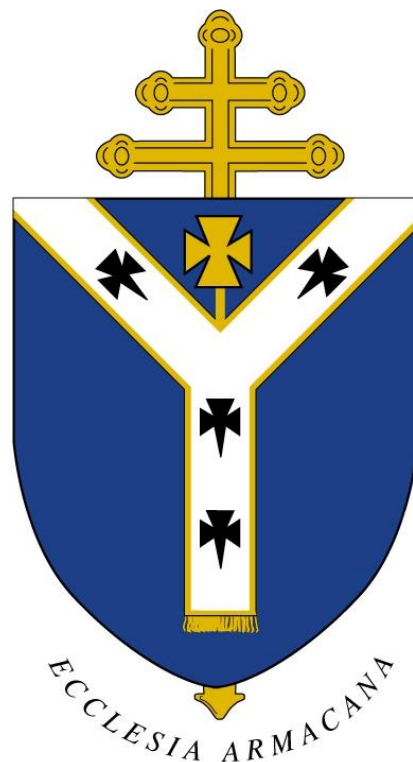


Archdiocese of Armagh



Adult Safeguarding

Diocesan Policy & Procedures 2017

Foreword



The Archdiocese of Armagh is a place where we want all people to feel welcome, respected and safe from abuse. We are committed to safeguarding as an integral component of the life and ministry of the Church, and recognise that we have a special responsibility towards all people at risk or in need of protection from abuse.

This Adult Safeguarding Policy complements our guidance and policies on the protection of children. All adults have a fundamental right to be respected, nurtured, cared for and protected from harm or the risk of harm. These basic rights are embedded in both our gospel values and within international and domestic laws. Concerns and allegations, historical and current, must be taken seriously, swiftly reported, appropriately recorded and dealt with according to clear procedures as required by the law.

All those within church ministry have a special duty of care towards adults at risk and therefore a culture of collective responsibility to work in partnership with other statutory, community and voluntary organisations. We want to reassure all adults at risk or in need of protection, their carers and their advocates, that we are committed to creating and maintaining a safe, caring and compassionate environment for them.

Safeguarding of both children and adults at risk is everyone's business. The Archdiocesan Adult Safeguarding Policy and Procedures apply to all diocesan and parish personnel but especially those who have regular contact with adults who may be more at risk of harm or in need of protection because of their personal or life circumstances.

This document replaces our Diocesan Policy of September 2014 and will be reviewed again in 2020, or as required, to take account of any major changes in legislative or policy changes in safeguarding.

I wish to thank all those who are involved in safeguarding both at diocesan and parish level for their commitment and on-going support in this key area of ministry.

+ Eamon Martin

**Most Rev. Eamon Martin DD
Archbishop of Armagh**

December 2017



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Section 1: Background, Aim and Scope of the Policy

Christian communities should be places where all people (children and adults) feel welcomed, respected and safe from abuse. The Church is particularly called by God to support those at the margins, those less powerful and those without a voice in our society.

The Archdiocese of Armagh recognises that everyone has a fundamental right to be safe, and that there are many people with whom church personnel have contact who require special care and attention. We believe that all church personnel, including priests, religious, staff and volunteers, must carry out their ministry respecting the rights of the individual in line with gospel values and civil or criminal law, including Human Rights Legislation. The Archdiocese values and encourages the participation of adults in all parish liturgies and activities that enhance their spiritual, physical, emotional, intellectual and social development.

Anyone who has suffered abuse should receive a compassionate and just response and be offered pastoral care to help rebuild their lives.

Adult Safeguarding Policy Statement

The Archdiocese of Armagh is committed to safeguarding as an integral component of the life and ministry of the Church and recognises that we have a special responsibility towards adults at risk of harm or in need of protection who are members of our faith community.

We want to reassure them, their carers and their advocates, that we are committed to zero-tolerance of harm to adults at risk of harm or in need of protection by creating a safe, caring and compassionate environment for all. This commitment is based on gospel values and teachings, and compliance with “best practice”.

Aim of the Policy

- To outline the commitment to adult safeguarding of the Archdiocese;
- To ensure that safeguarding arrangements for adults who are at risk of harm or in need of protection are in place;
- To ensure that all church personnel working within the Archdiocese understand and commit to the policy, as appropriate to their ministries.

These guidelines replace those issued in September 2014. The changes contained in this document reflect the policy changes in both jurisdictions of the Republic of Ireland and Northern Ireland since the last policy. It reflects the requirements of -

Adult Safeguarding: Prevention and Protection in Partnership, DHSSPSNI, 2015.

Safeguarding Vulnerable Persons at risk of Abuse, National Policy & Procedures, Incorporating Services for Elder Abuse and for Persons with a Disability, Social Care Division, HSE, December 2014.

Scope of the Policy

Within this policy the term “safeguarding” is used in its widest sense, that is to encompass both activity which **prevents** harm from occurring in the first place and activity which **protects** adults at risk where harm has occurred or is likely to occur without intervention. In Northern Ireland, the language of adult safeguarding previously focused on protection and used the term “vulnerable adult”. This was widely misinterpreted and often used out of context and, for some, the term implied weakness on the part of the adult, which many found unacceptable. The policy now moves away from the concept of “vulnerability” and towards establishing the concept of “risk of harm” in adulthood. The policy introduces the concept of an ‘adult at risk of harm’ and an “adult in need of protection”. The Republic of Ireland at present continues to use the term “vulnerable adult”.

All church personnel including, but not limited to, clergy, staff and volunteers are regarded by the Archdiocese as persons working in positions of trust and as such are expected to adhere to this safeguarding policy and procedures. This policy applies to all aspects of ministry within a church building or within parishioners' homes. The Archdiocese takes seriously all concerns, allegations, suspicions and disclosures of abuse and requires such to be reported to the statutory authorities, according to the requirements of the National Safeguarding Policy (ROI) and the Regional Safeguarding Policy (NI).

Minimum Safeguarding Expectations:

Adult Safeguarding - Prevention and Protection in Partnership (2015) places a requirement on any public service, voluntary, community, independent or faith organisation to meet expectations. It is expected that the Archdiocese will safeguard adults who may be at risk by:

- recognising that adult harm is wrong and should not be tolerated;
- being aware of signs of harm from abuse, exploitation and neglect;
- reducing opportunities for harm from abuse, exploitation and neglect to occur; and
- knowing how and when to report safeguarding concerns to the statutory authorities in both jurisdictions.

Legal Framework - Republic of Ireland

The current definition of a vulnerable adult within the Republic of Ireland is taken from '*Safeguarding Vulnerable Persons at risk of Abuse, National Policy & Procedures, Incorporating Services for Elder Abuse and for Persons with a Disability*, Social Care Division, HSE, December 2014' (referred to henceforth as the '*National Policy*'), considers a vulnerable person as an adult who is restricted in capacity to guard himself or herself against harm or exploitation or to report such harm or exploitation.

This may arise as a result of physical or intellectual impairment and risk of abuse may be influenced by both context and individual circumstances. Because of his/her vulnerability, the individual may be in receipt of a care service in his/her own home, in the community, or be resident in a residential care home, nursing home or other setting.

There should be a presumption of decision making capacity unless proven otherwise and a person has a right to make decisions which other people may consider as unwise. The autonomy of the individual must be respected as much as possible.

Some people may understand that what is occurring to them is abusive and may weigh up the risks and potential consequences of disclosing the abusive behaviour. This may occur, for example, where an older person is subjected to financial abuse by a family member and fears that confronting the issue may fundamentally alter an otherwise valued relationship. Such situations need to be considered carefully, usually at a meeting of key personnel involved with the person. Issues such as severity of risk will need to be considered as well as strategies to empower the person. It may also be advisable to consult with the Gardaí.

Safeguarding must be built on empowering: on listening to the voices of individuals who are at risk, and those who have been harmed.

Key relevant legislation within the Republic of Ireland is as follows:

National Vetting Bureau (Children & Vulnerable Persons) Act 2012.

Criminal Justice (Withholding of Information on Offences against Children & Vulnerable Persons) Act 2012.

The Assisted Decision Making (Capacity) Act 2015 is soon to become practice and proposes three types of decision making support options to respond to a wide range of support needs that people may have in relation to decision making capacity.

Legal Framework - Northern Ireland

In April 2009, the Department of Health and Social Services and Public Safety (DHSSPS), Northern Ireland, commissioned **Volunteer Now** to develop standards and guidelines for organisations working with vulnerable adults in the voluntary, community and independent sectors. This policy document is called **'Safeguarding Vulnerable Adults, A Shared Responsibility'** and sets out the standards and guidance for good practice in working with adults as follows:

- Having an Adult Safeguarding Policy supported by robust procedures;
- Following the procedures laid down for the recruitment and selection of staff and volunteers;
- Providing effective management, support, supervision and training of personnel;
- Clear procedures for raising awareness of, responding to and reporting concerns of a safeguarding nature;
- Procedures for assessing and managing risks with regard to safeguarding adults;
- Having procedures for receiving and dealing with concerns and complaints;
- Managing records, personal information, confidentiality and information sharing;
- Having a code of behaviour which outlines the behaviour expected of all personnel.

