarding for charities and trustees - GOV.UK

been under a constant schedule of structural works, repair and alteration since the sisters moved in ten months ago. The constant noise, dust, and disruption, coupled with the presence of builders in the house, was reported by the sisters as having taken its toll on their emotional and physical wellbeing. The sisters told the CSSA analyst that they have reported multiple issues to the Provincial Lead and Trustees, although this is disputed. Irrespective of this point, at the time of the audit visit many safety issues remained. Due to the extent of the safety issues, both physical and psychological, a referral was made following the audit to the local authority adult safeguarding board and to the local fire and rescue service.

4.1.5 Our Lady of Charity of the Good Shepherd employs staff to provide care services to the sisters in Southampton and a cook to provide meals for them. Housekeeping duties are currently being performed by one of the carers and the co-ordinator as required. There is a high level of sickness amongst the staff and gaps in care are currently being filled by the co-ordinator who also covers the cook's one day off per week. There is no house manager at present so the responsibility for managing the staff has fallen to the co-ordinator, however there are no local policies or guidelines for her to follow. The Provincial Lead and Trustees have recognised the difficulties with staff management in Southampton and are looking for possible solutions to this, including transferring care provision to an external CQC registered provider.

4.1.6 Our Lady of Charity of the Good Shepherd has a contract with RLSS. Information from RLSS showed that there has been no contact or engagement between the two parties up until the time of audit. The province does not have any contact with other external safeguarding organisations or private companies for support. The Provincial Lead and Trustees were not aware of Integrity in Ministry[9] at interview, so this is not currently used to inform practice.

Graded: Not Met

[9] Integrity in Ministry - Religious Life Safeguarding Service

4.2 Standard 2 Communicating the Church's safeguarding message

4.2.1 Safeguarding is not recorded as being routinely discussed in the Trustees or Council meetings. No safeguarding messages on practice, policies and procedures are shared with the community in Southampton. There was no evidence of the contact details for the designated safeguarding lead in the building. The Congregation has an international website which has dedicated safeguarding pages. These contain the congregational policy but no contact details for safeguarding leads in any of the regions or provinces. There is no website for the Province in the UK, although it is accepted that this would have limited broader utility.

4.2.2 The Provincial Lead and Trustees have not made any contact with external safeguarding agencies to support them with meeting their responsibilities in safeguarding. The co-ordinator was unaware of the existence of RLSS or their purpose. The Provincial Lead and Trustees all confirmed that they had not had any contact with RLSS prior to this audit as they felt there had been no need to do so.

4.2.3 There is no safeguarding communication plan in place. There was no evidence in the house in Southampton of any safeguarding literature or information on safeguarding such as the contact details for the Provincial safeguarding lead. There was no information on safeguarding in the office and no contact details for statutory agencies, RLSS or other safeguarding organisations.

Graded: Not Met

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

4.3.1 There are currently no formal policies, procedures or guidance in place that demonstrate how the community, the Provincial Lead or the designated safeguarding lead would engage with and care for those who report being harmed

from either outside the community or within it. There is no practice evidence of having done so.

4.3.2 Sisters in Southampton reported having made disclosures of feeling unsafe both physically and emotionally to the Provincial Lead and the Trustees. The sisters spoken to reported that their concerns had been met with a lack of empathy, understanding and in some cases with the 'threat' as they saw it of removing them from the house to put them in a care home. This was disputed by the Provincial Lead and Trustees who reported having had no concerns raised with them. There were no records of any internal complaints having been raised, although no formal procedures are in place for their management in any event. The sisters spoken to in the focus group reported that they were now too anxious to raise any issues with the Provincial Lead and Trustees.

4.3.3 The Provincial Lead and Trustees reported that they believed they had listened to the broader issues in respect of accommodation and that a significant amount of work had gone into resolving them. There is clearly a disconnect between the leadership team and the sisters on this issue. Regular visits to the house by Provincial Lead and Trustees have not been in place with the Provincial Lead reporting only visiting when there are crises. Communication between the two has therefore been via email in the main which may have contributed to the lack of awareness of the actual impact of issues on the sisters.

