

CATHOLIC SAFEGUARDING STANDARDS AGENCY

Ampleforth Abbey Baseline Audit Report August 2023

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1. Introduction

1.1 This is a baseline audit of safeguarding arrangements for Ampleforth Abbey. The audit has been undertaken as part of the pilot phase of audits of religious life groups (RLG) that is intended to inform the development of a definitive audit model to be used for RLG throughout England and Wales. This audit was undertaken at the invitation of the Abbot of Ampleforth Abbey and CSSA would like to extend its thanks to all at the Abbey for their facilitation of the process.

1.2 The monastic community of Ampleforth Abbey is part of the English Benedictine Congregation and traces its origins back to 1802. For the majority of its history its primary apostolate has been the running of Ampleforth College, an independent boarding school. The two organisations are now legally separate entities with four monks employed as school chaplains, although their physical proximity and shared history necessitates a degree of co-ordination of safeguarding (and other) arrangements. With a much reduced role in the school, the community is currently discerning its future apostolate. There are currently 43 community members, of whom 29 reside at Ampleforth Abbey. The Abbey is situated in rural North Yorkshire, but also owns four parish churches (three nearby in Middlesbrough diocese and one in Liverpool, that will be handed over to the archdiocese in 2024) and provides priests to two others. Members of the public are able to join the monks in the Abbey Church for their daily cycle of prayer and celebration of the mass, while guest facilities provide for individual and organised retreats. In 2024 the redeveloped Alban Roe building will be re-opened with extended provision for residential retreats, with a focus on schools, and a public visitor centre. Ampleforth Abbey has a dependent monastery in Zimbabwe, in which four monks of Ampleforth are resident, however that does not form part of this audit.

1.3 This audit seeks to assess the effectiveness of current safeguarding arrangements at Ampleforth Abbey and, in doing so, concentrates on practice and developments during the last year. The history of safeguarding concerns at the Abbey and College, briefly restated here, remains of relevance though, in that it has underpinned the nature and urgency of the current response. There have, and continue to be made, allegations about monks' abusive behaviour, primarily in the context of their roles in Ampleforth College. Four monks have been convicted of sexual offences, three against children, although this number might have been greater had all subjects of allegations been living. Of those who have been convicted two were laicised shortly after their convictions; three are now deceased

and the fourth, who is laicised, remains in prison. For the sake of fairness to community members, it should be noted that it is a minority of monks who have been the subject of allegations. The four convicted and 25 against whom allegations were made represent 1.5% and 9%, respectively, of the 273 monks between 1950 and 2021. Ongoing concerns about safeguarding resulted in a number of monks being asked to reside other than on the Abbey site, at the request of external agencies in 2012 and 2018. In 2016 the Charity Commission opened an Inquiry into safeguarding at the Abbey and College, which formally remains ongoing. The Charity Commission subsequently appointed an Interim Manager who assumed the trustee responsibilities relating to safeguarding from 2018 to 2020. Finally, and alongside other members of the English Benedictine Congregation, Ampleforth Abbey was the subject of a case study by the Independent Inquiry into Childhood Sexual Abuse (IICSA)¹.

1.3 CSSA has categorised RLGs on a scale from Level 1 (a small community with minimal outreach and no known safeguarding concerns), through 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). Ampleforth Abbey has been categorised as a Level 3 RLG and the following audit was completed on this basis.

2. Scope & Methodology

2.1 This pilot baseline audit was undertaken following the submission of the Level 3 self-assessment by the Ampleforth Abbey Director of Safeguarding and Wellbeing

¹ The [Ampleforth and Downside \(English Benedictine Congregation case study\) Investigation Report | IICSA Independent Inquiry into Child Sexual Abuse](#) was published in August 2018. An update was provided in [The Roman Catholic Church \(EBC\) Case Study: Ealing Abbey and St Benedict's School Investigation Report | IICSA Independent Inquiry into Child Sexual Abuse](#) published in October 2019 and further reference made to Ampleforth Abbey in [The Roman Catholic Church Investigation Report | IICSA Independent Inquiry into Child Sexual Abuse](#) report published in November 2020.

(DoSW) on the 17th July, this was within the requested timeframe. The self-assessment was supported by a considerable file of evidence, the contents of which are included as Appendix A.

2.2 The auditor also reviewed the Ampleforth Abbey website² and the publicly available annual report to the Charity Commission³ (for the year ended 31st August 2022).

2.3 At the request of Ampleforth Abbey, CSSA had completed case audits on all 12 open safeguarding cases during the course of 2022. The same auditor who was responsible for the conclusion of these audits undertook this baseline audit. A further three case audits were completed as part of this baseline audit, one was selected on the basis of there being a live police investigation and the remaining two due to their being the poorer scoring cases in the original audit. A review of three low level concerns was also completed. Reports for these audits are included within Appendix B and referenced elsewhere in this report.

