

# SAFEGUARDING POLICY

## 1. POLICY OVERVIEW

IOLM is committed to safeguarding all children and adults. For IOLM this commitment directly relates to the fact that we are all made in the image of God and the Church's common belief in the preciousness, dignity and uniqueness of every human life. We start from the principle that each person has a right to expect the highest level of protection, love, encouragement and respect. Following on from the safeguarding reviews in 2020 we are committed to the One Church Approach to safeguarding by implementing the changes needed and ensuring we respond to victim/survivors promptly and compassionately.

## 2. SCOPE

2.1 This policy and procedure applies to all within the IOLM regardless of their role or the activities they undertake.

2.2 It is the responsibility of all within IOLM to prevent abuse, whether by action or omission. Abuse in this policy refers to: physical; sexual; emotional; spiritual; neglect; self-neglect; organisational; material; psychological; financial; domestic or verbal. Additionally, behaviour which effectively results in modern day slavery or where there is evidence of discrimination or radicalisation, this needs to be recognised and addressed as a safeguarding issue, in accordance with the procedures outlined in Section 6.

## 3. TRAINING

3.1 All IOLM Members and Staff will undertake Safeguarding Training relevant to their role.

3.2 IOLM Members and Staff will undertake refresher training every 1-2 years.

## 4. ROLES AND RESPONSIBILITIES

### 4.1 The Trustees

The Trustees have a duty to maintain appropriate governance and oversight of safeguarding in line with this policy and national guidelines. Certain functions of the Board will be delegated to others within the IOLM, as indicated below.

### 4.2 The Institute Leader

The Institute Leader is responsible for ensuring appropriate policy, procedures and best practice are in place for the effective delivery of a robust safeguarding service. Certain functions of the leader will be delegated to members, as indicated below.

### 4.2 The Safeguarding Lead

The Safeguarding Lead has direct oversight of IOLM safeguarding policy and guidance. This includes oversight of the relationship with and input on the work of the Religious Life Safeguarding Service (RLSS).

#### 4.4 All other roles

All members/staff have an obligation to ensure they know how to respond to safeguarding concerns by making themselves familiar with the content of this policy and the procedure contained within it and any other associated policies/procedures.

#### 4.5 General

Everyone involved in the work of IOLM has a duty to disclose to the Safeguarding Lead or Chair of the Trustees Sub-Committee any safeguarding concerns that have been raised about them.

## 5 PRACTICE GUIDANCE

5.1 Action must be taken if a concern is raised that a child or adult is suffering or is likely to be suffering from significant harm. This includes, but is not limited to:

- Someone who is at serious risk of harm from self or others
- Someone who poses a serious risk of harm to someone else
- A concern about a child or vulnerable adult at risk of harm from someone else
- Concerns over someone's mental capacity

5.2 Action must also be taken in line with the Roman Catholic Church's mandatory reporting policy. This means appropriate action must be taken if there are reasonable grounds to believe that someone who holds any role within the Catholic Church is going to or has committed a crime, is going to or has caused harm, poses a risk or is otherwise unsuitable to work in their role.

## 6 PROCEDURE

6.1 If someone is in immediate danger or there is a safeguarding emergency, call 999.

6.2 If IOLM becomes aware of a concern as detailed in Section 5 or any other safeguarding issue involving a religious Sister or staff member, the SG Lead or Trustee should contact the RLSS Safeguarding Team and pass on the concern and all records of it to them within 24 hours.

6.2.1 The RLSS will:

- Contact any relevant bodies within 24 hours
- Offer support to the victim/survivor
- Complete the safeguarding paperwork and ensure appropriate record keeping of all phone calls, meetings and discussions in relation to the case are documented.
- Update the Safeguarding Lead and/or Trustees

6.3 Care home and Convent with Care managers should alert the Local Authority directly of any Safeguarding Concerns within 24 hours. Managers should follow the direction given from the Safeguarding Team within their Local Authority. They must also let the SG Lead and Trustees at IOLM know and keep them up to date with any developments as and when they occur.

## **7 WHISTLEBLOWING**

7.1 IOLM will encourage and enable anyone with a safeguarding concern, to refer the concern to the Safeguarding Lead without fear of victimisation, or disadvantage.

7.1.1 If that concern is regarding malpractice, illegal acts, or omissions at the IOLM or other religious institution in relation to safeguarding, then the RLSS should be made aware.

7.2 The action taken by the RLSS will depend upon the nature of the concern referred. However, an investigation will be undertaken if appropriate, followed by appropriate action and written feedback will be provided, including a rationale documenting the reasons why identified actions have been taken.

## **8 RECORDING AND STORAGE OF SAFEGUARDING CONCERNS AND CASE FILES**

8.1 IOLM has a responsibility to ensure that all case files held are accurate, up to date and stored securely.

8.2 Where RLSS is responsible for the management of a case, RLSS will ensure records are accurate, auditable, and secure and all records of any safeguarding concerns or allegations referred will be properly maintained.

## **9 SAFER RECRUITMENT PRACTICE GUIDANCE**

9.1 IOLM will ensure that congregation members, lay staff and volunteers are subject to the appropriate Disclosure and Barring Service (DBS) checks in line with both statutory and Catholic Church requirements.

9.2 Appointments will be based on the person's experience, skills and ability to meet the set criteria and job specification for the specific role. It is essential to ensure that all documentation relating to the applicants is kept in a secure place and is confidential.

9.3 Appointment to a role will not be confirmed until a satisfactory DBS Disclosure check has been received and previous employment references confirmed as being acceptable.

9.4 On appointment, all new employees are to read all relevant policy and procedure documentation and sign to say they have understood the contents and are willing to follow them.

9.5 Anyone who is seeking to work with children or adults whether in a paid or unpaid capacity must be provided with the opportunity to self-disclose relevant conviction information. This is a DBS Code of Practice requirement and applies to anyone being asked to have an Enhanced Disclosure.

## **10 POLICY REVIEW**

10.5 This policy is approved by the IOLM Trustee Board and will be subject to an initial review in December 2023 and then every 3 years or sooner, if a need is identified.

Policy last updated: 08.12.2023

Name: Catherine Marcroft

Date of next review: December 2026

Date: 08.12.2023

