

# Congregation of Jesus

Baseline Audit Report  
December 2025

## Contents

|  |    |
|--|----|
| Contents .....                               | 2  |
| 1. Introduction.....                         | 3  |
| 2. Scope & methodology.....                  | 6  |
| 3. Audit grading.....                        | 7  |
| 4. Audit findings against each standard..... | 9  |
| 5. Summary of overall findings.....          | 38 |
| 6. Recommendations.....                      | 39 |
| 7. Arrangements for follow-up.....           | 43 |
| 8. Appendix.....                             | 43 |

## 1. Introduction

**1.1** This is a baseline audit of the safeguarding arrangements of the Congregation of Jesus. This audit has been undertaken as part of the CSSA's Baseline Audit phase of Religious Life Groups (RLGs).

**1.2** The Congregation of Jesus is an international Roman Catholic religious congregation, with Sisters present across 13 provinces and regions globally. Since its foundation in 1609 by the Venerable Mary Ward, it has been engaged in both religious and charitable activities, notably in the field of education. The English Province is governed by the Provincial Superior and her Council, who are appointed by the General Superior following a consultation process involving each Sister in the province. The Provincial Superior also chairs the Board of Corporate Trustees, who are appointed by her. The current Provincial Superior assumed her role, and the position of Chair, on 1 January 2021. The Board of Trustees comprises the Provincial Superior, six other Sisters, one Institute of the Blessed Virgin Mary (IBVM)<sup>1</sup> Sister, and two lay members. The Trustees affirm their overall accountability for the Charity's policies, operations, and assets. Day to day management is delegated to the Provincial Leadership Team (the Provincial Superior and her Council), who act as the Trustees' Management Committee and meet regularly to make operational decisions and provide direction to local communities throughout the year. The Congregation of Jesus declares its mission as "to help others become the people God made them to be, with a special focus on empowering women and young people, while encouraging and accompanying all individuals in their search for God. We are committed to promoting the justice and peace of God's Kingdom in everything we do, always striving for the greater glory of God by seeking the magis— asking what more we can do to serve God and others. Whether through our work in schools, universities, prisons, hospitals, spirituality centres, or chaplaincies, and through spiritual direction, social justice initiatives, or hospitality, we aim to live with passion, act with integrity, and pray with desire."

**1.3** Within the English Province, the Sisters oversee several key ministries including: St Bede's Pastoral Centre in York, St Joseph's Community House in York, a community

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<sup>1</sup> <https://www.ibvm.org/>

house in Cambridge, and the Bar Convent, also in York. St Bede's serves as a centre for spiritual formation, offering retreats, educational programmes, and pastoral support to individuals from all backgrounds. The Bar Convent, the oldest functioning convent in England, operates as a heritage site, museum, and living religious community, welcoming visitors for reflection, learning, and hospitality. These ministries reflect the Congregation's ongoing commitment to service, justice, and spiritual accompaniment.

**1.4** The English Province is home to 19 Sisters, 9 of whom are involved in active ministry, living in four main community houses across England. St Joseph's in York houses seven retired Sisters and functions as a care facility, providing 24-hour nursing and personal care. The Bar Convent is home to four Sisters who are actively involved in various ministries, such as leadership, administration, education, and pastoral care. In Cambridge, six Sisters reside, including several younger members who engage in external ministries such as chaplaincy and academia, while others support internal community life. The Provincial Leader, though based in London, divides her time between Cambridge and the Bar Convent to fulfil leadership responsibilities and represent the Congregation nationally. One Sister lives independently in sheltered housing in Norwich and is retired.

**1.5** Members of the Congregation of Jesus contribute their services voluntarily to the charitable activities carried out by the Congregation of Jesus Charitable Trust. Currently, twelve active Sisters are engaged in these ministries, many of whom take on multiple roles. Areas of involvement include religious and pastoral ministries, education, social outreach, and support for other charitable organisations. Internal responsibilities encompass the governance and administration of the Congregation, the formation and mentoring of newer members, and the care of elderly Sisters. The Bar Convent Chapel, dating back to 1769, is open to the public for services and private prayer. Several Sisters also serve at diocesan or parish levels and offer spiritual direction, retreat guidance, and sacramental preparation. Sisters are actively involved in social and pastoral outreach, including visiting the sick, the housebound, and those experiencing social isolation. Some Sisters support advocacy and outreach projects for the homeless, asylum seekers, and refugees, and take part in community initiatives aimed at caring for vulnerable groups. Many Sisters continue to serve as school governors or hold leadership roles within

Catholic charitable organisations, including those dedicated to education and university outreach. They also deliver talks, courses, and training on spirituality, theology, and justice and peace issues. In York, one Sister serves as the lead trainer in spirituality at St Bede's Pastoral Centre. The community also actively supports the educational and heritage programmes of the Bar Convent throughout the year. The IBVM Sister who holds a role of Trustee for the Congregation, currently serves as the Lead Religious for Safeguarding for the Catholic Church in England and Wales. In this role, she collaborates with the Lead Bishop to represent religious life at a national level. She also holds a position as a non-executive director of the Catholic Safeguarding Standards Agency (CSSA) and participates in safeguarding meetings of the Bishops' Conference to support religious life groups' adherence to the national safeguarding standards. As a non-executive director of the CSSA she has had no operational involvement in or oversight of the production of this report.

**1.6** The Congregation of Jesus has a total of 87 staff members, which includes both paid employees and volunteers working across Bar Convent Enterprises, St Joseph's, and St Bede's. This workforce includes registered nurses, care staff, domestic workers, maintenance personnel, and administrative staff. The Sisters' care needs range widely, from full independence to complex care requirements involving medication and personal assistance. St Joseph's is not required to be registered with the Care Quality Commission (CQC), and therefore its services are outside the scope of regulated care provision.

**1.7** This audit seeks to assess the effectiveness of current safeguarding arrangements, by considering practice over the last twelve months. The Catholic Safeguarding Standards Agency (CSSA)<sup>2</sup> 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,

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<sup>2</sup> [Catholic Safeguarding Standards Agency](#)

ministry, and safeguarding practice. Consequently, CSSA analysts may use professional judgement to ensure that Religious Life Groups are graded against the national standards in such a way that reflects their uniqueness. The Congregation of Jesus have been assigned to a Level 2 audit.

## 2. Scope & methodology

**2.1** The CSSA analyst initially contacted the Provincial Leader on the 15 January 2025 to confirm a baseline audit for the week commencing the 2 June 2025.

**2.2** In advance of the formal audit week, the Congregation of Jesus were requested to complete a Level 2 audit self-assessment tool providing information on their adherence to the eight National Safeguarding Standards and progress in the overall implementation of said standards. The Congregation of Jesus were provided with the self-assessment tool and guidance on the 15 January 2025. The completion date for the self-assessment and supporting evidence was scheduled for the 5 May 2025.

**2.3** On 20 January, the CSSA analyst held a virtual meeting with the CEO, Safeguarding Lead and Provincial to discuss the audit arrangements in further detail.

**2.4** This baseline audit was undertaken following the submission of the self-assessment on 23 April 2025 and further evidence was reviewed by the analyst during a site visit on 4 June 2025.

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

**2.6** The following methods were employed:

### 2.6.1 Interviews

- Interviews were conducted with key individuals and groups:
  - Interviews held via Zoom on the 3 June 2025
    - Senior Management Team Interview with four of the five Senior Managers

- Interview with two members of the community house in Cambridge
- Interview held at Bar Convent on the 4 June 2025
  - Interview with the Safeguarding Lead
  - Interview with three Sisters residing within York
  - Interview with the Provincial Leader
  - Interview with the two Nurses and the Deputy Nurse Manager at St Joseph's
  - Interviews with three Carers from St Joseph's
- Interviews held via Zoom on the 6 June 2025
  - Interview with five members of staff from St Bede's
  - Interview with eight of the Trustees for the Congregation of Jesus
- Interviews held at Bar Convent and St Joseph's on the 9 June 2025
  - Interview continued with Safeguarding Lead
  - Interview with Trustee Secretary

## 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, Religious Life Safeguarding Service<sup>3</sup> (RLSS) and the Safeguarding Teams in the dioceses of Middlesborough and East Anglia regarding the Congregation of Jesus's engagement with their safeguarding expectations.