In July 2015 the Policy document **'Adult Safeguarding, Prevention and Protection in Partnership'** was published by the DHSSPS and the Department of Justice (DOJ). This Policy moves away from the concept of 'vulnerability' towards establishing the concept of 'risk of harm' in adulthood.

"This policy recognises that the language of adult safeguarding previously focused on protection and used the term 'vulnerable adult.' This was widely misinterpreted, often used out of context and, for some, the term implied weakness on the part of the adult, which many found unacceptable". **Adult Safeguarding, Prevention and Protection in Partnership, 2015.**

The Policy introduces the concept of an **'adult at risk of harm'** and an **'adult in need of protection'**.

Northern Ireland legislation relating to adult safeguarding can be accessed through www.opsi.gov.uk

Some key relevant legislation within Northern Ireland is as follows:

- The Criminal Law Act 1967, Section 5
- The Mental Health (Northern Ireland) Order 1986
- The Police and Criminal Evidence (Northern Ireland) Order 1989
- The Disability Discrimination Act 1995
- The Race Relations (Northern Ireland) Order 1997
- The Public Interest Disclosure (Northern Ireland) Order 1998
- The Family Homes and Domestic Violence (Northern Ireland) Order 1998
- The Northern Ireland Act 1998, Section 75
- The Criminal Evidence (Northern Ireland) Order 1999
- The Human Rights Act 1998 - enacted 2000
- Carers and Direct Payments Act 2002
- The Safeguarding Vulnerable Groups (Northern Ireland) Order 2007
- The Sexual Offences (Northern Ireland) Order 2008
- The Protection of Freedoms Act 2012

Section 2: Recognising and Reporting

Definition of Abuse

In the *'National Policy'* abuse may be defined as any act or failure to act, which results in a breach of a vulnerable person's human rights, civil liberties, physical and mental integrity, dignity or general well-being, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms. The definition excludes self-neglect which is an inability or unwillingness to provide for oneself. However, the HSE acknowledges that people may come into contact with individuals living in conditions of extreme self-neglect. To address this issue the HSE has developed a specific policy to manage such situations. This is covered in Section 3 of their policy mentioned above. Although this abuse definition focuses on acts of abuse by individuals, abuse can also arise from inappropriate or inadequacy of care or programmes of care. There are several forms of abuse, any or all of which may be perpetrated as the result of deliberate intent, negligence or lack of insight and ignorance. A person may experience more than one form of abuse at any one time. The following are the main categories or types of abuse.

Physical Abuse

- Including hitting, slapping, pushing, burning, giving a person medicine that may harm him/her, restraining or disciplining a person in an inappropriate way.
- Possible signs are fractures, bruising, burns, pain, marks, not wanting to be touched.

Psychological Abuse

- Including emotional abuse, verbal abuse, humiliation, bullying, threats of harm or abandonment, deprivation of contact, controlling, isolation or withdrawal from services or support networks.
- Possible signs are being withdrawn, depression, feeling hopeless/helpless, tearfulness, excessive fears, disrupted appetite/sleeping patterns, too eager to do everything they are asked, showing compulsive behaviour, not being able to do things they used to, lack of concentration or focus.

Financial or Material Abuse

- Including misusing, inappropriate use or stealing the person's property, possessions or benefits, cheating, using a person for financial gain, pressuring a person to make or change his/her will and fraud.
- Possible signs are having unusual difficulty with finances, not having enough money, being too protective of money and things they own, not paying bills, not having normal home comforts, disparity between living conditions and assets.

Sexual Abuse

- Including direct or indirect sexual activity where the adult cannot or does not consent to it.
- Possible signs are physical symptoms including genital itching or soreness or having a sexually transmitted disease, using bad language, not wanting to be touched, behaving in a sexually inappropriate way, changes in appearance.

Neglect or Acts of Omission

- Including withdrawing or not giving the help that an adult needs, so causing them to suffer. Including failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, adequate nutrition and heating.
- Possible signs are having pain or discomfort, being very hungry, thirsty or untidy, failing health, pressure sores, under/over medication, absence of required aids to include wheelchairs, glasses, dentures, inappropriate clothing, changes in behaviour.

Discriminatory Abuse

- Including the abuse of a person because of their ethnic origin, religion, language, age, sexuality, gender or disability.
- Possible signs are the person not receiving the care services they require, carer being overly critical or making insulting remarks about the person, going against a person's wishes in dressing.

Institutional Abuse

This can happen when an organisation, where the person is living or receiving care, fails to ensure that the necessary processes and systems are in place to safeguard adults and maintain good standards of care and service.

- Examples are lack of training of staff and volunteers, poor quality supervision and management, inadequate record keeping and liaison with other agencies, low staff morale and high staff turnover.
- Possible signs are adult has no personal clothing or possessions, there is no care plan, the person is often admitted to hospital, or there are instances of staff/volunteers treating the person badly or unsatisfactorily or acting in a way that causes harm, lack of clear lines of accountability and consistency of management.

Definition of Abuse NI

The policy document '*Safeguarding Vulnerable Adults, A Shared Responsibility*' contained the following Definition of a Vulnerable Adult -

"A vulnerable adult is any person aged 18 years or over who is, or may be, unable to take care of him or herself or who is unable to protect him or herself against significant harm or exploitation. This may be because he or she has a mental health problem, a disability, a sensory impairment, is old and frail, or has some form of illness. Because of his or her vulnerability the individual may be in receipt of a care service in his or her home, in the community or be resident in a residential home, nursing home or other institutional setting"
Adult Abuse – Guidance for Staff (NIO, DHSSPS 2009).

The July 2015 Policy '*Adult Safeguarding – Prevention and Protection in Partnership*' states:

The definition of an 'adult at risk of harm' takes account of a complex range of interconnected personal characteristics and/or life circumstances, which may increase exposure to harm either because a person may be unable to protect him/herself or their situation may provide opportunities for others to neglect, exploit or abuse them. It is not possible to definitively state when an adult is at risk of harm, as this will vary on a case by case basis. The following definition is intended to provide guidance as to when an adult may be at risk of harm, in order that further professional assessment can be sought.

An '**Adult at risk of harm**' is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:

- a) **personal characteristics AND/OR**
- b) **life circumstances**

Personal characteristics may include, but are not limited to, age, disability, special educational needs, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain. **Life circumstances** may include, but are not limited to, isolation, socio-economic factors and environmental living conditions.

An '**Adult in need of protection**' is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:

- a) **personal characteristics AND/OR**
- b) **life circumstances AND**
- c) who is **unable to protect** their own well-being, property, assets, rights or other interests **AND**
- d) where the **action or inaction of another person or persons** is causing, or is likely to cause, him/her to be harmed.

In order to meet the definition of an ‘adult in need of protection’ either (a) or (b) must be present, in addition to both elements (c), and (d).

The decision as to whether the definition of an ‘adult in need of protection’ is met will demand the careful exercise of professional judgement applied on a case by case basis. This will take into account all the available evidence, concerns, the impact of harm, degree of risk and other matters relating to the individual and his or her circumstances. The seriousness and the degree of risk of harm are key to determining the most appropriate response and establishing whether the threshold for protective intervention has been met.

Along with the main categories or types of abuse mentioned above Northern Ireland has two extra categories as follows –

Domestic Violence and Abuse

Domestic violence and abuse is threatening behaviour, violence or abuse (psychological, physical, verbal, sexual, financial or emotional) inflicted on one person by another where they are or have been intimate partners or family members, irrespective of gender or sexual orientation. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another. It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has close relationships with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.

Human Trafficking

Human trafficking involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking can come from all walks of life. They can be male or female, children or adult, and they may come from migrant or indigenous communities. Some of the literature refers to ‘*exploitation*’ of the adult which can be defined as:

“The deliberate maltreatment, manipulation or abuse of power and control over another person, to take advantage over another person or situation usually, but not always, for personal gain from using them as a commodity. It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse or Human trafficking.”

If there are concerns about an adult’s well-being which are not dealt with under adult safeguarding procedures they should be reported to the local HSE Department/ HIQA or HSC Trust. A record of this referral should be retained.

Where might abuse take place?

Abuse can happen anywhere:

- In someone’s own home
- In a carer’s home
- Within day care, residential care, nursing care or other institutional settings

- At work or in educational settings
- In rented accommodation or commercial premises
- In public places

Who might abuse?

This could be anyone who has contact with the person – it could be a partner, spouse, child, relative, friend, advocate, informal carer, a member of the clergy/religious order, a healthcare, social care or other worker, a peer or, less commonly, a stranger.