Graded: Not Met

4.4 Standard 4 Effective management of allegations and concerns

4.4.1 There is no current safeguarding policy in place for the sisters to consult in the event of a safeguarding issue being witnessed or disclosed. No sisters have had any form of safeguarding training in the past five years. The sisters demonstrated some awareness of the types of abuse that they might encounter but admitted they were

out of date on safeguarding practice and would not be confident in any actions they might need to take.

4.4.2 None of the sisters spoken to were aware of what actions they would need to take or any reporting processes they would need to follow. None had heard of RLSS and were unaware of their role in the reporting and management of safeguarding concerns. Most concerns reportedly raised about their own safety have been done so through the co-ordinator to the Provincial Lead and the Trustees.

4.4.3 At interview the Provincial Lead and Trustees demonstrated no awareness of the need to have reporting procedures and processes in place. The designated safeguarding lead was aware of reporting processes and procedures for contacting statutory agencies and RLSS. Lay staff reported that any concerns they may have would be reported to the co-ordinator. They were not aware of any reporting processes or other actions they may need to take.

Graded: Not Met

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

4.5.1 There have been two complaints raised against members of the community in Southampton from the previous house manager. There was no evidence to show that these were managed in line with Congregational policy and there are no local policies in place for the management of complaints made against the sisters.

4.5.2 At time of audit a further complaint had been made against a community member by a member of staff. Again, there was no evidence of any objective investigation into the complaint made and the individual has been sent an email telling her she is to be removed from the house at the earliest opportunity.

4.5.3 The Provincial Lead and Trustees demonstrated no apparent awareness at interview of the need to provide a respondent with emotional, physical, mental or spiritual support at a time when an allegation has been raised against them.

Graded: Not Met

4.6 Standard 6 Robust human resource management

4.6.1 There is no evidence of any oversight by the Provincial Lead and Trustees of safer recruitment or ongoing DBS checks for lay staff at the house in Southampton during the audit period. The sisters previously lived in a nearby convent that had a manager who was responsible for recruiting the staff. There was no register for the Disclosure and Barring Service (DBS)[10] status of the lay staff currently working in Southampton available there at time of audit, although RLSS confirmed that they had undertaken checks for staff members.

4.6.2 There is a staff policy handbook in the house in Southampton that contains the staff policies for the CQC registered care home the province has in Manchester. These have not been adapted for use in Southampton and are not therefore fit for purpose in their current state. The staff handbook contains complaints and whistleblowing policies but neither policy is available to the sisters, although it is accepted that similar provisions are made within the constitutions.

4.6.3 There is currently no intention or opportunity for sisters to enter formation in the UK, so no policies and procedures are required in this respect.

Graded: Met with Recommendations

4.7 Standard 7 Training and support for safeguarding

4.7.1 There is no register recording the details of any safeguarding training having taken place for the sisters. No training raising the sisters' awareness of safeguarding issues has been provided by any external organisation such as RLSS or by the current designated safeguarding lead. When spoken to the sisters were not aware

[10] Disclosure and Barring Service - GOV.UK

of any training opportunities available to them. At a minimum it would be expected that all sisters with any form of active ministry, or who might provide care for other sisters receive safeguarding training.

4.7.2 There was a training register for the staff in place however this had only been completed by two out of the ten members of staff at time of audit. The list of required training did not include safeguarding training so there was no evidence that any member of staff had undertaken this.

Graded: Not Met

4.8 Standard 8 Quality assurance and continuous improvement

4.8.1 At audit, no plans to develop and improve safeguarding were in place. Following discussions with the Provincial Lead and Trustees there is now an awareness of the need to work with external organisations including RLSS to improve their current situation and there was agreement from them that this needed to be achieved as a priority. There has not been any active engagement with safeguarding at all at provincial leadership level as evidenced by the lack of a current safeguarding policy, the lack of a safeguarding implementation plan, the lack of safeguarding training for both lay staff and sisters, the lack of robust scrutiny of the requirements of safer recruitment and the lack of awareness that safeguarding includes protecting members of their own community from harm.

4.8.2 To date there has been no engagement with RLSS and only sporadic engagement with CSSA. Engagement with external experts would have helped the Provincial Lead and Trustees to understand their responsibilities and the need to provide a robust framework for safeguarding underpinned by policy, procedures and scrutiny to ensure compliance with those actions that are needed to keep everyone safe. A significant piece of work will now be required to address the issues raised in this audit and to build back trust between the Provincial Lead and Trustees and the sisters for whom they are responsible.