## 3. Audit grading

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<sup>3</sup> [Religious Life Safeguarding Service \(religioussafeguarding.org\)](http://religioussafeguarding.org)

**3.1** Practice was assessed against the eight National Safeguarding Standards adopted by the Catholic Church in England and Wales<sup>4</sup> and graded in accordance with the CSSA Maturity Matrix for Level 2 RLGs.

**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.

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

<sup>4</sup> Full details of the eight standards and underpinning sub standards are available here: [The Eight National Safeguarding Standards \(catholicsafeguarding.org.uk\)](https://catholicsafeguarding.org.uk)

## 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** There are currently nine Trustees for the Congregation of Jesus, with the Provincial Superior serving as Chair. Of these Trustees, six are members of the Congregation of Jesus, one is an IBVM Sister, and two are lay members. The Provincial confirmed that the Trustees meet twice a year, with safeguarding included as a standing agenda item. In addition to the Board of Trustees, the Congregation is also governed by a Provincial Council, which comprises the Provincial Superior and four other Sisters of the English Province. The Provincial Council meets monthly. The safeguarding Trustees confirmed that there is also a safeguarding subcommittee that includes two trustees with extensive safeguarding experience, the CEO and the Province Leader

**4.1.2** The website for the Congregation of Jesus<sup>5</sup> states that the Sisters “believe that everyone should be valued, supported and protected from harm and we recognise a special responsibility to protect the personal dignity and rights of children and adults at risk.” Their safeguarding policy, based on an RLSS template and last reviewed in February 2025, reiterates their commitment to protect all children, young people and adults who have involvement with the Congregation of Jesus from harm, and promote their well-being at all times. It also states that it is their commitment “to provide staff, volunteers and members, and persons at risk and their families with the overarching principles that guide our approach to safeguarding”. The policy also outlines the actions to be taken when safeguarding concerns arise. Recent evidence of the policy implementation seen by auditors, will be examined in more detail under Standard 4.

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<sup>5</sup> <https://www.congregationofjesus.org.uk/safeguarding/>

**4.1.3** The safeguarding policy of the Congregation of Jesus states that all members, employees, and volunteers are required to report any safeguarding concerns as soon as possible to the Safeguarding Lead or their designated deputy. Furthermore, anyone involved in the work of the Congregation has a duty to disclose to the Safeguarding Lead any safeguarding concerns that have been raised about themselves.

**4.1.4** The safeguarding policy sets out clear expectations for safeguarding training based on role, outlining the level of training required for different responsibilities across the organisation. It provides guidance on who should receive basic, advanced, or role-specific training, depending on their contact with the public or vulnerable individuals. The policy also specifies how often training should be refreshed annually, every two years, or every three years, ensuring safeguarding knowledge remains current and appropriate to each role.

**4.1.5** The Congregation of Jesus Safeguarding Policy outlines governance expectations, stating that the Trustee Board holds responsibility for maintaining appropriate governance and oversight of safeguarding, supported by a safeguarding sub-committee comprising the Provincial Superior and at least two other board members. The Provincial Superior is accountable for ensuring safeguarding policy, procedures, and best practices are in place, while the CEO oversees policy implementation, documentation, and safeguarding training records. The Safeguarding Lead is responsible for case management, secure recordkeeping, and liaison with external bodies, including the RLSS. All members, staff, and volunteers are expected to report concerns directly to the Safeguarding Lead or appropriate alternative. While the roles of the Safeguarding Lead and CEO were clearly understood and reflected in practice, it was noted that the safeguarding sub-committee does not meet regularly, has no agreed terms of reference, and the Safeguarding Lead confirmed that she has not been involved in any sub-committee meetings.

**4.1.6** The Code of Conduct for employees working with children and vulnerable adults outlines clear expectations to ensure their safety, promote respectful relationships, and prevent abuse or misconduct. It emphasises the importance of following the organisation's safeguarding policy, adhering to relevant laws, acting professionally, and maintaining appropriate boundaries. Staff must act as role

models, treat individuals fairly, respect their privacy, and challenge any unacceptable behaviour. It prohibits personal relationships, inappropriate communication, or contact outside of professional roles, including over social media. The code also stresses the need to avoid favouritism, offensive language, or doing things children or vulnerable adults can do for themselves. The code of conduct states that breaches of the code, especially involving harm or risk, can result in disciplinary action and referral to the Disclosure and Barring Service.

**4.1.7** The Trustees confirmed that the document integrity in Ministry<sup>6</sup> was last discussed with members in February 2025. The self-assessment completed by the Congregation of Jesus stated that every province member who has any active ministry has been provided with a copy of Integrity in Ministry, either electronic or printed.

**4.1.8** The Safeguarding Lead for the Congregation of Jesus is also the Nurse Manager at St Joseph's, a role she has held for the past nine years. She has a professional background in mental health nursing and previously worked as a Community Mental Health Team Manager for working-age adults. Her experience includes attending multi-agency social care meetings, including child protection conferences involving parents and families. She was formally appointed to the Safeguarding Lead role at the end of 2022 into early 2023 and has held the dual role for approximately two and a half years. The safeguarding responsibilities are part of her job description and include the secure management of all safeguarding concerns and case files. Her leadership skills, combined with her knowledge of safeguarding practices in care settings, enable her to assess risks, train staff, and create a culture of safety and accountability within the Congregation of Jesus.

**4.1.9** Within all interviews, the Trustees, CEO and Safeguarding Lead demonstrated an understanding of the need to address low level concerns and share information with the RLSS, when necessary. The Trustees and Safeguarding Lead also recognised

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<sup>6</sup> The "Integrity in Ministry" document was developed following the recommendations of the Cumberlege Commission's report, "Safeguarding with Confidence." It aims to provide guidance for clergy and religious on the principles and standards they should uphold in their ministry. The document emphasises the importance of ethical conduct, accountability, and safeguarding vulnerable individuals within the church community.

that on occasion statutory agency referrals may be made. The Congregation of Jesus have entered into formal agreements with the RLSS and CSSA.

### Areas for Development

**4.1.10** The current safeguarding policy for the Congregation of Jesus was last updated in February 2025 and is not scheduled for review until 2027. This two-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 continue to be reviewed annually.

**4.1.11** The Congregation of Jesus refer to the eight national safeguarding standards in every board report. However, they 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 also 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 Bar Convent Enterprises manager confirmed that health and safety risk assessments are completed; however, there was no evidence that safeguarding considerations are incorporated within these assessments, representing a significant gap given the public-facing nature of the operation. Similarly, the general risk assessment for St Bede's Pastoral Centre addresses general health and safety but lacks any reference to safeguarding risks, Safeguarding Lead roles, or reporting procedures, which is a significant oversight considering the presence of vulnerable individuals and external visitors. At St Joseph's, while individual residents have personal risk assessments and care plans that include safeguarding issues, there is no overall risk assessment for the home itself. This absence limits the identification and management of broader safeguarding risks at an organisational level. Together, these findings highlight the need for a more comprehensive and integrated safeguarding risk management framework across all sites.

**4.1.13** During interviews, the Trustees acknowledged that, from an outside perspective, the current governance arrangements could be difficult to

understand. They recognised the need for clearer structures and processes to support transparency and accountability. While they expressed confidence that they would be informed of any serious allegations or safeguarding concerns involving members, they also acknowledged that systems for managing and responding to low-level concerns require improvement.