Domestic/Familial Abuse

This is the abuse of an adult by a family member such as partner, son, daughter or sibling.

Professional Abuse

The misuse of power and abuse of trust by professionals, the failure of professionals to act on suspected abuse/crimes, poor care practice or neglect in services, resource shortfalls or service pressures that lead to service failure and culpability as a result of poor management systems. Possible signs of professional abuse include:

- Entering into inappropriate relationships with an adult
- Failure to refer disclosure of abuse
- Poor, ill- informed or outmoded care practice
- Failure to help an adult to access health care / treatment
- Denying an adult access to professional support and services such as advocacy
- Inappropriate response to challenging behaviours
- Failure to whistle-blow on issues when internal procedures to highlight them are exhausted

Peer Abuse

This is the abuse of one adult by another adult within a care setting. It can occur in group or communal settings, such as day care centres, clubs, residential care homes, nursing homes or other institutional settings.

Stranger Abuse

An adult may be abused by a stranger, a member of the public or a person who deliberately targets people. Every organisation should have procedures in place for dealing with concerns raised by staff and volunteers and for reporting those concerns. In the Republic of Ireland reports should be made to the relevant HSE department/ HIQA and/or the Gardaí. In Northern Ireland reports should be made to the local HSC Trust or PSNI where appropriate.

What would cause concern or suspicion about abuse?

There are a number of ways in which concern/suspicion that an adult is suffering/has suffered harm may arise:

- The adult may say it
- Someone else may tell or some incident may arouse concern
- An adult may show some signs of physical injury for which there appears to be no credible or satisfactory explanation
- An adult's demeanour/behaviour may cause a suspicion that something is not right, or possible abuse has taken place
- The behaviour of another individual close to the adult engenders discomfort (this may be another staff member, volunteer, or leader of an activity or family member)
- Through general good neighbourliness and social guardianship

Being alert to possible abuse plays a significant role in ensuring that adults are safeguarded, and it is important that **all** concerns about possible abuse are reported.

What if an adult discloses abuse?

Where this happens, it is important that clergy, staff and volunteers know how to respond and do so in accordance with the following guidelines:

DO

- Stay calm
- Listen
- Reassure the person - tell him/her they did the right thing in telling you
- Let them know the information will be taken seriously and give information about what will happen next
- If urgent medical/Gardaí/PSNI assistance is needed, call the emergency services
- Ensure the safety of the person
- Be aware that forensic evidence might be needed
- Let the person know that they will be kept informed of the progress of their complaint
- Record in writing (date and sign the record) and report to the DLP for the Archdiocese
- Act without delay

DO NOT

- Stop someone disclosing
- Promise to keep a secret
- Press the person for more details or make them repeat the story
- Gossip about the disclosure or pass information about it to anyone who does not legitimately need to know
- Under any circumstances, contact the alleged abuser
- Attempt to initiate an investigation yourself
- Leave details of any concern on a voicemail or e-mail
- Delay in responding

Checking Out

There may need to be some initial “checking out” with the adult who has disclosed information in order to ensure his/her safety. For example, if clergy, staff or a volunteer notices a bruise on an adult’s arm, it would be appropriate to ask “I see you have a bruise on your arm. How did that happen?” Then listen. However, be careful not to start investigating. It is important that clergy, staff and volunteers understand the clear distinction between “checking out” and an investigation. ***Do not start investigating by asking questions that relate to the detail, or circumstances of the alleged abuse, beyond initial checking out, listening and expressing your concern.***

Within Northern Ireland, there is a statutory requirement to refer those individuals to the Disclosure and Barring Service (DBS) who have been engaged in regulated activity and have harmed an adult or placed an adult at risk of harm or where the harm test has been satisfied. If, following an internal investigation, an individual is permanently removed from regulated activity or would have been had they not left the organisation, there is a legal requirement to refer that information to the DBS for possible inclusion in the Adults’ Barred List.

Recording and Reporting

When there are concerns or where a disclosure or allegation is made, people often feel anxious about passing on the information to someone else. Concerned individuals may ask themselves, “What if I am wrong?” and this may hold them back from taking action. It is important for clergy, staff and volunteers to know that they are *not responsible for deciding whether or not abuse has occurred* and neither are they *responsible for conducting an investigation*. This is the role of the appropriate authorities. However, clergy, staff and volunteers do need to pass on any concerns they have. See “*Reporting Procedure Flowchart*” below which applies to all diocesan clergy, staff and volunteers.

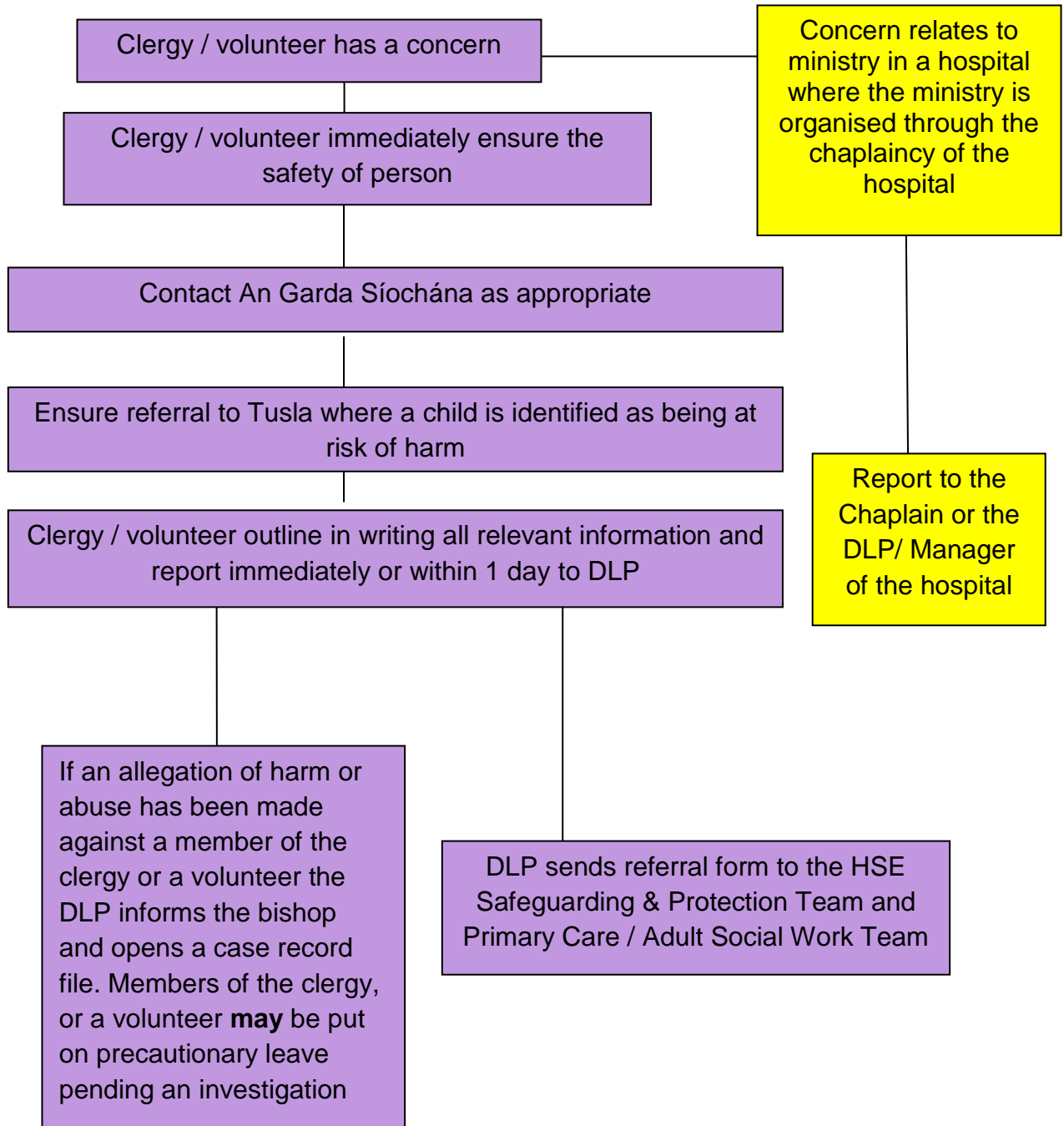
However, in NI if your ministry involves visiting adults in hospitals, residential care homes or other institutional settings, the reporting procedure is through the Designated Liaison Person (DLP) / Manager of the relevant institution.

In the ROI if your ministry involves visiting adults in hospitals where the ministry is organised through the chaplaincy of the hospital the reporting procedure is through the chaplain or the DLP / Manager of the hospital.