2.4 Audit interviews (in person unless otherwise stated) were completed between the 15th and 18th August with:

- The Abbot
- The Chief Executive Officer
- The Director of Safeguarding and Wellbeing
- The Safeguarding Assessors
- The Director of Operations
- The architect for the Alban Roe re-development
- The Safeguarding Committee Chair (virtual)
- The Safeguarding Panel Chair (virtual)
- A monk who is also a trustee (virtual)

2.5 The auditor observed (virtually) meetings of the Safeguarding Panel on the 22nd June and the Safeguarding Committee on the 20th July.

² [Ampleforth Abbey](#)

³ [charity-search \(charitycommission.gov.uk\)](#)

3. Audit Grading

3.1 Practice was assessed against the eight safeguarding standards adopted by the Catholic Church in England and Wales⁴ and graded in accordance with the CSSA Maturity Matrix for Level 3 RLG. Each standard is graded on an ascending six point scale of Basic, Early Progress, Firm Progress, Results Being Achieved, Comprehensive Assurance, and Exemplary. Grades for individual standards are combined in order to produce an overall grading.

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

⁴ 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. Assessment against the Standards

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

Graded: Exemplary

4.1.1 Ampleforth Abbey has a clearly stated commitment to safeguarding, available on its website and visible to visitors. All spoken to during the course of the audit were able to articulate this commitment and the expectation that this places on them. Senior leaders recognise their personal responsibility to provide leadership in safeguarding, with the Abbot describing his approach as being leading by example.

4.1.2 Formal responsibility for safeguarding sits with the trustees of the charity⁵ through which Ampleforth Abbey operates as a civil legal entity. At the time of the audit, four of the ten trustees were lay members appointed as a consequence of their specific area of expertise, including the Safeguarding Committee Chair who has considerable experience of safeguarding at a strategic level in charities. Committee membership is otherwise constituted of religious trustees, including the Abbot, and two lay members appointed for their safeguarding expertise. The Abbey has a five year strategic plan, *Choosing a Future Together*, for 2022 - 2026 in which safeguarding forms one of six objectives. Operational delivery of this theme is the responsibility of the Safeguarding Committee and managed through an annually renewed action plan. This plan has been mapped against the national safeguarding standards and is aligned to the Abbey's safeguarding commitment. All objectives were on track at the time of the audit. Safeguarding additionally forms a key element of the overall risk register maintained by trustees. The register was seen to be responsive to changing circumstances and to influence operational activity.

⁵ Ampleforth Abbey Trust, charity number 1026493. The charity has one trustee, The Ampleforth Abbey Trustees Ltd (company number 396036). Directors of this trustee company are referred to as Trustees within this report.

4.1.3 Oversight of individual safeguarding cases is provided by the Safeguarding Panel, which has a lay professional membership appointed for their specific areas of expertise. The Panel will review each case on a six monthly cycle although, in practice, this was seen to be more frequent. The Panel's role is to make recommendations to the Abbot as to the management of monks for whom safeguarding plans are necessary, with a key area of decision making being their place of residence. Any decision that may have a reputational impact on the Abbey is referred to the Safeguarding Committee, as this properly falls within the remit of trustees. Theoretically, the Abbot could override the decisions of both, however in practice he is clear that he would always follow the advice of the Panel and Committee. The Abbey is nevertheless developing an escalation policy to manage any disagreements within this system, which is a sensible precaution.

4.1.4 Operational management of safeguarding is the responsibility of the Director of Safeguarding and Wellbeing (DoSW). He is an experienced social worker and senior manager, and has been in post since 2020. Management of individual safeguarding cases is undertaken by two sessional safeguarding advisors, who are both experienced safeguarding professionals. The Director of Commercial and Operations is the Deputy Designated Safeguarding Lead and, together with the DoSW, maintains a 24/7 advice line. Though not excessively used, this provides an important statement as to the importance of safeguarding and availability of support.

4.1.5 The DoSW holds weekly monastery safeguarding meetings (MSM), with the Abbot, Chief Executive (CEO) and a monk trustee to share information in respect of all monks subject to safeguarding plans and any other issues considered necessary. These meetings can make decisions within the remit of attendees and provide an important forum for ensuring that religious and lay safeguarding knowledge and actions are co-ordinated. Weekly executive meetings similarly allow for updates to be provided (though not in respect of individual cases) to other operational senior managers. The profile of safeguarding for Ampleforth Abbey has been such that trustees have taken a needs led approach to resourcing and it is clear that current resources are sufficient to meet demand. Contingency arrangements are in place for any absence of the DoSW.