**4.1.14** Despite clear policy commitments, there is a significant gap between documented safeguarding roles and actual practice. While safeguarding is noted in trustee agendas and minutes, there is no evidence that the safeguarding sub-committee has been formally established, there are no terms of reference, scheduled meetings, or recorded minutes or actions. The Safeguarding Lead reported she had not participated in any meetings. The Safeguarding Policy and Procedure outlines the roles and responsibilities of the Trustees, Provincial Superior, CEO, and Safeguarding Lead but does not fully describe how these roles and governance groups interact in practice. Although the policy mentions the existence of a safeguarding sub-committee and its membership, it does not define the sub-committee's role, functions, or responsibilities, nor how it interacts with the Trustees, Provincial Council, management group, or Safeguarding Lead. The policy also does not set out terms of reference, a regular meeting schedule, or reporting mechanisms for the sub-committee. To address this, the safeguarding sub-committee should be formally established, with approved terms of reference, a regular meeting schedule, and clear reporting lines to the Trustees. The Safeguarding Lead should be expected to report to the sub-committee and be actively involved in all relevant discussions. Maintaining minutes and action logs will support transparency, accountability, and effective monitoring. Strengthening the governance framework in this way would improve clarity, ensure consistent oversight of safeguarding activity, and provide greater assurance to Trustees and survivors that safeguarding is being monitored effectively at all levels.

**4.1.15** The code of conduct document for employees does not include a date of creation or a stated review period. This may impact the ability to ensure the guidance remains current and aligned with evolving safeguarding legislation and best practice. Regularly reviewing and dating such documents is recommended to maintain accountability and relevance.

**4.1.16** The Safeguarding Lead's responsibilities have been incorporated into her existing role as Nurse Manager; however, the safeguarding component is only briefly outlined in a sub-section. While the CEO clarified that certain safeguarding functions, such as policy oversight, risk management, and record keeping, are shared with and reflected in her own job description, and that the Nurse Manager job description includes a general reporting line to the CEO, this is not explicitly linked to the safeguarding element of the role. As a result, it remains unclear how safeguarding responsibilities are formally structured and reported within the organisation's governance framework. To ensure clarity, accountability, and appropriate recognition of the safeguarding work being undertaken, the job description for the Safeguarding Lead should more clearly define safeguarding duties, expectations, and reporting arrangements with the CEO and safeguarding sub-committee. This could be achieved either by expanding the safeguarding section of the Nurse Manager job description or by developing a short standalone Safeguarding Lead role description that sits alongside the existing job description. Either approach would provide clear accountability, consistency, and visibility of the safeguarding function within the organisation. During the interview, the Safeguarding Lead stated she works 24 hours per week across both roles, with no hours specifically allocated for safeguarding, although she considers it the priority. Following reflection on the audit process, she acknowledged the need for a more structured safeguarding role with protected hours. She indicated plans to conduct a personal audit of time spent on safeguarding and report this to the CEO, with whom she has regular monthly meetings.

#### Graded: Firm Progress

## 4.2 Standard 2 Communicating the Church's safeguarding message

#### Strengths

**4.2.1** The CSSA analyst noted that the contact information for the RLSS is displayed across the Bar Convent, St Joseph's and St Bede's. It was confirmed in interview with the Sisters that currently reside in Cambridge that the RLSS information is also displayed in their community house. The CSSA analyst observed that in St Joseph's, the staff office displayed clearly visible safeguarding information on notice boards, including an RLSS poster with contact details for the Safeguarding Lead, upcoming training opportunities, and several safeguarding documents outlining updates to national legislation and guidance.

**4.2.2** Bar Convent is open to the public; however, certain areas within the building, including the residential quarters for sisters, are secured with locked entry doors and are not accessible to visitors. The chapel within Bar Convent remains open to the public. In contrast, St Joseph's House is not accessible to the public, with entry restricted to a limited number of individuals by coded locked doors. The Nurse Manager stated that this is in place to ensure the safety of the sisters residing there. If managers from Bar Convent or St Bede's need to enter St Joseph's, they must be granted access by staff, as they do not hold the entry codes. Additionally, there is a chapel within St Joseph's which is only accessible internally through the building and is reserved exclusively for use by community members. St Bede's Pastoral Centre is open to the public during specific daytime and evening hours, although it is primarily used for retreats and personal reflection rather than as a general public venue. The chapel at St Bede's is open daily from 9 am to 5 pm for quiet prayer and reflection, provided it is not in use by other groups. During all interviews, members and staff confirmed that contact information for the RLSS and the Safeguarding Lead was clearly displayed in both publicly accessible areas and those restricted to members and staff. This was verified during site visits.

**4.2.3** The Congregation of Jesus communicates its commitment to safeguarding primarily through its Safeguarding Policy, which is available on the Congregation of Jesus, Bar Convent and St Bede's websites. While there is no formal written communication plan, the Safeguarding Lead and the Provincial confirmed in interviews that reception teams have received scripts to guide appropriate responses to safeguarding queries. The CEO noted that with approximately 10 members currently engaged in active ministry across two locations, internal communication remains direct and manageable. Nevertheless, the lack of a

structured communication plan limits assurance that safeguarding expectations are communicated consistently across the wider community and to the public. Interviews with Sisters residing in other dioceses confirmed that they receive information and documentation via email or meetings. Sisters in the Cambridge community who also serve as Trustees may learn relevant, non-confidential information during Trustee meetings, which they can then share with the Cambridge community as appropriate.

**4.2.4** Within the context of care for the Sisters residing at St Joseph's, Nurses and Carers have established monthly community meetings to provide a forum for the Sisters to share information, concerns, or ideas. These meetings are minuted, and any necessary actions are documented and followed up. The meetings also offer the Sisters an opportunity to discuss aspects of their care and suggest changes they wish to see implemented. The Nurse Manager confirmed that although the Sisters were initially hesitant about this approach, after the first meeting they requested it become a regular, formal event every four to six weeks, and reported finding it beneficial.

**4.2.5** The Sisters' self-assessment states that Catholic safeguarding updates, including relevant policies and procedures, are circulated to the Trustees for their information, with the expectation that Trustees will consider any resulting actions for the charity. Trustee meeting minutes provided as evidence reflect discussions on safeguarding training updates, CSSA processes, audit arrangements, and safeguarding policy reviews. Actions arising from these discussions are recorded in the minutes, along with the name of the person responsible. However, no timeframes for completion are noted, and there is limited evidence of how follow-up and accountability are maintained. This reduces assurance that safeguarding actions are consistently tracked through to completion.

### Areas for Development

**4.2.6** The Congregation of Jesus website features a clearly visible and easily accessible safeguarding section, prominently displayed on the front page, this section includes the Safeguarding Policy. In contrast, the Bar Convent website places its safeguarding policy link at the bottom of the Contact Us page,

accompanied by the statement: "If your complaint relates to a safeguarding concern, we refer you to our Safeguarding Policy." The St Bede's website hosts its safeguarding policy within the website footer, making it less visible and harder to locate. Although all three entities operate under the same safeguarding policy, there is no clear cross-referencing between their websites to reflect this shared approach. Improving the visibility of safeguarding information on the Bar Convent and St Bede's websites and explicitly noting that the safeguarding policy applies across all sites, would strengthen transparency, accessibility, and public confidence in safeguarding arrangements.

**4.2.7** The Congregation of Jesus 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.

**4.2.8** The Congregation of Jesus 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.

#### 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 Congregation of Jesus. However, during interviews, both members and staff were

able to describe safeguarding incidents or concerns that had been raised with them. While some of these were formally documented, others were not. This inconsistency in recording is further explored in section 4.4.1. Although outside the audit period, the Provincial Superior described to the auditor a previous safeguarding case in which she met personally with survivors, offered counselling support, and maintained contact for an extended period, with one survivor expressing appreciation for the support provided. This example demonstrates a compassionate and supportive response; however, it relates to an earlier timeframe and therefore falls outside the scope of this review.