Reporting Procedure Flowchart ROI

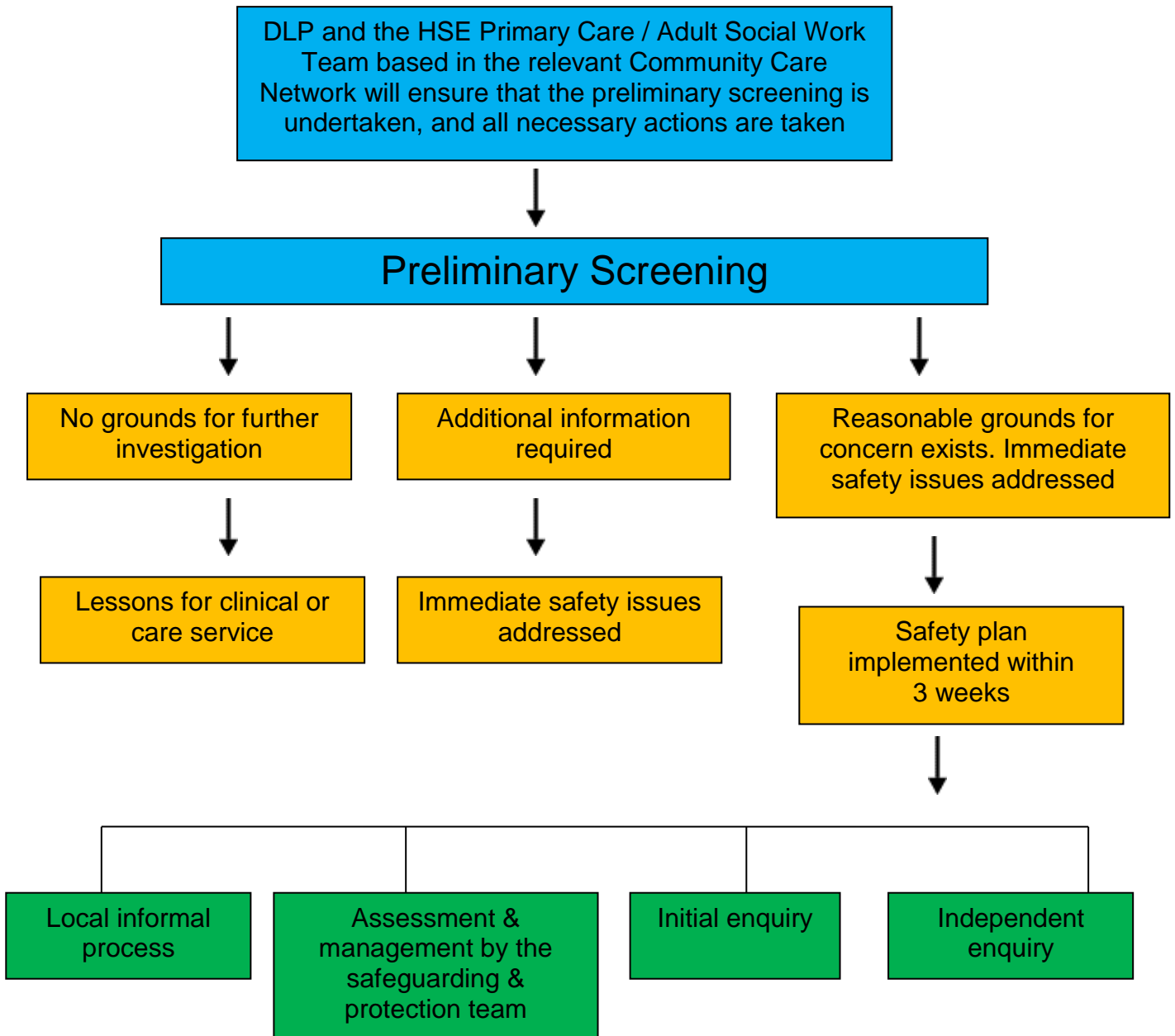
Step 1 – Concern Raising (within 1 day)

This step is initially completed by the person who has the concern and followed up by the DLP



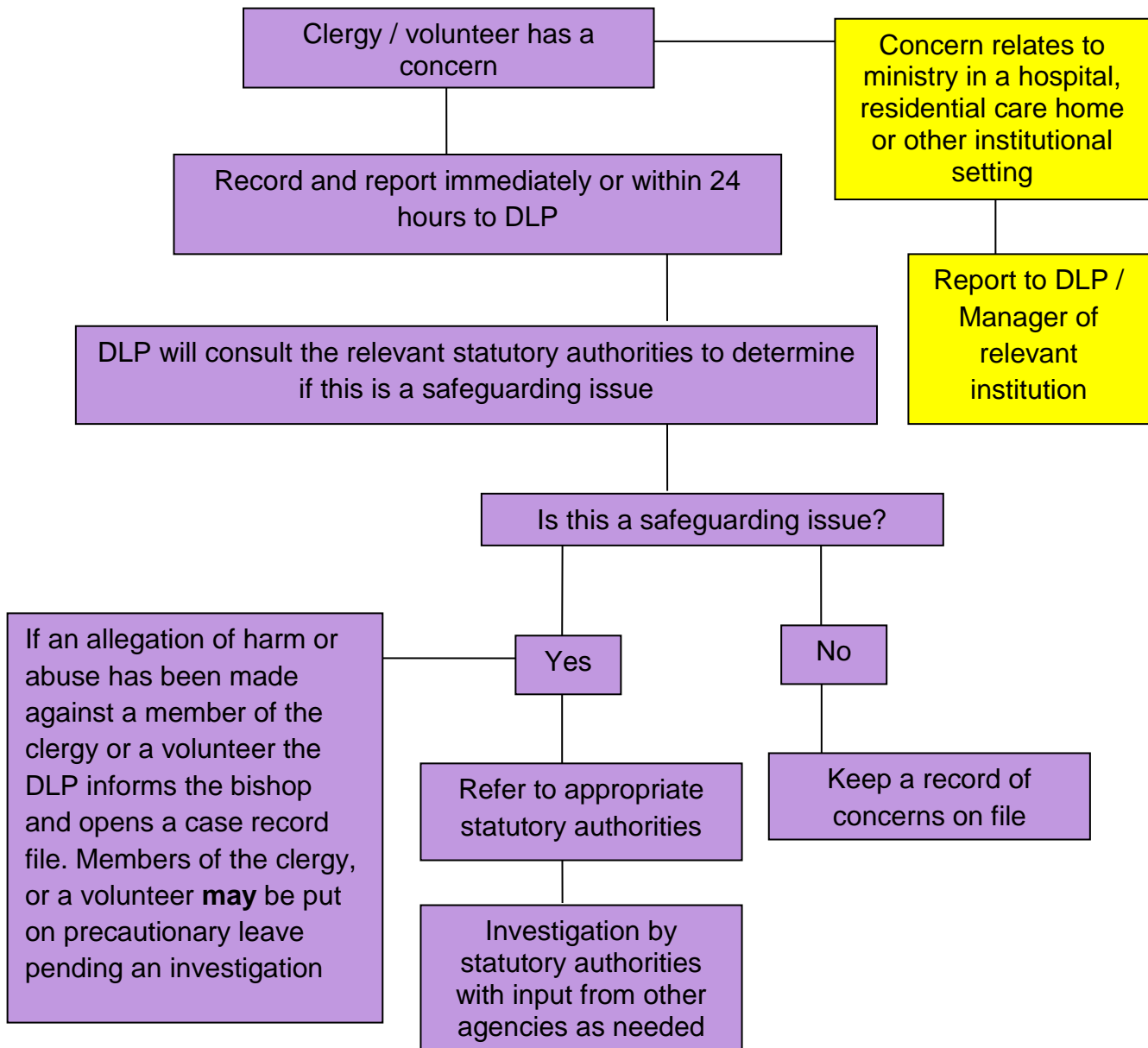
Step 2 - Preliminary Screening (within 3 working days)

This step is completed by the DLP and the HSE Primary Care / Adult Social Work Team based in the relevant Community Care Network



Preliminary Screening will take account of all relevant information which is readily available in order to establish if an abusive act could have occurred and if there are reasonable grounds for concern.

Reporting Procedure Flowchart NI



What is an Adult Safeguarding Champion?

The Adult Safeguarding Champion (ASC) provides strategic and operational leadership and oversight in relation to adult safeguarding for an organisation and is responsible for implementing its adult safeguarding policy statement.

Rationale

This role and its requirements are set out in 'Adult Safeguarding: Prevention and Protection in Partnership' (2015), the policy for Adult Safeguarding in Northern Ireland.

Does the Archdiocese need to have an Adult Safeguarding Champion (ASC)?

The guidance states that an organisation must have a nominated ASC if they have staff and volunteers who are subject to vetting. As an Archdiocese, we have staff and volunteers who require vetting, so we must have a ASC.