4.1.6 In practice, the above governance and management arrangements provide for a clear scheme of delegation and decision making. The effectiveness of safeguarding governance arrangements is monitored, with most recent formal

review having been in autumn 2022. This will be supported by an external review of overall governance arrangements for the charity, currently underway. During the audit period information was seen to flow between strategic and operational groups, with well written reports and key performance indicators being submitted to the Safeguarding Committee and exception reported to the Board of Trustees. There was a clear understanding of the responsibilities of each group and this was supported by case audits of safeguarding cases. It is equally clear that there is a good deal of individual support and challenge within the system. It is a positive that meetings do not always follow the expected course and that decisions can be seen to develop from professional discussion and challenge. Both the Committee and Panel Chairs have frequent contact with the DoSW and others between meetings, while the Abbot and CEO are clearly willing to prioritise safeguarding issues.

4.1.7 Separate safeguarding children and safeguarding adults policies have been in place for a number of years and are updated annually. The policies are bespoke documents, clearly reflecting Ampleforth Abbey's particular circumstances and updated to include emerging issues and changes to statutory guidance. Separate complaints (not specific to safeguarding) and whistleblowing policies are also in place. The whistleblowing policy is available to lay employees, volunteers and monks, despite the latter not being covered under legislation. All the above policies are readily available within the safeguarding section of the Ampleforth Abbey website. Policy updates were seen to be responsive to emerging issues and changing legislation, but could be further enhanced by explicitly quality assuring whether the policies were effective in achieving their intended outcomes, including through feedback from stakeholders.

4.1.8 Ampleforth Abbey has its own programme of retreats that are open to members of the public and mostly led by monks. These fall under the Ampleforth Abbey safeguarding policies and evidence provided indicates a recognition amongst involved staff of the vulnerabilities of some retreatants and their confidence to raise concerns with the DoSW before and during retreats. Additional safeguarding input is provided by the DoSW to participants at a monastic experience retreat geared toward young adults. Abbey buildings, including the sports centre, are also available for group bookings, which would fall under the auspices of the booking group's own safeguarding policy. This requirement and expected evidence is clearly set out in a form that groups are required to return prior to the booking. The re-development of the Alban Roe building for residential

school retreats and as a public visitor centre has been done with safeguarding in mind. Parts of the building can be zoned off for specific groups and clear sightlines are established for supervision. This has been designed in conjunction with schools who are likely to use the venue.

4.1.9 The annual Lourdes pilgrimage is the one area of safeguarding activity that takes place slightly apart from other practice. Its distinct circumstances have reasonably resulted in it having its own safeguarding policy and safeguarding lead, who is present in Lourdes. The DoSW is nevertheless part of the management arrangements, provides training to volunteers and is available to provide advice to members of the pilgrimage while they are in Lourdes.

4.1.10 Safeguarding arrangements for Ampleforth Abbey's four wholly owned parishes are currently articulated in formal memoranda of understanding, agreed with their respective (arch)dioceses. Queries have been raised and canon law advice sought by both (arch)dioceses involved recently; this reflects the current lack of a national consensus in respect of safeguarding arrangements for parishes in these circumstances. In the meantime, it is clear that the DoSW works in conjunction with his diocesan counterparts and that working arrangements for the parishes are in place.

4.1.11 The above arrangements provide a framework for the delivery of safeguarding, however their effectiveness is determined by the underpinning culture amongst monks and lay employees. Interviewees, without exception, reported an increasingly positive safeguarding culture, variously describing an organisational change from being quite insular and seeing safeguarding as a box ticking exercise, a problem to be solved, to one where it increasingly underpins day to day thought and action. Considerable change in the attitude of monks, from one of fear to a more recent willingness to explore the issue and its underpinning factors, was unanimously described by interviewees. Whether a symptom or a cause of this shift, it is clear that a series of reflective discussions, primarily led by the Abbot and DoSW, have provided the monks with a safe space to explore their responses to the abusive behaviour of some of their brethren, the implications of *Integrity in Ministry* and issues relating to human relationships, celibacy and loneliness. Reflective discussions are underpinned with formal training and it was positive that monks had additionally chosen to listen to a book about spiritual abuse during mealtimes. All lay employees are similarly required to complete safeguarding training, irrespective of role. Evidence of a willingness to accept

personal responsibility for safeguarding was seen in a series of examples of monks and lay employees bringing safeguarding concerns and queries to the attention of the DoSW. The Safeguarding Committee has recognised the need to qualitatively assess safeguarding culture and has developed a matrix of eight areas of behaviour against which positive and negative examples can be plotted to provide an overall assessment. This is monitored quarterly with a more full assessment due in February 2024.

4.1.12 The one relatively minor area for development identified in the governance arrangements relates to the MSM, which is acknowledged to be a relatively recent innovation. Given that it can make decisions about the management of individual safeguarding cases, its role should be formalised in a Terms of Reference (TOR). Its utility is such that in one case audit a gap in management oversight emerged during a period in which it did not meet due to a succession of bank holidays and period in which the Abbot was not present on site. The TOR should therefore address this issue.