**4.3.2** The Congregation of Jesus Safeguarding Policy states clear expectations for members, employees, and volunteers on responding to concerns involving children or adults at risk of significant harm, including risks from themselves, others, or due to mental capacity issues, whether within or outside the Congregation of Jesus context. The policy states that any such concerns must be reported to the Safeguarding Lead, who will consult the Religious Life Safeguarding Service (RLSS) for advice and next steps unless the concern is urgent, in which case emergency services should be contacted directly. The Safeguarding Lead is also responsible for informing the Provincial and CEO (unless they are implicated), recording all actions and communications, and contacting appropriate external agencies when required. Although the Safeguarding Lead works part-time, a 24/7 telephone number is available, and an alternative email address is provided for use when she is not working. Where concerns cannot be raised internally or have not been adequately addressed, direct contact details for the RLSS are available. The policy emphasises ensuring the safety of individuals, listening with empathy, and recording what has been communicated. Further in the policy, it also notes that individuals making a disclosure can initially remain anonymous; however, safeguarding information may need to be shared with statutory bodies, including the police or social care services, in accordance with the Church's mandatory reporting obligations. It also states that the "CJ member, employee or volunteer should be supportive of the individual making the disclosure but should not seek more details than necessary for an initial referral".

**4.3.3** Each facility within the Congregation of Jesus, including St Bede's and St Joseph's, holds a safeguarding information document containing contact details

for external agencies and support services, particularly for survivor signposting. This document was created in 2024 through collaboration between the Centre Manager at St Bede's and the Safeguarding Lead, who is responsible for maintaining and reviewing it every 18 months.

**4.3.4** During interviews, the Trustees, Safeguarding Lead and Provincial Leader 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 RLSS safeguarding lead training in May 2025 and safeguarding adults level 2 training in 2024. Additionally, the Provincial and Safeguarding Lead discussed past cases where counselling funding was provided to survivors and affirmed that the Sisters can offer financial support for survivor services if required in the future.

**4.3.5** The Trustees, Provincial, and Safeguarding Lead acknowledge the importance of sharing information with the RLSS and confirmed their commitment to working closely with the RLSS for support whenever safeguarding allegations involving members or employees arise. They also recognise the necessity of referring concerns to the appropriate safeguarding bodies.

**4.3.6** All interview participants stated that, in the event of receiving a disclosure, they would listen to the individual and offer support either pastorally or through appropriate referrals.

### Areas for Development

**4.3.7** 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 Congregation of Jesus 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.

**4.3.8** The Congregation of Jesus has trained Sisters and staff on how to respond to disclosures, and the safeguarding policy includes instructions for responding to a safeguarding concern, outlining actions such as ensuring those concerned are safe, listening with empathy, making brief notes of what has been communicated, and reporting the matter to the Safeguarding Lead (or to the RLSS Safeguarding Team if required), with emergency procedures for situations of immediate risk. While this meets statutory requirements, it may be beneficial to produce a short, easy to access quick guide or flowchart that provides clear, step by step instructions on responding to a disclosure or concern. This would serve as a quick reference so that staff and Sisters do not need to read through the full policy to find key information. The guide could include specific actions such as ensuring safety, listening without asking leading questions, making brief notes of what has been communicated (including, where relevant, dates, times, and people involved), completing disclosure forms, avoiding promises of confidentiality, and reporting through the correct channels. It could also reflect current policy requirements to remain supportive while not seeking more details than necessary for an initial referral, by providing clear guidance on what details should be recorded. Including key contact numbers would further support consistent and confident responses, especially for Sisters and staff not regularly involved in safeguarding matters.

**4.3.9** While the Congregation has had historical contact with survivors, including safeguarding complaints and interactions through ministry or roles within the Conference of Religious, these occurred outside the audit period and therefore cannot be considered as current evidence of learning from survivor engagement. The Provincial and other members have had contact with survivors in the past, providing support and counselling, and engaging with wider safeguarding discussions through Religious Life Groups. Going forward, the Congregation should consider formal mechanisms for learning from survivor experiences to inform safeguarding practice. Engagement with other Religious Life Groups or the RLSS could help develop future safeguarding approaches and provide opportunities for bespoke training focused on survivor interaction, enhancing the ability of Sisters, the Safeguarding Lead, and staff to offer informed and compassionate support.

**4.3.10** Support information for survivors should be displayed in communal and public areas, including details of the relevant support agencies. In addition, this

information should be made available on the Congregation'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.

**4.3.11** The Safeguarding Lead should continue to proactively engage with local statutory and voluntary organisations, such as local safeguarding partnerships or community-based support services. Attending 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** As discussed in 4.3.1, during the audit period, no allegations were made against any member of the Congregation of Jesus. However, during the site visit to Bar Convent, the CSSA analyst viewed a safeguarding file held by the Safeguarding Lead which contained two documented concerns raised within the last 12 months—one by the Centre Manager at St Bede's and another within St Joseph's. In addition to these recorded concerns, the analyst was made aware of two other significant safeguarding concerns raised during the same period, which had not been formally documented. These concerns are addressed further in 4.4.6, 4.4.7 and 4.4.8.

**4.4.2** During interviews Sisters and staff stated that they are aware of their responsibility to listen and support individuals who make disclosures with compassion and empathy. All interviewees also discussed the importance of ensuring those at immediate risk of harm are protected and provided with support to remain safe. Those Sisters in active ministry who were interviewed discussed the

importance of raising safeguarding disclosures and allegations to the Safeguarding Lead.

**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. If a concern meets the threshold, the CEO is responsible for submitting a Serious Incident report to the Charity Commission and informing the Provincial Superior. Trustees are kept informed through summary updates on any Serious Incidents reported to the Charity Commission, which are provided at six-monthly trustee meetings. These updates include brief details to ensure appropriate oversight while maintaining necessary confidentiality.

**4.4.4** 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.

**4.4.5** In accordance with the Congregation of Jesus Safeguarding Policy, primary responsibility for the secure, accurate management of all safeguarding documents and case files lies with the Safeguarding Lead and the RLSS. The Safeguarding Lead confirmed that all physical safeguarding files are securely stored in a locked cabinet in her office, to which only she holds the key. The key itself is kept in a separate locked cupboard, the code for which is known only to her. Safeguarding-related emails are stored separately on the organisation's IT system, supported by Clearwave, with printed copies added to the corresponding case file. While no one

else has access to the physical key cupboard, the Bar Convent Manager holds access to all necessary IT system passwords and would be able to retrieve safeguarding emails and electronic records in the Safeguarding Lead's absence. During interview, the Safeguarding Lead noted that she is now considering implementing a backup access arrangement for the filing cabinet in case she becomes unavailable. The Safeguarding Policy outlines the requirement to ensure that all case files are accurate, up to date, and securely stored. It assigns responsibility for the management of these files to the Safeguarding Lead or RLSS, ensuring that comprehensive, auditable, and secure records are maintained for each concern or allegation. These records must include relevant contact details, disclosure timelines, the nature of the concern, historical and risk-related context, actions taken by both internal and external agencies, and the rationale for any outcomes. Records must be preserved as potential evidence in legal or statutory proceedings. The Congregation also has a dedicated Data Protection Policy, which was last reviewed in February 2021 and should be updated to reflect best practice. This policy requires that all personal and sensitive data is handled in accordance with the UK GDPR and the Data Protection Act 2018, including secure storage, restricted access, and clearly defined retention periods. To strengthen compliance and reduce the potential for duplication, the Safeguarding Policy should explicitly reference the Data Protection Policy. Doing so would ensure a consistent and unified approach to the recording, retention, and storage of safeguarding records, in line with legal requirements and best practice.