Graded: Not Met

5. Summary of overall findings

5.1. The safeguarding audit for Our Lady of Charity of the Good Shepherd has found significant failings. There is no current safeguarding policy and no safeguarding plan for the province in the UK. As a result, there are no processes in place to monitor safeguarding activity such as training, safer recruitment, the receiving and management of allegations, the communication of safeguarding messages, engagement with survivors and no robust safeguarding governance arrangements are in place. The Provincial Lead and Trustees are currently not able to provide assurance to the CSSA that they have the necessary knowledge, skills or expertise to recognise and address the issues raised without significant support from their Congregation safeguarding team and the RLSS.

6. Recommendations

To support improvement, the following recommendations are made:

Immediate actions

- The Provincial Lead and Trustees are required to contact the Congregational Lead and Safeguarding Team to evaluate their current approach to managing safeguarding concerns and to understand what changes need to be made to enable the Province in the UK to meet the minimum standard for safeguarding as set out in the eight National Safeguarding Standards.
- Urgent consideration needs to be made about the safety and wellbeing of the sisters in the Southampton residence. Referrals were made at time of audit to the statutory authorities having found evidence of personal safety issues and safeguarding concerns around emotional and psychological abuse. The Congregational leaders must ensure that all sisters are treated with dignity and respect and are able to raise concerns freely.

- The Provincial Lead and Trustees are required to contact RLSS to share the findings and recommendations of this report to support the development of a management action plan that will ensure that safeguarding practice aligns with the minimum standard set out in the eight National Safeguarding Standards. This must include the following:
    1. A local safeguarding policy for the Province in the UK
    2. A safeguarding plan showing how safeguarding practice is to be embedded across the whole Province in the UK
    3. A suite of policies to ensure a good standard of practice in safer recruitment, training, the management of allegations, complaints, whistleblowing, engagement with survivors and recognising and reporting safeguarding concerns. All policies are required to have clear processes to be followed and a method of evaluating their effectiveness. These policies are to be brought into effect supported by training and guidance for those unfamiliar with this field.
    4. A communication plan to ensure that safeguarding messages are shared with the whole Province in the UK and that survivors are made aware of how to raise a concern and of external organisations that may help them to do so such as RLSS and Safe Spaces.
- A system for the robust oversight of safer recruitment including DBS checks needs to be established.
- A system for the robust oversight of training for sisters in safeguarding needs to be established.
- A review of the staffing arrangements at Southampton needs to be conducted to ensure that all staff working with the sisters have been recruited using safer recruitment policies and processes and hold current DBS checks. In addition, the Provincial Lead needs to ensure that there is adequate staffing provision to meet the needs of the sisters and that a robust process is in place to cover periods of sickness and annual leave.

Within 3 months

- All Trustees are to access Trustee training from RLSS to enable them to understand their responsibilities regarding safeguarding. Following this safeguarding must become a standing agenda item for all Trustee and Council meetings which must have minutes to show an audit trail of discussion, consideration and justifiable decision making on safeguarding issues.
- A management action plan should be submitted to CSSA which has clear time bound actions to address all the concerns raised at this audit. This should include a timetable for reviewing each of the actions and arrangements for oversight by the Congregational safeguarding team.

Within 6 months

- A CSSA Level 1 Apostolic self-assessment should be carried out and submitted to the CSSA detailing progress on the implementation of the eight National Safeguarding Standards.

7. Arrangements for follow-up

7.1 In accordance with the overall rating of Not Met, re-audit by the CSSA will take place within a one-year period following the publication of this report. During the intervening period the CSSA will request quarterly updates as to progress made in the implementation of the recommendations above. The CSSA reserves the right to undertake a safeguarding review or earlier re-audit in the event of issues identified herein not being addressed.

8. Addendum December 2025

8.1 Subsequent to the completion of this audit report, the referrals referenced in paragraph 4.1.4 were accepted by the local authority adult social care department and fire and rescue service. A series of multi-agency meetings concluded with the acceptance of a plan of action from the Congregational Director of Safeguarding. The provision of staffing for the premises in Southampton has since transferred to Standards Care Ltd, a CQC registered provider. They are now responsible for policies, safer recruitment and safeguarding training for employed staff. The Sisters in Southampton did not take advantage of an offer of RLSS safeguarding training.