4.1.13 Forthcoming months will bring a number of significant personnel changes within the charitable trust, with the (lay) Chair of the Trustee Board and CEO leaving their roles (successor arrangements for both are agreed) and the DoSW reducing his hours. Though not the subject of a specific recommendation, it is expected that trustees will be alert to the potential disruption to safeguarding arrangements that these changes may bring about.

4.2 Standard 2 Communicating the Church's Safeguarding Message

Graded: Results Being Achieved

4.2.1 The communication of safeguarding messages presents a particular challenge for Ampleforth Abbey, given the ongoing need to consider the impact on survivors and the understandably strong emotions that the Abbey's history can elicit from members of the public. The current message was described to be one of confidence in current arrangements, without complacency. The safeguarding section of the website provides a good volume of safeguarding information, including clear detail for survivors as to how they might report abuse either directly or indirectly. No attempt is made to hide the history of abuse at Ampleforth and an apology is unambiguously offered. Information is up to date, with the Abbot

providing a new personal message every six months or so. Communications plans, covering the media and all stakeholders, were seen to be developed in response to predictable events, for example the publication of the final IICSA report. A more positive and thoughtful approach was seen in an article written by the Abbot in response to IICSA, published in *The Tablet*. Any reactive media response is governed by a media protocol that delineates decision making processes and who should speak, according to topic. A longer term communications plan is in the process of being developed, with support from Catholic Voices⁶. The agreement and practical application of this plan will enable Ampleforth Abbey to improve the grade achieved for this standard (it is not included as a specific audit recommendation due to already being in progress).

4.2.2 The history of safeguarding at Ampleforth Abbey has been such that it has attracted an understandably high level of scrutiny from local statutory agencies. In turn, they have raised concerns to national bodies, including CSSA. There have been periods in which staff at Ampleforth have felt the level of scrutiny and expectation to be disproportionate and beyond that which would be expected for other organisations or individuals where there have been safeguarding concerns. The case audits did similarly identify occasions where local working relationships hampered effective working. There has, however, been a distinct improvement in relationships in the calendar year to date that should provide a foundation for future arrangements.

4.2.3 Having completed the structural separation from Ampleforth College, clear written arrangements are now in place to determine necessary joint safeguarding activity, with the College Designated Safeguarding Lead (DSL) consulted and invited to Safeguarding Panel meetings, where relevant. This is supported by a strong working relationship between the DoSW and College DSL. A willingness to continue the two organisations' working safeguarding arrangements was seen in

⁶ Catholic Voices is a project that aims to improve the Church's representation in the media by training Catholics to engage with the media and through consultancy work with organisations (source: [Catholic Voices](#)).

the agreement of formal processes for investigations and disciplinary hearings for school based allegations against monks no longer employed there.

4.2.4 The DoSW has been instrumental in establishing a network of diocesan safeguarding co-ordinators in the north-east and Yorkshire, who meet to share good practice and undertake peer audits. Ampleforth Abbey have and continue to pro-actively engage with CSSA, in order to report incidents and seek to develop their own and others' practice.

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

Graded: Comprehensive Assurance

4.3.1 As previously noted, the Ampleforth Abbey website provides clear information for survivors of abuse who may wish to disclose their experiences, with the expected response set out in a Commitment to Survivors. In practice, the majority of allegations involve Ampleforth College and the two organisations operate a 'no wrong door' approach for survivors, in that either will respond to a survivor who approaches them. Survivors reporting abuse by monks are likely to receive a longer term response from the Abbey, whereas the college will respond to those reporting abuse by lay teacher; this will be determined on an individual and survivor led basis though. Records would indicate that approximately 70 individuals have made allegations of abuse in the course of the last 20 years, a number of whom also participated in the IICSA Truth Project⁷. Training and crib sheets have been provided to monks and lay staff members considered most likely to receive initial disclosures, with refreshers delivered prior to expected events that may prompt further contacts (e.g. the IICSA final report publication). Disclosures are then passed to the DoSW. The Abbey has a contract with Survive York (who survivors can

⁷ The Truth Project enabled victims and survivors of child sexual abuse to share their experiences with IICSA and to make suggestions for change. These contributed to individual investigations, informed research and formed a significant proportion of the Inquiry's final report. Source: [Truth Project | IICSA Independent Inquiry into Child Sexual Abuse](#)

also approach directly) for therapeutic provision and this was seen in case audits to be readily accessed by survivors. A wide range of other sources of support are detailed on the website and checked every quarter. When survivors do not have direct contact with the Abbey they are provided with a copy of the Survivor Commitment and information about support services through third parties (usually police and solicitors), this was clearly recorded within case files.