### Areas for Development

**4.4.6** As discussed in 4.4.1, the analyst was made aware of four low-level concerns during the audit site visit. One of these concerns was raised within the Bar Convent and involved a member of the public. The incident required a referral to the local community crisis team due to the individual's behaviour and level of vulnerability. However, during a meeting with the Bar Convent Manager, it was confirmed that the incident had not been referred to the Safeguarding Lead. The manager explained that, as the concern related to a member of the public and not a Sister or staff member, he did not consider it necessary to escalate the matter through internal safeguarding channels. This decision was not appropriate. All safeguarding concerns, regardless of whether they involve staff, Sisters, visitors, or members of

the public, should be reported to the Safeguarding Lead for logging, monitoring, and review. This is also reiterated in the safeguarding policy that states “Action must be taken if a concern is raised that a child or adult may be experiencing significant harm. This includes but is not limited to: A concern about a child or adult at risk of harm from a person outside the CJ context”. This ensures that any emerging patterns can be identified, addressed, and, where necessary, shared with Trustees.

**4.4.7** During interviews with Sisters, one example was raised of a pastoral conversation held at Bar Convent following a referral from a local Anglican priest, who felt the individual would benefit from speaking with a female religious. The Sister involved believed the person simply needed someone to listen, however, based on the account provided, the auditor had concerns that the situation may have required mental health or domestic abuse support. The matter was not referred to the Safeguarding Lead or any other agency. According to records provided for the audit, the Sister had not completed recent safeguarding training and was not listed as being in active ministry. While this may have been an isolated incident, it highlights a situation in which informal pastoral roles could create potential safeguarding risks. Without up to date and comprehensive records of member activity, it is more difficult to assess training needs and ensure appropriate safeguarding oversight for all those engaging with the public. Other Sisters present during the interview recognised that the correct procedure had not been followed and challenged the response appropriately. The issue was subsequently raised with the Trustees during their audit interview the following day. This illustrates a positive safeguarding culture, as Sisters were able to identify and address the concern, demonstrating awareness of the correct safeguarding procedure.

**4.4.8** On examination of the concerns folder held by the Safeguarding Lead, one concern was noted during the last 12 months and was therefore discussed during the audit visit. This concern was a self-referral from a staff member regarding their own behaviour towards a Sister. While the documentation notes that the matter did not meet the threshold for formal safeguarding or disciplinary action, it also records that the Safeguarding Lead did not hold a follow-up conversation with the Sister involved. This raises concerns about whether the impact on the Sister was fully understood or explored, and whether the response met standards of compassionate and person-centred safeguarding practice. These examples

highlight the need for strengthened procedures and consistent follow up in handling low-level concerns. The Congregation of Jesus should consider reviewing their approach to documenting and responding to such incidents, ensuring that guidance is clear on how to record concerns, the importance of involving all relevant individuals in follow up actions, and the thresholds for escalating concerns or sharing information externally.

**4.4.9** The Congregation of Jesus should implement a centralised low-level concerns log across all facilities, including St Bede's, St Joseph's, and Bar Convent. This log should be securely maintained by the Safeguarding Lead and include all recorded concerns, regardless of perceived severity or whether formal action was taken. It should capture key details such as the date, nature of the concern, individuals involved, actions taken, and whether follow-up occurred. This log will allow for improved oversight, consistent documentation, and the identification of emerging patterns or repeated issues. It should be reviewed regularly and summarised for Trustee meetings (with anonymised information where necessary) to ensure oversight, accountability, and that safeguarding responsibilities are being met appropriately across the organisation.

**4.4.10** The Congregation of Jesus should continue to engage stakeholders and other religious life groups to help quality assure their policies. This collaborative approach ensures 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.

#### Graded: Early Progress

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

### Strengths

**4.5.1** During the audit period, the Congregation of Jesus have had no allegations or concerns made against any member. 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 “All action must also be taken in line with the Church’s mandatory reporting policy. This means that action must be taken if there are reasonable grounds to suspect or believe that someone who holds any type of 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 a public facing role”.

**4.5.3** The Congregation of Jesus 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.

**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** The Trustees, Safeguarding Lead and Provincial 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 necessary. In their self-assessment, the Congregation of Jesus reflected on past cases and noted that their Constitutions contain provisions allowing a member to live outside the community when appropriate. They also confirmed that the Congregation has the financial resources to support a member in such circumstances. Any return to ministry would be carefully managed in collaboration with the RLSS and planned according to the individual’s specific circumstances.

**4.5.6** 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 through their links to other religious life groups.

## Areas for Development

**4.5.7** The Congregation of Jesus Safeguarding Policy does not currently address the needs or support available to respondents in safeguarding cases. Although the Sisters demonstrated an awareness of the potential emotional, mental health, physical, and legal impact on respondents, this is not reflected in any existing policy or guidance. To ensure a consistent, fair, and transparent approach, it is recommended that clear practice guidance be developed to address the respondent's experience. This should outline the types of support that may be offered, clarify the role of the RLSS in supporting respondents, and detail how their wellbeing will be considered alongside the Congregation's core safeguarding responsibilities.

**4.5.8** The Congregation of Jesus 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.

## Graded: Firm Progress

## 4.6 Standard 6 Robust human resource management

### Strengths

**4.6.1** The Congregation of Jesus Recruitment and Selection Policy covers employee recruitment and was originally created in April 2021, updated in April 2024, and is scheduled for its next review in April 2026. The Congregation of Jesus Safeguarding Policy and the Recruitment and Selection Policy both state the requirement to have appropriate DBS checks and secure handling of applicant information, ensuring safeguarding standards are met. While the Safeguarding Policy outlines key safeguarding responsibilities related to recruitment, the Recruitment Policy provides detailed procedures covering advertising, assessment, interviews, equal opportunities, and pre-employment checks. To ensure consistency and clarity, it is recommended that both policies explicitly cross-reference each other.

**4.6.2** The Safeguarding Policy states that on appointment, all new employees should be provided with a copy of all the relevant documentation with their responsibilities highlighted. The employee is required to sign to say they understand all relevant policy and procedures. The policy also states that appointment to a role requiring a DBS check will not be confirmed until a satisfactory DBS Disclosure has been received, provided that previous employment references have also been confirmed as acceptable. However, the Safeguarding Lead and CEO have confirmed that, in rare circumstances, the Congregation has permitted staff to begin work while awaiting their DBS check. In such cases, a risk assessment is conducted, the individual's existing DBS check from another role or employer is reviewed, and appropriate supervision measures are put in place at all times.

**4.6.3** The Safeguarding Lead confirmed that in the event of a blemished DBS check, she would consult with the CEO and Provincial, and a risk assessment would be conducted to determine the suitability of the role. The Congregation's self-assessment referenced a past application involving a blemish, which resulted in the individual not being offered the position. During interviews, the Safeguarding Lead, Provincial, and senior leadership team all confirmed that this approach would be consistently applied going forward, although it is not referenced in policies.

**4.6.4** According to the training log for the Congregation of Jesus Charitable Trust, there are 87 individuals employed across the organisation, including both staff and volunteers. The organisation is overseen by a Senior Management Team comprising five employees who are responsible for the overall operations and report directly to the CEO, who in turn reports to the Trustees. Of the total staff and volunteers, 42 are based at St Joseph's, including the Nurse Manager, who also serves as the Safeguarding Lead. An additional 29 staff are employed within Bar Convent Enterprises, alongside the Chief Operating Officer (COO). The COO works closely with the CEO and other members of the Senior Management Team to oversee day-to-day operations at Bar Convent. Trustees stated that they receive confirmation of any new appointments to senior roles. During interviews, several recently recruited staff and carers described their recruitment processes, which were noted by the analyst to be consistent with the organisation's current Recruitment Policy.

**4.6.5** The Safeguarding Lead and Trustees confirmed that those Sisters involved in active ministry are expected to follow the safeguarding policies and procedures of

the organisations in which they serve. The Congregation of Jesus reports that its members collaborate with local churches in York and Cambridge, support former Congregation run schools now under Diocesan or lay management, and partner with theological and spiritual centres including St Beuno's Jesuit Spirituality Centre, the Margaret Beaufort Institute of Theology in Cambridge, and Regis College at the University of Toronto. The Congregation of Jesus state in their self-assessment that those in active ministry are required to complete DBS checks in line with their ministry status, typically through their parish or diocese.