The role of the ASC

1. To provide information and support for staff on adult safeguarding within the organisation.
2. To ensure that the organisation's adult safeguarding policy is disseminated and support its implementation throughout the organisation.
3. To provide advice to staff and volunteers who have concerns about the signs of harm, and ensure reporting to the HSE/HSC Trusts where there is a safeguarding concern.
4. To support staff to ensure that any actions take account of what the adult wishes to achieve. This should not prevent information about any risk of serious harm being passed to the relevant HSE/HSC Trust Adult Protection Gateway Service for assessment and decision-making.
5. To advise within the organisation regarding adult safeguarding training needs.
6. To establish contact with the HSE/HSC Trust Designated Adult Protection Officer (DAPO), the Gardaí/PSNI and other agencies as appropriate.
7. To compile and analyse records of reported concerns to determine whether a number of low level concerns are accumulating to become significant and make records available for inspection.
8. To ensure accurate and up to date records are maintained detailing all decisions that have been made, the reasons for those decisions and any other actions taken.

Adult Safeguarding Champion:

Mr. Aidan Gordon
Diocesan Safeguarding Office
Ara Coeli
Cathedral Road
Armagh
BT61 7QY

Tel: 028/048 3752 5592
Email: safeguardingdirector@archdioceseofarmagh.com
Website: www.armagharchdiocese.org/

Role of the Designated Liaison Person (DLP)

The Archdiocese of Armagh has two DLPs who are responsible for managing all concerns, allegations and complaints regarding actual or potential harm or abuse which come to the attention of the Archdiocese. Contact details are as follows:

Mr. Aidan Gordon
Diocesan Safeguarding Office
Ara Coeli
Cathedral Road
Armagh
BT61 7QY

Tel: 028/048 3752 5592
Mob: 07841101687 (NI) 0044-7841101687 (ROI)
Email: safeguardingdirector@archdioceseofarmagh.com

Mrs. Eleanor Kelly
Diocesan Safeguarding Office
Ara Coeli
Cathedral Road
Armagh
BT61 7QY

Tel: 028/048 3752 5592
Mob: 07584323138 (NI) 0044-7584323138 (ROI)
Email: ekelly@archdioceseofarmagh.com

Outside office hours, messages may be left on the Diocesan Safeguarding Office answer machine and these will be followed up from 9:00am the following working day.

The DLP is responsible for acting as a source of advice on safeguarding matters regarding adults at risk of harm or in need of protection, for co-ordinating action within the Archdiocese and for liaising with the relevant statutory authorities and other agencies, as appropriate, about suspected or actual cases of adult harm or abuse. When you contact the DLP, he/she will undertake the following steps:

- Contact the relevant HSE / HIQA / HSC Trust and the Gardaí/PSNI;
- Ensure that appropriate information is available at the time of the referral to the statutory agencies and that the referral is confirmed in writing, under confidential cover;
- Liaise with relevant Gardaí/PSNI service, social services and other agencies as appropriate during the investigation;
- Keep relevant people within the Archdiocese informed about any action taken and any further action required;
- Ensure that an individual case record is maintained about the concerns, allegations and complaints of abuse and the action taken by the Archdiocese, the liaison with other agencies and the resulting outcome.

Record Keeping

All written records relating to concerns or allegations of suspected or actual adult abuse must be maintained by the DLP, in the Diocesan Safeguarding Office. Safeguarding case management records must be kept for 100 years. Other records, such as recruitment, must be kept for 20 years, after the end of the period of employment (this also applies to volunteers). This will be subject to review.

The Archdiocese is responsible for ensuring that the gathering, storage, usage and sharing of personal information is in line with the requirements of the Data Protection Act, 1998 in Northern Ireland and the Data Protection Act 1988 (amended 2003) in the Republic of Ireland.

Confidentiality

It is important that clergy, staff and volunteers understand the importance of confidentiality. All information relating to concerns /suspicions /allegations about safeguarding needs to be shared with the relevant person who in turn shares it on a “need to know” basis with the relevant statutory authorities and relevant professionals.

This information should **NOT** be shared with anyone, inside or outside the Archdiocese, unless they are involved in the case. Only the relevant personnel need to be involved. The DLP will advise on “who needs to know” and who should have access to records.

No undertakings regarding secrecy can be given. Those working with adults should make this clear to all parties involved. However, it is important to respect the wishes of the adult as much as is reasonably practical.

Information may be disclosed to external agencies to ensure the care and safety of an individual or others or where a crime is suspected. Information shared is not only in relation to a suspected crime but also and more usually in parallel with a need to safeguard a person at risk of abuse.

This includes the disclosure of information to the Gardaí, HSE and relevant HSC Trust or PSNI.

The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 came into force on 1st August, 2012. It is an offence to withhold information on certain offences against children and vulnerable persons from An Garda Síochána.

The main purpose of the Act is to create a criminal offence of withholding information relating to the commission of a serious offence, including a sexual offence, against a person who is under 18 years or an otherwise vulnerable person, with the aim of ensuring more effective protection of children and other vulnerable persons from serious crime. An offence is committed when a person who knows, or believes, that one or more offences has been committed by another person against a child or vulnerable person and the person has information which they know or believe might be of material assistance in securing apprehension, prosecution or conviction of that other person for that offence, and fails without reasonable excuse to disclose that information as soon as it is practicable to do so to a member of An Garda Síochána. The offence applies to a person acquiring information after the passing of the Act on 18th July 2012 and it does not apply to the victim. The offence exists even if the information is about an offence which took place prior the Act being enacted and even if the child or vulnerable person is no longer a child or vulnerable person.

Sharing of Information

All adults at risk of harm or in need of protection and, where appropriate, their carers or advocates, need to be made aware that the operation of multi-disciplinary and inter-agency procedures will, on occasion, require the sharing of information in order to protect, or to investigate an alleged suspected criminal offence.

Values and Principles

The Archdiocese’s practice in conjunction with these safeguarding guidelines should be underpinned and guided by a number of values and principles as outlined below:

Access to information and knowledge - adults will be given information that they can understand in order to make an informed choice, including access to expert knowledge and advocacy, as required.

Choice – adults will have the opportunity to select independently from a range of options based on clear and accurate information. Examples of choice are – if an adult does or does not want to participate in a church based activity such as a parish Christmas party, a parish outing or pilgrimage.

Confidentiality – adults will know that information about them is managed appropriately and that there is a clear understanding of confidentiality and its limits among staff /volunteers.

Consent – adults have the right to be supported in making their own decisions and to give or withhold their consent to an activity or service.

Dignity and Respect – adults will be accorded respect and dignity by recognising their uniqueness and personal needs.

Equality and Cultural Diversity – adults will be treated equally and their background and culture will be valued and respected.

Independence – adults will have as much control as possible over their lives while at the same time they are being safeguarded against unreasonable risks.

Privacy – adults will be free from unnecessary intrusion into their affairs and there will be a balance between the individual's own safety and the safety of others.

Safety – adults need to feel safe, and live without fear of violence, neglect or abuse in any form.

Consent and Capacity

The Archdiocese seeks to work in the best interest of an adult and with his/her consent. Clergy, staff and volunteers should always be mindful of the need for adults to consent to, and to be comfortable with, any proposed activity. Consent is a clear indication of a willingness to participate in an activity. The adult may signal consent verbally, by gesture, by willing participation or in writing. Decisions with more serious consequences will require more formal or professional consideration of consent and appropriate steps should always be taken to ensure that consent is valid.

Clergy, staff and volunteers should remember that no one can give, or withhold consent on behalf of another adult, unless special provision has been made for this, usually in law. In certain situations the need for consent may be overridden e.g. to meet a legal responsibility to report or prevent immediate or significant harm either to the adult or the general public. As far as possible, adults should be supported to communicate their concerns to relevant agencies.

Gaining Consent from an Adult

Consent is a process – it results from understanding through dialogue and the provision of information. It may be expressly given or, alternatively, it may be signalled by a person's conduct e.g. an individual may signal his/her consent to participate in informal situations such as staff party or party in residential home or the weekly parish luncheon club, or by willingly asking a volunteer to assist him/her in accessing toilet facilities. (For further information in relation to the delivery of personal and intimate care to adults please refer to Appendix 5)

For those adults who may have difficulty in vocalising their preference and consent there are some simple steps as outlined in the UK's Mental Capacity Act Code of Practice (2005) which may be helpful. These include:

1. Using simple language and/or illustrations or photographs to help the person understand the options.
2. Asking him/her about a decision at a time and location where the person feels most relaxed and at ease.
3. Using specialist interpreters or signers to communicate with the person.

This may mean that other people are required to communicate with the person to establish his/her view e.g. a trusted relative or friend, or full-time carer who may be able to help the adult express themselves and indicate a preference.