4.3.2 The overall response to each survivor is overseen by the Survivor Working Group (SWG), the membership of which consists of the DoSW, College DSL, a monk trustee and a lay expert member. Minutes of recent meetings indicate that survivors are discussed respectfully and allegations are treated as being credible. There is an obvious willingness to reflect on the experiences of survivors and the response that they have received. The SWG also oversees the provision of any services provided to survivors, with the management of financial claims against the Abbey by their insurers overseen by the Board. The existence of an ongoing claim does not preclude the making of an apology. Apologies, written by the Abbot and with the advice of the SWG, present as sensitive and thoughtful responses. Where necessary, information from the SWG influences the management of the subjects of allegations by the Safeguarding Panel (and vice versa), although the two streams of work generally and properly run in parallel. Learning is seen to be drawn from individual responses to survivors, with one resulting change in practice being that each individual contact with a survivor is ended with an established arrangement for the time and nature of the next contact.

4.3.3 The SWG necessarily sits to the side of the substantive safeguarding governance arrangements, although report of relevant issues (not personal survivor information) may be made to the Safeguarding Committee. These reporting arrangements should be included within its TOR, with consideration given as to whether a routine report would be beneficial. A more regular cycle of meetings should be established, with the expected six per annum not met during the audit period. It is evident that, where possible, survivors will be asked for feedback about the service that they have received and that the SWG will reflect on their experiences and draw learning from these even where feedback is not offered. Consideration has been given to establishing some form of reference panel, however this was deemed not to be practical or desirable from a welfare perspective. The potential of receiving input from individual survivors in respect of training and policy is being explored, as are links to the CSSA national survivor

reference panel. In these circumstances it is recommended that Ampleforth Abbey further systematises the use of feedback from individual survivors and uses this to develop its offer and quality assurance (e.g. what does this feedback tell us about the effectiveness of the policy, survivor commitment etc.?).

4.4 Standard 4 Effective Management of Allegations and Concerns

Graded: Comprehensive Assurance

4.4.1 Allegations received, almost without exception, concern non-recent abuse. This increasingly means that the alleged perpetrator is deceased or one of the group of monks already convicted or otherwise subject to a safeguarding plan. The number of new allegations has gradually diminished in the last two to three years (as have the number of monks subject to safeguarding plans), however case audits indicate that where required prompt notifications are made to statutory authorities and internal stakeholders. Allegations are managed in conjunction with local statutory agencies and care taken to ensure that actions are jointly agreed. Advice is regularly sought from the CSSA chief executive and support service team.

4.4.2 Lower level concerns that do not meet the threshold for a full safeguarding response are managed by the DoSW, or on occasion by his deputy, and covered by a specific section within the safeguarding children policy (this should be replicated in the safeguarding adults policy). Oversight for case closure for low level concerns is provided by the CEO, in contrast to substantive safeguarding cases that are managed by the Safeguarding Panel. An audit of the three lower level concerns received during the audit period, included within Appendix B, found that practice in this respect was safe, with one recommendation made in terms of policy. While the lower level of harm involved means that trustee oversight is not necessary, it would be opportune to review lower levels concerns within the annual safeguarding report in order to provide assurance about thresholds and identify any learning that can be drawn from them.

4.4.3 Having been previously criticised (in 2016) for their failure to make reportable serious incidents (RSI) notifications to the Charity Commission, the Abbey has since benefitted from a close relationship with the Charity Commission and is proactive in making and updating RSI. Decisions in this respect are made in the weekly

executive meetings, which also reviews all open RSI. All incidents that the auditor would have expected to be reported during the audit period were done so.

4.4.4 There has been no recent need to instigate canonical processes to dismiss a monk from the Abbey (and therefore laicise him), however this has been done historically and there was a clear willingness to do so should the future need arise. Established links are in place to access a canon lawyer of Middlesbrough diocese. Canonical decrees are used to support the re-integration of some monks no longer subject to safeguarding plans.

4.4.5 Ampleforth Abbey has separate privacy notices for members of the public (which would include survivors making a disclosure), monks and lay staff. Survivors and the subject of an allegation are provided with a copy at the outset of safeguarding team involvement, with monks advised that a PAMIS file will be opened and of their right to make a subject access request (this should be more explicitly recorded in case notes though). An external consultant has reviewed data protection arrangements for the Abbey, as a whole, and made no recommendations in terms of safeguarding case management.

4.4.6 Case audits undertaken by the CSSA Quality Assurance Team in 2022 indicated a general need to improve management oversight and recording practice. More recent audits would now suggest that management oversight is a strength. It is evident in routine supervision entries and oversight provided following significant events. Recording is not confined to case worker supervision but also includes Safeguarding Panel and MSM discussions. All are increasingly reflective in nature and clearly log decisions made, together with the rationale. The DoSW has recently secured external professional supervision, which closes a previous gap. Recording practice has similarly improved, with all recent audits scoring a grading of 'good' in this respect.