**4.6.6** The Congregation of Jesus implemented a Whistleblowing Policy in March 2025, and this is due for review in March 2027. The Whistleblowing Policy for the Congregation of Jesus primarily outlines the process for employees to raise concerns about wrongdoing or malpractice within the organisation. It focuses on protecting employees from victimisation when they report issues and details how such concerns are to be reported, investigated, and resolved internally. The policy highlights the importance of confidentiality, the right for employees to be accompanied at meetings, and the procedures for escalating concerns if needed. Overall, the policy is focused on employee disclosures and does not reference safeguarding.

**4.6.7** Within St Joseph's, the Nurse Manager and Deputy Nurse Manager are responsible for maintaining individual care plans and risk assessments, which are reviewed and updated monthly to ensure the delivery of safe, personalised, and effective care. Each resident has their own risk assessment, and the Nurse Manager maintains an overarching spreadsheet that summarises these risks using a red, amber, green (RAG) rating system. This centralised overview supports quick identification of high-risk individuals and helps prioritise care needs.

**4.6.8** Regular monthly meetings between the Safeguarding Lead and the CEO have been established as part of routine practice. In addition, the Safeguarding Lead receives peer supervision every six weeks from the Matron at Ampleforth Abbey in relation to her role as Nurse Manager. This structure supports consistent communication, accountability, and coordination in the delivery of care, while enabling timely identification and resolution of any issues affecting the health and wellbeing of the Sisters. Weekly informal walkarounds of the premises are also

conducted to identify environmental concerns or risks; however, these are not currently documented through a formal risk assessment process.

**4.6.9** During the audit visit, it was discussed with the Safeguarding Lead that staff files are kept by the Trustee Secretary, while safeguarding files are stored separately in the Safeguarding Lead's office. Safeguarding issues relating to staff are only maintained within the Safeguarding Lead's files. It is recommended that this practice of keeping files separate is maintained to ensure confidentiality and clear organisation of information. However, during the review of low-level concerns relating to a staff member, it was noted that this information was not recorded in the staff file, with only incidents that proceed to disciplinary processes being noted. To improve safeguarding oversight, it would be beneficial to include a discreet note in staff files indicating if a safeguarding concern exists, without detailing the information, simply advising that the Safeguarding Lead should be contacted for further details. This approach would help balance confidentiality with effective safeguarding management across the organisation.

### Areas for Development

**4.6.10** The Congregation of Jesus' self-assessment stated that candidates and new members in England exploring a religious vocation undergo comprehensive safeguarding checks as part of their formation, including psychological screening, an enhanced DBS check, and safeguarding training. The Congregation clarified that these requirements are set out in a separate document, notes on the Initial Formation Process for Anyone Applying to Join the Congregation of Jesus, English Province (updated July 2017), rather than within the organisation's Recruitment and Selection Policy, which applies only to lay staff. It was explained that admission to religious life is a process of discernment and formation rather than recruitment, governed by distinct procedures. While this distinction is recognised, the current *Safeguarding Policy* and *Recruitment and Selection Policy* do not reference or signpost the formation process, and as a result, the link between safeguarding expectations for candidates and the wider safeguarding framework could be strengthened. The 2017 formation guidance includes safeguarding-related requirements but should be reviewed to ensure it remains aligned with current safeguarding standards and governance expectations. It is also recommended that the *Safeguarding Policy* be updated to reference this formation process

explicitly and to clarify the use of alternative safeguarding checks for visiting or overseas Sisters where DBS checks are not possible. The documentation should further outline how blemished DBS disclosures are reviewed and managed to ensure a consistent and transparent approach to safeguarding decision-making.

**4.6.11** A diocesan priest celebrates Mass within the chapels at Bar Convent and St Joseph's The Congregation has not formally checked with the diocese or obtained confirmation that the priest has a current and appropriate DBS check or a valid Celebret. This represents a gap in expected safeguarding practice. The Safeguarding Lead confirmed that the Trustee Secretary is responsible for overseeing DBS checks. The Trustee Secretary reported that all eligible DBS checks are currently up to date. However, discussions with the Trustee Secretary revealed that he only maintains DBS information for certain staff members and does not manage this process for the entire organisation or Sisters. He expressed the view that DBS responsibilities should be held centrally to ensure consistency and oversight and indicated that he would like to oversee all DBS records. The Trustee Secretary demonstrated the current monitoring system, which is held on his computer and accessible only to him. The system includes renewal dates and automated alerts for upcoming expirations. Centralising DBS processes and records would enhance safeguarding practice by ensuring timely renewals, reducing risk, and promoting greater organisational accountability and oversight.

**4.6.12** It was also identified during conversations with the Safeguarding Lead and Trustee Secretary that some copies of DBS certificates are being retained beyond the data retention periods specified by the Congregation of Jesus. The Trustee Secretary acknowledged this issue and agreed to adapt the existing spreadsheet to record certificate numbers instead. The Trustees should ensure that all physical or digital copies of DBS certificates are securely destroyed in accordance with data protection and retention guidance.

**4.6.13** The Trustees stated during their interview that the CEO had confirmed all policies and procedures had been reviewed in February 2025. However, the Safeguarding Lead confirmed that each building maintains a safeguarding file containing relevant policies. During the site visit to St Joseph's, the analyst reviewed this file and noted that, although it included a range of policies and documents,

some were past their renewal date or had been superseded by updated versions. Additionally, the file was not well-organised, lacking an index or clear structure, which makes it difficult to locate specific documents quickly. It is recommended that all safeguarding files be reviewed and updated to ensure only current, relevant documents are included, and that an index or contents page be introduced to support ease of access and effective use by staff.

**4.6.14** To strengthen this Whistleblowing Policy, it is recommended that it explicitly include safeguarding concerns covered by the policy, such as abuse, neglect, or breaches of safeguarding procedures. The policy should cross-reference existing safeguarding policies and clearly outline how safeguarding reports will be handled with priority and confidentiality. Additionally, the inclusion of Safeguarding Lead contacts within the Whistleblowing Policy will help staff and Sisters know where to raise concerns. Given these necessary updates, it is advised that the policy review date, currently set for March 2027, be brought forward to ensure timely improvements and compliance.

**4.6.15** The Congregation of Jesus has stated that their current complaints policy is available on their website; however, a review of the websites for both the Congregation of Jesus and St. Bede's shows only an email address for submitting complaints or compliments, with safeguarding concerns directed solely to the Safeguarding Policy. Although there is a Grievance Policy that was last reviewed in 2021 and available for staff and employees there is currently no separate complaints policy specifically addressing concerns raised by service users, families, or external parties. A formal complaints policy is a key expectation under the National Safeguarding Standards and would provide clear guidance on how such concerns are received, investigated, and responded to. Implementing such a policy would demonstrate the organisation's commitment to transparency, accountability, and continuous improvement in safeguarding and care practices. It is also recommended that this 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. Additionally the expectation of the Catholic Safeguarding Standards Agency (CSSA), as set out in 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, acting as the final stage for unresolved safeguarding complaints. Therefore, the Congregation of Jesus should ensure that any adopted complaints policy explicitly acknowledges the role of the CSSA and makes individuals aware of their right to escalate safeguarding concerns to the CSSA for independent investigation.

**4.6.16** Due to the high number of carers and nurses on rotation, the Safeguarding Lead (who is also the Nurse Manager) noted that effectively communicating safeguarding updates to staff is a challenge and provided an example of an issue that had arisen as a result. Currently, nurse meetings are held only every three months, which limits opportunities for timely dissemination of safeguarding information. To strengthen safeguarding communication and ensure that potential concerns or updates are not missed, it is recommended that St Joseph's implement a structured, accessible handover system with a focus on safeguarding.