As a general rule, the method of gaining consent is likely to be influenced by the seriousness of what is being proposed. The type of activities offered by parishes in the Archdiocese to adults would be unlikely to require

written consent. There may, however, be occasions when written consent is required and if clergy have concerns about consent, e.g. as to its validity, they should always seek advice from the Archbishop and/or the Diocesan Director of Safeguarding. In such circumstances, members of staff or volunteers should always seek advice from their line manager/leader and/or the Diocesan Director of Safeguarding. In such cases the Diocesan Director of Safeguarding will, in turn, seek professional advice on the matter from the relevant statutory authorities.

Currently the following legal definition is used by courts both in NI and the ROI as a general rule in relation to consent. The important issue is to ensure that the consent given is valid. The consent of an adult is considered valid ONLY if:

1. He/she has the capacity to consent, i.e. he/she can understand and weigh up the information needed to make the decision.
2. Sufficient information has been given to him/her, in an appropriate way, on which to base the decision.
3. Consent has been given on a voluntary basis, that is free from coercion or negative influence.

If any of these three factors is absent, consent given is not valid.

Legal protections need to be put in place if someone such as a family member, an advocate or health professional has to make decisions for an adult who has been deemed to lack capacity.

Section 3: Recruitment and Selection

The Archdiocese applies a thorough and clearly defined method of recruiting staff and volunteers in line with legislative requirements and best practice. It is important to have safe recruitment and selection procedures in place to minimise the opportunity for unsuitable people to work or volunteer with adults. Within the Archdiocese, adult safeguarding is a primary consideration in the recruitment, selection and management of personnel.

The recruitment procedure requires that:

- There is a job description for staff and volunteers outlining the key skills and abilities required for the role;
- There is an open recruitment process;
- There is an application form that covers past experience/work/volunteering;
- There is a declaration form requesting information on previous convictions and investigations;
- There is an interview process appropriate to the role and task;
- There are written references sought from two people (not relatives, which are followed up when necessary);
- There is an identification check;
- There is a code of conduct;
- Garda eVetting/Access NI Vetting.

Effective Management

The Archdiocese recognises that a thorough induction process is integral to good organisational practice. Induction should take place when personnel take up a new role and should include:

- Information on the policies, procedures, guidelines, activities and ethos of the Archdiocese;
- Expectations and boundaries within which they should operate;
- Awareness-raising and training on the recognition, recording and reporting of abuse.

A timeframe should be set within which induction should be completed. New personnel should be provided with the opportunity to read the Adult Safeguarding Policy of the Archdiocese, and know where to access the document for reference purposes.

A Probationary Period

Appointments should be conditional on the completion of a satisfactory period of probation established at the time of taking up the role. A record should be kept of any matters arising and/or any training needs identified. During the probationary period, progress in the role should be reviewed at regular intervals and any concerns addressed appropriately.

Structure for Line Management and Support appropriate to the Role

Good practice indicates that support and supervision are beneficial in enabling personnel to feel supported in the work which they do, and to ensure that they are carrying out their duties to the required standard. Regular meetings between personnel and management provide the opportunity to give and receive feedback on performance and other relevant issues and to assist in the identification of areas for attention/development. Written records of line management, support and training should be retained.

Relevant Training appropriate to the Role

Personnel should receive training appropriate to the nature of their role and the profile of the adults concerned. The training should be reviewed and updated in line with changing legislation and practice. It is recommended that updated training be delivered **at least every three years**. A good understanding of the nature of abuse is essential to ensure that personnel remain alert to signs that an adult may have been abused. Adult safeguarding training should include a basic awareness and understanding of the factors, which contribute to an adult at risk or in need of protection, the possible signs of abuse, responding when abuse is disclosed or suspected, the meaning of confidentiality in the context of adult safeguarding, recording and reporting procedures.

Personnel must –

- take concerns around abuse seriously;
- deal with information about alleged abuse sensitively;
- know not to make promises to keep secrets;
- understand that their role is not to investigate;
- know how to report concerns;
- know the procedure to follow in relation to reporting to the DLP.

Appendix 1: Role Description & Code of Conduct

Role Description of Eucharistic Minister to the Housebound

Job Title:	Parish Eucharistic Minister to the Housebound
Responsible to:	Parish Priest
Job Purpose:	To bring the Eucharist into the residences of housebound people

The main role of the Eucharistic Minister to the Housebound is to bring the Eucharist to the people who are housebound. Parish representatives undertaking this very important role are responsible to the parish priest. Their main responsibilities include:

- Bringing the Eucharist from the parish church to people in the community who are housebound due to health problems, age or disability;
- Following the instructions given by the Archdiocese for the reverent conveying of the Eucharist in line with the appropriate format for the administration of the Eucharist;
- When visiting people either in hospital or in a residential home, to respect the boundaries and regulations of the organisation, particularly by notifying someone in a supervisory position, of your presence in the home;
- Being respectful of peoples' homes in the community;
- Being willing to administer the Eucharist prayerfully;
- Being aware of difficulties for some people with swallowing the Eucharist and therefore accommodating the size of the portion of the Host to enable comfortable reception of the Sacrament. It is essential to adhere to guidance from medical staff in relation to health issues e.g. people who are peg-fed cannot receive the Eucharist;
- Being sensitive to the fact that doctors, nurses or social services may call just before or whilst the Sacrament is being administered and that medical care should be accommodated;
- Being willing to talk with people to whom the Sacrament is being brought, recognising them as part of the Body of Christ;
- Ensuring that the Eucharistic Minister has an awareness of, and adheres to, the Diocesan Adult Safeguarding Policy and Procedures.

Person Specification:

- To be a person of integrity and good character;
- To have reverence for the Eucharist;
- To have a clear understanding of the Eucharist as a Sacrament of unity, reconciliation and healing;
- To accept the Church's teaching on the Eucharist and the Mass;
- To be available to bring the Eucharist on a regular basis to those in need;
- To recognise that Jesus is present in the Eucharist and in the people who will receive it;
- To be able to maintain confidentiality in relation to people's personal details and information.

Note: We recognise in the case of close relatives who live at the same address as the housebound or close family members e.g. children/niece/nephew/grandchildren or siblings, there is an exemption from the normal vetting requirements as no additional access is created in such cases.

Code of Conduct for those who Minister to Adults

Ministry with adults is a gift from God. It is critical that boundaries are respected and that thoughtful relationships are established which always place the needs and well-being of the adult as the primary concern. Those carrying out ministries should have clearly defined codes of conduct. A balance needs to be struck between the right to protection and the need to allow appropriate spiritual relationships between an individual and his/her priest, lay minister or volunteer. It is important for all clergy, staff and volunteers to:

- Remember that an adult at risk is still an adult and must never be treated like a child;
- Adhere to the protocols and guidelines of any organisation in whose premises they are ministering;
- Treat everyone with equal respect;
- Engage and interact appropriately with adults;
- Be aware of the difficulties posed by language barriers and other communication difficulties;
- Respect the dignity of each individual and their right to personal privacy;
- Recognise that particular care is required in moments when you may be discussing sensitive issues with adults;
- Avoid situations that might compromise your relationship with adults, and which are unacceptable within a relationship of trust. This rule should apply to all such behaviours including those which would constitute an illegal act;
- Respect the religious, cultural, racial and sexual orientation of the adult and be open to, and aware of, diversity in their beliefs and practices and those of their families;
- Provide an example of good conduct you wish others to follow;
- Operate within diocesan guidelines.

The code outlines unacceptable behaviours. Clergy, staff and volunteers must **never**:

- Physically or emotionally abuse or exploit an adult;
- Become involved in either using the adult's money on his/her behalf or in giving the adult advice in the use of his/her money;
- Use language, make suggestions or offer advice which is inappropriate, offensive or abusive;
- Do things of a personal nature for an adult that he/she is capable of doing for him/herself or are the responsibility of their family or carer;
- Act in ways intended to shame, humiliate, belittle or degrade;
- Discriminate against the person on the basis of religion, race, culture, gender or sexual orientation;
- Form inappropriate relationships with adults;
- Gossip about personal details of adults and their families;
- Inappropriately photograph or video an adult;
- Audio or visual recordings may not be taken of adults without their permission. The use of such recordings on any website (social networking sites, etc.), or any other medium, either as recorded or digitally altered, are expressly forbidden.

Clergy, staff and volunteers are made aware of the code of conduct in the expectation that they will act in accordance with it when exercising ministry to adults.

Appendix 2: Adult Abuse Report Forms

**REFERRAL FORM FOR COMMUNITY BASED REFERRALS
SAFEGUARDING VULNERABLE PERSONS AT RISK OF ABUSE
NATIONAL POLICY & PROCEDURES**

There is duty of care to report allegations or concerns regardless of whether the client has given consent. The referrer should take any immediate actions necessary as per policy in relation to seeking An Garda Síochána or medical assistance.