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

Graded: Exemplary

4.5.1 At the time of writing, seven monks are subject to safeguarding plans, none of whom reside at Ampleforth. As previously indicated, open cases are discussed by the Safeguarding Panel at least twice a year, at which point the Risk Information

Framework and Safeguarding Plan are updated. Individual work with monks subject to safeguarding plans is a significant strength. Caseworkers clearly take the time to get to know the individuals involved and are responsive to their needs, while ensuring that restrictions are maintained. At the same time as managing the risk to others, they increasingly see their roles as being to support wellbeing which, in turn, promotes compliance. Networks of support are put in place to provide for physical, mental and emotional wellbeing, with clear consideration given to the monk's wishes and any changes in circumstances. Monastic supporters have a job description and receive coaching throughout their involvement. Consideration is clearly given to how significant decisions will be conveyed to the subjects of plans, with the Abbot often taking a lead in this respect. The effectiveness of current work with subjects of plans is seen in their overall engagement and willingness to acknowledge concerns about their behaviour, which has not always been a given.

4.5.2 Ongoing reflection and learning from cases has enabled the development of this facet of practice. Previously discussed reflective sessions with monks indicated that a good deal of their anxiety about safeguarding arose due to a lack of understanding as to processes for managing allegations. This stemmed from their experience of having seen members of their brethren being asked to leave the site, but not knowing the processes that had been followed or would be applied were they to be the subject of an allegation. Equally, decision making in respect of when a monk was allowed to return to Ampleforth was not understood. This has resulted in the production of an information leaflet and further discussion with the monks to this effect. Following the recent laying of criminal charges against one of their number, monks were proactively briefed, as part of the overall communication plan, to ensure their understanding of the circumstances. This willingness to learn from and develop their practice was evident in a discussion at the last safeguarding panel, which reflected on underlying principles of decisions made regarding returns to the Ampleforth site and how this could be developed to inform future practice. This willingness to act transparently, reflect on and learn from experience reflects best practice and was a consistent finding of this audit, also considered under Standard 8, below.

4.6 Standard 6 Robust Human Resource Management

Graded: Comprehensive Assurance

4.6.1 Safer recruitment expectations for lay staff are established by the Recruitment and Selection Policy, adherence to which is reported to each Safeguarding Committee meeting. It is positive that meetings consider the wider safer recruitment process, as opposed to simply covering DBS compliance; reports from the last year would indicate that processes are being adhered to. The auditor was also provided with sight of the DBS system used by the Abbey, this indicated that checks were in place for all monks, lay employees and Easter Triduum volunteers (three yearly re-checks are required for all). Checks for volunteers on the Lourdes pilgrimage are separately managed and timeliness can prove more problematic, due to the fixed dates involved. This resulted in a situation this year in which a medical volunteer was permitted to take part, despite a DBS not being received in time. This decision followed a risk assessment by the DoSW, supported by a reference from his current employer. While the decision making was defensible, the system should be designed to reduce the likelihood of similar circumstances occurring. It is noted that there will be expansion of the volunteer pool, with the re-opening of the public visitor centre in Alban Roe next year, and it may be that this presents an opportunity to bring all volunteer DBS checks together into one system.

4.6.2 The four parish based employees are subject to the same safer recruitment and training expectations as other Ampleforth Abbey employees. Under the terms of the current memoranda of understanding with the involved (arch)dioceses volunteers are the responsibility of the diocesan safeguarding teams although, as already noted in 4.1.10 above, this is subject to current review.

4.6.3 As is common in RLG, the discernment process for potential new community members is necessarily lengthy and would involve time spent living in and away from the community. This is underpinned by what is effectively a safer recruitment process, involving references and various assessments, with an enhanced DBS check completed prior to residence in postulancy. Monks would also be checked prior to returning to live at Ampleforth, whatever the reason for their living elsewhere (processes are established for those returning from Zimbabwe). The Abbot is well aware of monks where there have been previous safeguarding concerns and includes these within their testimonials of suitability; case audits furthermore indicate that monks withdrawn from ministry for safeguarding reasons

are not allowed to return to ministry or reside at the Abbey prior to all outstanding actions being resolved. The requirement for visiting priests to provide a current celebret is clearly stated on the Ampleforth Abbey website and reported to be strictly enforced in practice for all diocesan priests, including bishops and archbishops, with a log maintained to this effect.

4.6.4 As noted in paragraph 4.1.6 above, complaints and whistleblowing policies have been agreed and are publicly available on the Abbey's website. It was reported that both survivors and subjects of allegations are provided with a copy of the former policy at the start of their contact with the safeguarding team, this does require consistent recording within case records though. Learning from complaints is reported to trustees annually, although the only safeguarding complaint made during the audit period was recently received and the investigation in its early stages. As a consequence of learning from a diocesan safeguarding review report, the whistleblowing policy has recently been re-promoted to monks. Aside from the more minor points relating to DBS and celebrets noted above, the primary area of development for this standard that would be required to reach exemplary is ensuring that all policies and processes are actively quality assured, with appropriate stakeholder feedback, at the time of their updates.