**4.6.17** The Congregation 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.

#### Graded: Firm Progress

### 4.7 Standard 7 Training and support for safeguarding

#### Strengths

**4.7.1** The Safeguarding Policy outlines clear training expectations based on individuals' roles within the Congregation of Jesus. All those involved in safeguarding, including the Safeguarding Lead, Provincial, Trustees, employees, and volunteers, are required to complete training appropriate to their responsibilities. This ranges from basic safeguarding (Level 1) to advanced training (Levels 2 and 3). Training is delivered at set intervals: annually for safeguarding leads and trustees, every two or three years for specific staff and volunteers, and once for those not working directly with the public. The CEO maintains a training log to document the safeguarding training completed by all Sisters, staff and volunteers.

**4.7.2** Training records show that staff and volunteers have undertaken a range of safeguarding courses, including Safeguarding Adults Levels 1 and 2, Safeguarding Social Care Level 1, Safeguarding Awareness, and specialist training delivered by the RLSS, such as safeguarding for children and young people and spiritual accompaniment. Training has been delivered through a combination of in-person sessions and e-learning formats, with key providers including the RLSS and Neil Lee Training. The analyst was provided with evidence of the training materials for Safeguarding Adults Levels 2 and 3 delivered by Neil Lee Training<sup>7</sup>. The Level 2 session covered types of abuse, including domestic abuse, responding to disclosures, and information on the Prevent duty<sup>8</sup>. The Level 3 session expanded on these areas and included additional content on grooming, preventing abuse, supporting individuals who disclose, making DBS referrals, and engaging with statutory agencies.

**4.7.3** The Trustees stated that staff training is primarily overseen at an operational level by the Senior 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 subcommittee who would work to find a resolution.

**4.7.4** The 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

**4.7.5** The concern raised in 4.4.7, highlights ongoing risks associated with informal pastoral roles undertaken by members. While the example identified does not necessarily indicate a wider pattern, it underlines the importance of ensuring that anyone undertaking pastoral or supportive activities is appropriately trained and recorded within central systems. The Congregation should review its processes to

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<sup>7</sup> <https://neilleetraining.co.uk/>

<sup>8</sup> [Prevent duty guidance: England and Wales \(2023\) - GOV.UK](https://www.gov.uk/government/publications/prevent-duty-guidance)

confirm that safeguarding training requirements are consistently identified and applied across all forms of ministry.

**4.7.6** The Safeguarding Policy states that Trustees should complete safeguarding training every three years, with annual update training for members of the Safeguarding Sub-Committee. The training summary provided shows that all Trustees and sub-committee members have completed safeguarding training within recent years, demonstrating continued engagement with safeguarding learning. However, the records indicate that the last trustee specific safeguarding training, delivered by the NSPCC, took place in 2021 for most Trustees. While other safeguarding courses have since been completed, these were not identified as trustee specific and may not have included governance level safeguarding responsibilities. To maintain full compliance with the policy and strengthen Board-level assurance, it is recommended that refresher training specifically designed for Trustees is scheduled and completed, ensuring that governance level safeguarding responsibilities remain current and consistently applied across the Board.

**4.7.7** The Recruitment and Selection Policy states that all managers involved in recruitment and selection should receive appropriate training in equal opportunities, assessment, interviewing techniques, and safer recruitment guidelines, with at least one member of each recruitment panel fully trained. The COO clarified that the training log provided during the audit related only to safeguarding training and that other staff training, including recruitment training, is recorded separately. The COO confirmed that safer recruitment training is delivered in house, however it is not currently documented or supported by certificates or attendance records. It is therefore recommended that the organisation establishes a process to record and evidence completion of in-house recruitment and safer recruitment training to confirm compliance with policy requirements and support ongoing safeguarding assurance.

**4.7.8** The safeguarding training log provided by the Congregation of Jesus records a range of safeguarding training completed by Trustees, senior leaders, and staff across several years. The current training log provides some useful information, but it could be improved for clarity, usability, and effective monitoring. The information from five different years is presented in the log and the structure makes it difficult to follow an individual's training at a glance. The inconsistency in how training

descriptions are recorded may lead to confusion over the course content and relevance and although training dates are represented in the far right column they are not consistently aligned with safeguarding entries making it difficult to determine current training status for each course and future requirements. Following the audit visit, the COO provided a newer version of the trustee training summary, which presented the information more clearly and in a structured format, including frequency and next due dates. It is recommended that this clearer format is used to inform the structure of all safeguarding training records, with the main log showing only the most recent training completed for each individual and course to provide a concise and up-to-date record of compliance. Previous training dates may be retained separately for reference or audit purposes if required.

**4.7.9** The Congregation of Jesus should develop a Training Needs Analysis (TNA) to identify training requirements for individuals according to their roles and to define the expected frequency of refresher training for each course. The TNA should be used to inform and maintain the training log, ensuring it reflects both completed and required training. Compliance data should be reported to the Trustees to provide assurance that safeguarding training is proceeding in line with policy expectations, and Trustees should periodically evaluate the effectiveness of training provision. This will strengthen safeguarding practice and ensure that training is tailored to the specific needs of Sisters and staff.

#### Graded: Firm Progress

### 4.8 Standard 8 Quality assurance and continuous improvement

#### Strengths

**4.8.1** Annual safeguarding reports for February 2025 and July 2024 were provided as evidence for this audit. The February 2025 annual safeguarding report provides an overview of the organisation's safeguarding governance, risk management, and policy development. It confirms that oversight is maintained through both the Trustee Board and a safeguarding sub-committee, ensuring strategic accountability. Key safeguarding risks are clearly identified in areas such as the care of elderly sisters, emotionally and spiritually supportive roles, volunteer

engagement, and the awarding of grants to potentially high-risk external organisations. The organisation's continued membership in national safeguarding bodies, including RLSS and the CSSA, is noted, with reference made to the eight National Safeguarding Standards. It is recommended that the organisation completes and includes an implementation plan mapping its current safeguarding practices against the eight National Safeguarding Standards. This would provide a clear benchmark for assessing compliance, identifying areas for development, and tracking progress over time. Including this in future safeguarding reports would enhance transparency and support continuous improvement. The report outlines updates made to safeguarding policies over the reporting period, specifically highlighting revisions to the Recruitment and Selection Policy, staff code of conduct, and the overarching Safeguarding Policy. Training is described as role specific and tracked on a central spreadsheet; however, the report lacks details on overdue training, upcoming training sessions, or compliance rates. Additionally, while it confirms that no new safeguarding complaints were received during the reporting period, there is no discussion of any historical complaints, learning outcomes, or continuous improvement actions. Adding these details would make the report more comprehensive and useful for oversight by trustees and auditors

**4.8.2** The Congregation of Jesus recognises 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, should that be the Survivor's wish. This reflects a dedication to openness, accountability, and the continuous need to learn from the experiences of Survivors in order to strengthen safeguarding practices. The Safeguarding Lead has also acknowledged the importance of ensuring that she is the appropriate and trusted person to engage in such conversations.

**4.8.3** The Congregation of Jesus intend to use the recommendations of this audit with a view to improving their safeguarding practice and ensuring their adherence to the eight National Safeguarding standards of the Catholic Church in England and Wales.

#### Areas for development

**4.8.4** Trustees should ensure the progress of the intended implementation plan that will be created post audit, is discussed during every meeting. 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.

**4.8.5** The Congregation of Jesus has recognised the need to strengthen its safeguarding governance and proposed a dedicated safeguarding sub-committee. Members of the proposed sub-committee have strong safeguarding knowledge and experience, demonstrating a commitment to improving oversight and accountability. While this is a positive development, there are currently no formal documents setting out the sub-committee's purpose, structure, or responsibilities. To ensure effective safeguarding leadership across all ministries, it is recommended that the role, remit, and operational processes of the sub-committee are clearly defined and documented. It is also advised that the Safeguarding Lead provide regular reports and attend sub-committee meetings to ensure consistent implementation of safeguarding standards and answer safeguarding questions.