Vulnerable Person's Details:

Name: _____ DOB: _____

Address: _____

Marital Status: _____ Contact Phone Number:/Mobile: _____

Does anyone live with client: Yes No If yes, who? _____

Medical history and any communication support needs (as understood by referrer):

Details of the person's vulnerability (as understood by referrer):

Is client aware this referral is being made? Yes No

Has client given consent? Yes No

Is there another nominated person they want us to contact, if so please give details?

Name: _____ Contact Details: _____

Relationship to vulnerable person: _____

GP Contact Details:

Name: _____ Telephone: _____

Primary care team details i.e. social worker, PHN, etc.

Any other key services/agencies involved with client (Please include Name and Contact):

Details: _____

Details of allegation/concern: Please tick as many as relevant:

Physical abuse

Financial/material abuse

Psychological/Emotional abuse

Neglect/acts of omission

Sexual abuse

Discriminatory abuse

Extreme Self Neglect*

Institutional abuse

(extra sheet/report can be included if you wish)

Details of concern:

(*If self neglect is being referred please complete the attached presence of indicators of extreme self-neglect)

Details of Person Allegedly Causing Concern (if applicable)

Name: _____ Relationship to vulnerable person: _____

Address: _____

Is this person aware of this referral being made: Yes No

Details of person making referral:

Name: _____ Job Title (if applicable): _____

Agency/Address: _____

Landline _____ Mobile: _____

Signature _____ Date: _____

Data Protection Advice: If the person allegedly causing concern is a staff member, please use initials & work address only



REGIONAL ADULT PROTECTION PROCEDURES

APP1(a) REFERRAL / SCREENING INFORMATION

*For completion by HSC staff and contracted providers**PLEASE ENSURE SECTIONS 1 & 2 ARE FULLY COMPLETED BEFORE REFERRAL TO TRUST DAPO*

Name: <input type="text"/> <input type="text"/>	Date of Birth: <input type="text"/> <i>(if not known, please give approximate age)</i>	Date of Referral: <input type="text"/>
Address: <input type="text"/> <input type="text"/> <input type="text"/>	Gender: M <input type="checkbox"/> F <input type="checkbox"/>	Service/Client Group: <input type="text"/> <input type="text"/> <input type="text"/>
Postcode: <input type="text"/>	Telephone No: <input type="text"/>	Is the person known to the Trust? Yes <input type="checkbox"/> No <input type="checkbox"/>
		Reference No: <input type="text"/>

SECTION ONE*Section 1 – completed by Referrer*

Source Of Referral			
<input type="checkbox"/> Carer	<input type="checkbox"/> Other Trust	<input type="checkbox"/> RQIA	<input type="checkbox"/> Regulated Care Home
<input type="checkbox"/> GP	<input type="checkbox"/> Other Health Professional	<input type="checkbox"/> Adult Mental Health Unit	<input type="checkbox"/> Other Regulated Facility <i>Specify</i>
<input type="checkbox"/> Hospital Staff	<input type="checkbox"/> Anonymous	<input type="checkbox"/> Self	<input type="checkbox"/> Learning Disability Hospital
<input type="checkbox"/> PSNI	<input type="checkbox"/> Social Worker	<input type="checkbox"/> MARAC	<input type="checkbox"/> Other <i>Specify</i> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> DHSS	<input type="checkbox"/> Care Manager/Care or Homecare Worker	<input type="checkbox"/> Adult Safeguarding Champion	
<input type="checkbox"/> Vol. Organisation	<input type="checkbox"/> Housing Association	<input type="checkbox"/> Acute General Hospital	

Details Of Referrer <i>(the person who brings the concerns to the attention of your agency)</i>	
Name: <input type="text"/>	Relationship to adult at risk of harm: <input type="text"/>
Job title and agency: <input type="text"/> <input type="text"/>	Contact number: <input type="text"/> <input type="text"/>
Who Was The First Person To Note Concern	
Name: <input type="text"/>	Relationship to adult at risk of harm: <input type="text"/>
	Contact number: <input type="text"/>



APP1 FORM

Key Contacts			
	Name	Address	Contact number:
Key Worker	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
Care Manager	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
G.P	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
Family/Carer	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
Significant other	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
Other	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>	<input style="width:90%;" type="text"/>
What Is The Main Form Of Suspected, Admitted Or Known Abuse?			
<input type="checkbox"/> Physical	<input type="checkbox"/> Sexual	<input type="checkbox"/> Institutional Abuse	<input type="checkbox"/> Human Trafficking
<input type="checkbox"/> Financial	<input type="checkbox"/> Neglect	<input type="checkbox"/> Psychological	<input type="checkbox"/> Domestic Violence
<input type="checkbox"/> Discrimination	<input type="checkbox"/> Exploitation		
Incident Report			
Background Information: <i>(To include factors precipitating referral, home circumstances, support available, including issues of capacity)</i>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
Incident Report – Location / Date / Time of Incident <i>(Please give exact details of what has been reported and if appropriate include names of any witnesses and note injuries on the attached body chart)</i>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
<input style="width:99%; height: 15px;" type="text"/>			
Details Of Any Witnesses			
Name: <input style="width:95%;" type="text"/>	Name: <input style="width:95%;" type="text"/>		
Address: <input style="width:95%;" type="text"/>	Address: <input style="width:95%;" type="text"/>		
Contact No: <input style="width:95%;" type="text"/>	Contact No: <input style="width:95%;" type="text"/>		



Describe The Impact Of The Incident On the Adult At Risk of Harm

The Adult At Risk of Harm Usual Living Arrangements
Does the adult at risk of harm live alone? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the person who is suspected to have caused harm live with the adult at risk of harm? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the adult at risk of harm present location different from home address? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes give present location</i>

Have You Taken Any Action Due To Emergency Situation To Avoid Immediate Serious Risk?
Was immediate protection needed for adult at risk of harm? <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If Yes give details:</i>
Are there any children or other adults at risk? <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If Yes give details:</i>
Was immediate protection required? <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If Yes give details:</i>

Adult At Risk of Harm's Knowledge Of Referral
Does the adult at risk of harm know that a referral may be made? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the adult at risk of harm able to give informed consent? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/K
Has the adult at risk of harm consented to a referral? <input type="checkbox"/> Yes <input type="checkbox"/> No



Details of Person/Persons Suspected of Causing Harm		
Name:	<input type="text"/>	Date of Birth: <input type="text"/> <input type="checkbox"/> M <input type="checkbox"/> F
Address:		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
Does the person/persons suspected of causing harm know that an allegation has been made against them? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/K		
Is the person/persons suspected of causing harm known to the adult at risk of harm? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/K		
<i>If yes please specify below:</i>		
<input type="checkbox"/> Family member	<input type="checkbox"/> Another service user	<input type="checkbox"/> Paid carer <input type="checkbox"/> Trust employee
<input type="checkbox"/> Other (specify)		

Any Additional Information Relevant To The Referral <i>(Please note the views of others you have consulted and note any difference of opinion)</i>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Signature: <input type="text"/>	Date: <input type="text"/>
---------------------------------	----------------------------

Appendix 3: Access to Advice and Support

Republic of Ireland

An Garda Síochána:

Domestic Violence and Sexual Assault Investigation Unit Harcourt Square Dublin. Tel: 01 666 3430

Garda 24 Hour Free Phone Reporting Line: 1800 555 222

Ardee: Tel: 041 6853222

Dundalk: Tel: 042 9335577

Drogheda: Tel: 041 9874200

HSE:

The HSE has nine Community Health Organisation (CHO) Areas throughout the Republic of Ireland which has its own Safeguarding and Protection Team. The Archdiocese lies within CHO8:

Louth: ——— CHO8:
Safeguarding & Protection Team
Ashbourne Primary Care Centre
Declan Street
Ashbourne
Co. Meath
Tel: 01 6914632
E-mail: safeguarding.cho8@hse.ie

HIQA Health Information and Quality Authority is the Regulatory Body for nursing homes and designated centres for children and adults with disabilities. The contact details are Northern Regional Office, Social Services Inspectorate, Georges Court, Georges Lane, Smithfield, Dublin 7

Tel: 01 8147400 Fax: 01 8147499

Women's Aid Dundalk: Support Organisation for those suffering from Domestic Abuse

Tel: 042 9333245 Helpline: 042 9333244

Email: info@womensaidlkl.net Website: www.womensaidlkl.org

The Samaritans: Tel: 1850 609090 Confidential Helpline: Free-phone 116 123

Towards Peace: Tel: 01 5053028 Mobile: 086 7701533

“Towards Peace” offers spiritual support to victims/survivors of clerical abuse whose faith in God may have been affected by their experience. Following initial telephone contact, ***“Towards Peace”*** offers an opportunity to talk to a trained spiritual companion in a one-to-one setting and to explore questions and concerns about God, and to get in touch with God's presence in their lives.