4.7 Standard 7 Training and Support for Safeguarding

Graded: Comprehensive Assurance

4.7.1 Providing safeguarding training to all who live and work at Ampleforth Abbey is one of the broad areas for action under the safeguarding objective of the Abbey's five year strategy. Each successive annual action plan therefore includes a training element. A detailed training matrix covers all training expected of lay employees by role, including the requirement that all staff are required to complete safeguarding training on a two yearly basis. Initial training would ordinarily be provided on a one-on-one or small group basis by the DoSW on an employee's first day, or shortly thereafter; this individual approach is designed to create a personal relationship that will promote the reporting of any concerns. Acknowledgement of the Abbey's safeguarding history is included to provide background to current expectations. A range of role specific training, including annual input for trustees, has also been provided, together with bespoke input to address particular issues.

Examples provided included training in restorative practice, safer working practices and survivor awareness, while a whole staff refresher course was provided prior to the publication of the final IICSA report. Lourdes and Easter Triduum volunteers receive safeguarding training specific to their particular roles. A willingness to learn from and share with other church based safeguarding professionals has also been evident in invitations made to attend and deliver training to others.

4.7.2 All monks who are in active ministry are required to complete three yearly refresher training, although they have received considerably more bespoke input during the intervening periods, including a minimum of half a day a year during monastic Chapters; this negates any attendance issues as all are present. This is in addition to diocesan and other training that may be required of monks in external ministry. The DoSW has been proactive in securing external expertise for training, with a range of specialist agencies and experts having provided input. All monks returning to live at Ampleforth Abbey receive an individual safeguarding refresher from the DoSW.

4.7.3 Compliance by lay staff with initial and refresher training requirements is reported to the Safeguarding Committee and thence to the Board of Trustees, should there be any concerns. At the time of the audit all staff were within date. The fact that the auditor was presented with a number of examples of monks and lay staff raising appropriate safeguarding queries and concerns with the DoSW can be taken as providing some evidence of the effectiveness of training. Equally, discussions within reflective sessions with monks have indicated an increasing awareness of the broader context in which safeguarding sits. Work is, however, needed to develop formal evaluation processes for training delivered, both in terms of on the day feedback and to assess impact on practice in subsequent months. The regular staff development survey, that currently does not include a safeguarding element, would seem to be a potential vehicle for the latter.

4.8 Standard 8 Quality Assurance and Continuous Improvement

Graded: Exemplary

4.8.1 Throughout the audit process Ampleforth Abbey has demonstrated a clear drive to check and challenge its own processes, learn from its experiences and those of others, and to use this to improve what it does. This is evident in the

strategic management of the overall Abbey, the work of the DoSW and practice in respect of individual cases. External scrutiny has been sought through seeking Praesidium⁸ accreditation, CSSA baseline and casework audits, peer audits and a LADO Lessons Learned review. A broader data protection review was also used to inform safeguarding practice. Findings result in action, with the action plan for the CSSA case work audit monitored by the Safeguarding Committee and recently signed off as complete. Opportunities to learn from others are taken, with a recent CSSA safeguarding review of a diocese resulting in changes to the Abbot's Council meetings. As noted under Standard 3 there is further scope learning from individual survivors, while feedback from all stakeholders should be explicitly used to inform and influence the development of policies, procedures and plans.

4.8.2 There is a clear willingness to reflect on and learn from individual cases. Management oversight obviously allows for challenge and hypothesising. The Safeguarding Panel is a significant strength in that it clearly does not simply rubber stamp the actions of case workers, but actively discusses and challenges, often providing alternative options. Members are actively involved between meetings and provide feedback to meetings that they are not able to attend. The DoSW and Panel members have a strong understanding of the characteristics of the cases that they tend to manage – non-recent allegations involving College pupils, monks who have been off-site for lengthy periods, no prosecution or caution, not DBS barred, and increasingly frail. This understanding, combined with experience of managing cases over recent years has allowed for the development of principles for decision making and increasing confidence as to when a case can be closed and a monk allowed to return to Ampleforth (or not). All monastic files were reviewed by the CEO in 2019/20 in order to identify any allegations or information indicative of a safeguarding concern that had not been acted on. This provides a degree of confidence for the future that only new allegations will require a response.

⁸ Praesidium provide a standardised and objective process of accreditation to organisations as a means of enabling them to demonstrate their commitment to preventing abuse (source: [HOME \(praesidiumaccreditation.com\)](http://praesidiumaccreditation.com)).

4.8.3 The DoSW provides a detailed annual safeguarding report to trustees which provides the hinge between successive annual action plans. Future versions of this report would benefit from the inclusion of a quality assurance and learning section in order to draw together activity in this respect and identify any further themes. While acknowledging the need for considerable sensitivity in terms of its external communications about safeguarding, there would be benefit in considering how material within the annual report about current safeguarding practice (and indeed the outcome of this audit) can be communicated to stakeholders, in order to provide accountability and transparency.