Graded: Early Progress

## 5. Summary of overall findings

**5.1** The Congregation of Jesus in England and Wales comprise 19 Sisters, most of whom reside within Bar Convent, St Joseph Community House or the Cambridge Community House. While their active ministry is currently limited and 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 a standing item on the agenda for Trustees' meetings, reflecting a commitment to safeguarding within the Congregation of Jesus. 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 facilities operated by the Congregation of Jesus. Key priorities include, clarifying governance arrangements and ensuring consistent reporting and recording practice for low-level concerns. The Congregation should also improve the recording and oversight of safeguarding training, DBS checks, and ensuring clear, centralised monitoring systems are in place for all facilities. 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 further develop and maintain engagement 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 the 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 Congregation of Jesus have demonstrated that their current practice exceeds minimum safeguarding practice. They have been rated as achieving Early Progress against four of the standards and Firm Progress against the remaining four standards. This gives an overall rating of Firm Progress.

## 6. Recommendations

To support improvement, the following recommendations are made:

Within 3 months

- Formalise and implement the safeguarding sub-committee with clear terms of reference, regular meetings, action logs, and participation of the Safeguarding Lead.
- Clarify and document the safeguarding governance framework, defining roles and relationships between Trustees, the Provincial Council, and sub-committees.
- Clarify and formalise safeguarding responsibilities within the Nurse Manager role by either expanding the safeguarding section of the existing job description or developing a separate Safeguarding Lead role description. The documentation should clearly define safeguarding duties, oversight functions, and reporting lines to the CEO and safeguarding sub-committee. Continue to review the Safeguarding Lead's capacity to effectively fulfil both the Safeguarding Lead and Nurse Manager roles. Ensure appropriate support structures are in place, this may include reviewing workload, reallocating responsibilities, or providing additional resources, to enable her to carry out both roles safely and effectively, without compromising safeguarding standards or care quality.
- Create a safeguarding 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.
- Revise the safeguarding training log for clarity and consistency, making it easier to view individual training status, dates, and relevance across roles and years. Ensure all Sisters and staff involved in pastoral or supportive activities are recorded centrally and have up-to-date safeguarding training.

- Display survivor support information visibly in communal areas and on the website, including contacts for the Safeguarding Lead and relevant support agencies.
- Update the Safeguarding Policy to include clear escalation procedures for low-level concerns across all facilities, including those involving members of the public, ensuring they are consistently addressed beyond initial management and reported to the Safeguarding Lead. 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.
- Ensure the Safeguarding Lead reviews responses to sensitive disclosures where anonymity is requested, ensuring balance between confidentiality and safeguarding duties. Ensure appropriate follow up is conducted for all safeguarding concerns, and records reflect actions taken and outcomes.
- Verify and log the DBS and Celebret status of visiting clergy.

#### Within 6 months

- The Congregation of Jesus should include complaints and whistleblowing policies and support agencies on all their websites.
- Develop a communication plan for safeguarding messages, both internally and externally.
- Develop and publish a formal complaints policy and reflect CSSA's role as the final safeguarding complaints stage.
- Update the Whistleblowing Policy to cover safeguarding issues, cross-reference safeguarding policies, and include Safeguarding Lead contacts. Bring the Whistleblowing Policy review date forward from 2027 to ensure timely updates.
- Create a Training Needs Analysis to identify training requirements by role.
- Integrate safeguarding considerations into all site-specific and organisational risk assessments.
- Centralise all DBS records under an accountable officer, with secure systems, automated renewal alerts, and oversight across the organisation.

- Ensure retention of all DBS information is in accordance with data retention guidance and data protection legislation.
- Audit all central policy files across sites to ensure they are current, indexed, and well-organised.
- Ensure that safeguarding concerns are appropriately flagged within individual staff files by including a discreet and confidential note indicating that a safeguarding concern has been raised, thereby supporting effective oversight and risk management across the organisation.

#### **Within 12 months**

- Update the Safeguarding Policy and/ or implement guidance to:
  - Include a commitment to survivor and respondent and the type of support available, including emotional, legal and practical assistance.
  - Cross-reference the Safeguarding Policy with key policies such as the Data Protection and Recruitment and Selection Policies
  - Reflect safeguarding expectations for new and overseas Sisters, including alternative checks where DBS is not possible.
  - Include procedures for handling blemished DBS checks to ensure consistency and fairness.
- Reduce the Safeguarding Policy review period from two years to an annual cycle to reflect evolving legislation and best practice.
- Include overdue and upcoming training data, historic safeguarding issues, and learning/improvement outcomes in future annual safeguarding reports.
- Ensure Trustees receive safeguarding refresher training every three years.
- Ensure managers involved in recruitment receive training in equal opportunities, assessment, interviewing, and safer recruitment, as stated in policy, and update training logs to reflect completion.
- Ensure all policies (e.g. staff code of conduct) include creation and review dates and are reviewed regularly.

- Establish a process to regularly gather feedback from members and staff on safeguarding training and use this to inform the Training Needs Analysis.
- Establish a formal feedback mechanism for continuous policy improvement. Consider allowing feedback on policies or general experiences through the website.
- Further develop and maintain consultation with survivors (directly or via other 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 respondents to identify if there are any transferable lessons that can be learned.
- Implement mechanisms to measure and review the effectiveness of safeguarding communications and continuously improve them.

## 7. Arrangements for follow-up

**7.1** In accordance with the audit pathway, having received an overall rating of Firm Progress, the minimum period for the Congregation of Jesus' next safeguarding audit will be two years, subject to there being no indications of increased risk.

## 8. Appendix

### Evidence provided

Annual Review Form 2024  
Dignity at work policy March 2025  
Employee Code of Conduct v2

- Item 1 CJ Safeguarding Policy and procedures Feb 25
- Item 2 Agenda Trustee meeting 26 Feb 2025
- Item 3 Trustee Board meeting extract Feb 2025
- Item 5 Management Team meeting July 24 - agenda
- Item 6 Management Team meeting Nov 24 - agenda
- Item 7 Management Team meeting Feb 25 - agenda
- Item 8 Extract of Minutes of the Blossom Street Senior Management Team meeting held on Wednesday 25 September 2024
- Item 9 Extract of Minutes of Blossom Street Senior Management meeting held on 15 October 2024
- Item 10 Extract of Minutes Blossom Street Senior Management Meeting held on Tuesday 19 November 2024
- Item 11 Extract of Minutes - Senior Management 21.1.25
- Item 12 AgendaPC32 16Oct24 for the province (Provincial Council)
- Item 13 AgendaPC26 17Jan24 (Provincial Council)
- Item 14 Provincial Council minutes extract Oct 2024
- Item 15 Extract of 11 July 2024 MINUTES OF TRUSTEE MEETING
- Item 16 Agenda Trustee meeting 11 July 2024
- Item 17 SL training certificate Feb 2024
- Item 18 Safeguarding Report to the Trustee Board July 24
- Page 4-10 Health and Safety (20 Feb 19)
- Item 19 Safeguarding Report to the Trustee Board Feb 25
- Item 20 Safeguarding Poster
- Item 21 a Bar Convent reception staff safeguarding brief
- Item 21 b Safeguarding in brief 13032025
- Item 21 c Mandatory Reporting Information YISAN - 2025
- Item 22 Support Advice and Helplines National and Local 2024
- Item 23 Safeguarding training record March 25
- Item 24 Safeguarding Awareness session 2025
- Item 25 CJ Trust Safeguarding Disclosure Report Form 15062023
- Item 26 Whistleblowing policy March 2025
- Item 27 Congregation of Jesus Charitable Trust - Report and Accounts 2023-24 extract
- Page 3-5 Alcohol-drugs (1 Feb 19)
- Return to Work Self Certification February 2020
- Recruitment and Selection Policy April 2024
- Report a Serious Incident 9 Feb 2021
- Report Serious Incident
- St Bede's Lone Working Policy and Procedure 30042024