Northern Ireland

Police Service Northern Ireland (PSNI):

Tel: 101 (non-emergency)

This is a centralised number. Ask to be put through to the police station which serves the area where the incident/alleged incident took place.

Social Services:

The Health and Social Care Trusts in Northern Ireland have Adult Safeguarding services in all Trusts. Anyone reporting a concern or making an allegation of abuse should contact this service in the Trust which serves the area where the incident/alleged incident took place. Contact information is outlined below:

Southern Health & Social Care Trust Tel: 028 3741 2015 (adult services)

Northern Ireland Regional Emergency Social Work Service: Tel: 028 950 49999

This service is available outside normal office hours including weekend and public holidays i.e. 5pm to 9am Monday to Thursday and 5pm Friday to 9am Monday. There is 24-hour cover over public holidays.

Women's Aid Northern Ireland: Support Organisation for those suffering from Domestic Abuse 24 Hour Helpline Tel: 0808 802 1414

Email: info@womensaidni.org Website: www.womensaidni.org

The Samaritans: Confidential Helpline: Free-phone 116 123

Towards Peace: Tel: 00353 1 5053028 Mobile: 00353 86 7701533

"Towards Peace" offers spiritual support to victims/survivors of clerical abuse whose faith in God may have been affected by their experience. Following initial telephone contact, *"Towards Peace"* offers an opportunity to talk to a trained spiritual companion in a one-to-one setting and to explore questions and concerns about God, and to get in touch with God's presence in their lives.

Age NI Advice Line: Tel: 0808 808 7575

Appendix 4: Roles and Responsibilities

Roles and Responsibilities

Archbishop of Armagh:	Overall responsibility for ensuring that the safeguarding systems for protecting all people and groups are firmly established and working across the Archdiocese and that appropriate roles are filled.
Diocesan Safeguarding Committee:	Established to oversee the implementation of a safeguarding strategy with accountability to the Archbishop.
Diocesan Safeguarding Office:	The office employs a Director of Safeguarding, two Designated Liaison Persons, a Diocesan Training Coordinator and an Office Administrator.
Designated Liaison Persons:	The Designated Liaison Persons are responsible for managing and coordinating all allegations, suspicions and concerns of child and adult abuse within the Archdiocese. This involves referral to the statutory services, setting up multi-disciplinary strategy meetings and the internal management of cases, including preparing information for the Archbishop and the Diocesan Advisory Panel.
Adult Safeguarding Champion:	The Adult Safeguarding Champion provides strategic and operational leadership and oversight in relation to adult safeguarding for an organisation and is responsible for implementing its Adult Safeguarding Policy Statement.
Diocesan Advisory Panel:	The Diocesan Advisory Panel is appointed by the Archbishop. Its role is to provide the Archbishop with recommendations about the management of individuals (following investigation by the Gardaí/PSNI) against whom allegations of abuse of adults have been made. The Panel comprises representatives from the medical, canon law, statutory and legal backgrounds.
HSE/HSC Adult Safeguarding Teams:	The Safeguarding and Protection Teams work collaboratively with services and professionals in promoting the welfare of adults, acting as a resource to personnel and services having concerns regarding adults, receiving concerns and complaints about adults and assessing concerns and complaints involving adults. In complex situations they may undertake assessments regarding possible adult abuse and carry out an investigation into the complaint. Collaborating with other agencies in addressing issues impacting on the welfare of adults, maintaining records and reporting on the service, may also be part of their role.

Appendix 5:

Guidelines on Intimate Care of Adults

Guidelines on Intimate Care of Adults

Disability is defined as a substantial restriction in the capacity of a person to participate in economic, social or cultural life on account of an enduring physical, sensory learning or emotional impairment. The types of disability include: physical disability, mental ill-health, autism, intellectual or learning disability and sensory impairment such as hearing or visual impairment (Duty to Care: Department of Health & Children April 2002).

Assumptions should not be made about the effects of impairment on a person. These should be elicited as much as possible directly from the person even though communications may be difficult. Where there are communication difficulties, the care giver must become proficient in understanding the person.

To ensure equality of treatment and opportunity for disabled persons, reasonable adjustments should be made to the physical environment such as access to accommodate their needs, membership and activities. Prejudice or disabling attitudes of others need to be addressed through education and information.

Disabled people must be treated fairly avoiding direct discrimination on the basis of disability, victimisation and harassment. Adults at risk of harm or in need of protection have the same rights, hopes, fears and aspirations as other adults. They have additional needs that place additional responsibility on those who care and work for them.

Code of Practice for the Intimate Care of Adults

- Adults may depend on others for their care and safety;
- Appropriate care is to be given by carers/workers/staff/volunteers always respecting an adult's dignity, privacy and choice;
- Planning and agreements with an adult in relation to supporting their inclusion in activities should be discussed when they are joining an activity, particularly around areas such as personal care and establishing communication;
- Where it is necessary to carry out tasks of a personal nature for an adult, this should be done with the full understanding and consent of the adult/family member/carer. In carrying out such personal care tasks, sensitivity must be shown to the adult and the tasks should be undertaken with the utmost discretion;
- Any care task of a personal nature, which an adult can do for himself/herself, should not be undertaken by the carer/worker/volunteer. In an emergency situation, where this type of help is required, the family/carer should be fully informed as soon as reasonably possible;
- Carers/workers/staff should be aware that adults at risk or in need of protection may be more likely than other adults to be bullied or subjected to other forms of abuse, and may also be less clear about physical and emotional boundaries.

Appendix 6: Whistle-blowing Policy

Whistle-blowing Policy

What is Whistle-blowing:

Whistle-blowing is a term used to describe the action of someone who reveals/discloses wrongdoing within an organisation to the public or to those in positions of authority. It enables the reporting of concerns in a way that will not be seen as disloyal to their colleagues.

Principles:

- The Archdiocese of Armagh is committed to the highest possible standards of openness and accountability;
- Employees and volunteers are expected and encouraged to voice any concerns about activities involving adults at risk of harm or in need of protection to the appropriate person i.e. activity leader, parish priest, parish safeguarding representative or to the diocesan designated liaison person;
- All people have the right to raise concerns about perceived unacceptable practice or behaviour;
- All concerns will be treated as far as possible in the strictest confidence and every effort will be made not to reveal the identity of the complainant, if requested. However, if the concerns require further action, the complainant may at some future date have to act as a witness and/or provide evidence;
- It is recognised that whistle-blowing can be difficult and stressful. Advice and support will be made available in the first instance by the parish safeguarding representative, or by the diocesan designated liaison person;
- No action will be taken against the complainant if the concern proves to be unfounded and was raised in good faith;
- Malicious allegations may be considered as a disciplinary offence and/or a criminal offence.

What stops people from whistle-blowing:

- Fear of starting a chain of events which spirals out of control;
- Disrupting the work or project;
- Fear of getting it wrong;
- Fear of repercussions or damaging careers;
- Fear of not being believed.

How to raise a concern:

If the issue appears to be of a relatively minor and straightforward nature and clearly does not involve a formal vulnerable adult protection investigation, it may be dealt with at local level. Concerns, suspicions or uneasiness should be reported without delay. The earlier a concern is expressed, the easier and sooner action can be taken. Try to pinpoint exactly what practice is concerning you and why. Request a copy of the General Complaints Form from the activity leader, parish safeguarding representative, parish priest or diocesan designated liaison person, as appropriate. Make sure you get a satisfactory response – don't let matters rest. Put concerns in writing, using the 'General Complaints Form', outlining the concerns and issues, dates, etc.

What happens next:

You should be given information on the nature and progress of any enquiries within ten days of submitting the 'General Complaints Form'. You are not expected to prove the truth of an allegation but will need to demonstrate sufficient grounds for the concern. You are entitled to be protected from harassment or victimisation following a complaint.

Self-reporting:

There may be occasions where a member of staff, paid or voluntary, has a personal difficulty, perhaps a physical or mental health problem, which they know to be impinging on their professional competence. That person has a responsibility to discuss such a situation with his/her group leader or parish priest so that professional and personal support can be offered. Whilst such reporting will remain confidential in most instances, this cannot be guaranteed where personal difficulties raise concerns about the welfare or safety of adults.

Protected Disclosure:

In the Republic of Ireland the Protected Disclosures Act 2014 provides legal safeguards to employees, contract and agency workers and people on work experience schemes, to report illegal practices or other specified wrong doings such as abuse. This applies where the disclosure is made in good faith and on reasonable grounds and relates to any conduct or action which raises a significant danger to public health or safety.

Within Northern Ireland the Public Interest Disclosure (NI) Order 1998 protects most workers who whistle-blow about wrongdoing in their workplace (such as a criminal offence or where there is a danger to the health and safety of individuals) from being treated unfavourably by their employer as a result, e.g. by not being allowed access to training or promotion.

Contact Details:

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