5. Overview of Case Audits

5.1 The audit of 12 safeguarding cases in 2022 returned an even split of six graded as being good and six requiring improvement to be good. The three cases re-audited this year each increased their overall grading by one level, meaning that one was judged to be outstanding and the remaining two good.

5.2 Person centred practice was the strongest area of practice both years. This was evident in work with both survivors and subjects of complaints. Examples included the offer and provision of therapeutic support to a complainant, despite the allegation still being the subject of a police investigation and the survivor having had no direct contact with the Abbey. Considerable effort was seen to be made to develop effective working relationships with the subjects of safeguarding plans, notwithstanding the geographical distances involved. The recent recognition of one subject's neuro-diversity has resulted in a re-evaluation of both how his plan is worded and the discussion of likely longer term approaches to his management with him. The one initial response to an allegation seen within the case audits was also graded as being outstanding, with each element of expected practice seen to be present.

6. Summary of overall findings

6.1 The history of abuse at Ampleforth Abbey is well known and has been subject to public scrutiny through criminal justice processes and public inquiry. Any assessment of the safeguarding arrangements for Ampleforth Abbey will therefore

have to determine efficacy of both the response to the past and current arrangements for keeping all who may have contact with the Abbey safe. In assessing both facets of practice, the foregoing review has found no areas of unsafe practice and has furthermore concluded that the Abbey has provided comprehensive assurance of its meeting of the Catholic Church's safeguarding standards.

6.2 The governance and policy infrastructure provides a sound framework for the management of safeguarding risks. Leaders provide a unified and consistent message, which is beginning to effect a change in culture amongst monks and lay staff in which there is an openness to explore and learn, while ensuring that safeguarding underpins all activity. Practical safeguarding arrangements, for managing public facing activities, safer recruitment and training were found to be in place. Standard 8 (Quality Assurance and Continuous Improvement) is a significant strength. Improvements are driven by the five year strategy and underlying annual action plan, while opportunities to learn from their own practice and that of others are sought out.

6.3 The reality remains though that Ampleforth Abbey continues to receive disclosures from survivors of abuse. The time and courage required to come forward renders it likely that this will continue to be the case for years to come. Case audits have shown that survivors will be listened to and treated respectfully, with services provided to meet their needs and apologies offered. This practice needs to continue, with opportunities to learn from survivor's experiences taken. More recent allegations were seen to have been responded to in accordance with expectations. Monks who have been the subject of allegations are robustly managed by the safeguarding assessors with appropriate oversight from the DoSW and Safeguarding Panel.

6.4 A number of recommendations have been noted throughout this report and are summarised below for ease of reference. Given the assessed strength of practice the majority are relatively minor and simply what would be required to achieve an exemplary standard, they are therefore not in any order of priority. Actions already underway, or included within the Abbey's annual action plan, are not subject to further recommendations; although some (notably the development of a communications plan) would have otherwise been included. Attention is also drawn to the areas for development included within the case audits (Appendix B).

7. Recommendations

1. Terms of reference for the Monastery Safeguarding Meeting should be established, including expectations for weeks it does not meet;
2. When policies and procedures are updated the opportunity should be taken to quality assure their effectiveness, including through feedback from stakeholders;
3. The terms of reference for the Survivor Working Group should be reviewed to include reporting arrangements and to ensure that the stated frequency of meetings reflects need;
4. Mechanisms for receiving feedback from individual survivors should be reviewed to ensure that opportunities are not missed;
5. The safeguarding adults policy and procedure should be updated to include a specific lower level concerns section, the safeguarding children procedure should be reviewed to ensure that it is congruent with practice (see the lower level concerns audit for detail);
6. Ensure that it is recorded within case records that survivors and subjects of allegations have been provided with copies of/ access to the privacy notice, complaints policy etc.;
7. The complaints policy is reviewed to include reference to final recourse to CSSA for safeguarding complaints, with consideration given to extending the time limit for safeguarding related complaints and how complaints against the Abbot would be addressed;
8. Routine on-the-day evaluation of training should be introduced, alongside mechanisms to assess longer term impact on practice and any other developmental needs; and
9. The annual safeguarding report to trustees should include a section summarising quality assurance and learning throughout the year, including from lower level concerns. Consideration should be given to how the report can be used to provide assurance to stakeholders.

8. Arrangements for Follow-up

8.1 Ampleforth Abbey should provide CSSA with evidence of their response to the above recommendations, within three months, and on the completion of any subsequent action plan. A follow up audit will be undertaken in three years (during 2026).

9. Appendices

Appendix A: Evidence submitted by Ampleforth Abbey

- 001 Self-assessment
- 002 Safeguarding Team Out of Hours Rota
- 003 Safeguarding Team Poster
- 004 Supervision Policy
- 005 Abbot's Thought Piece on Safeguarding October 2022
- 006 Adult Regulated Activity briefing by Carolyn Eyre 2021
- 007 Safeguarding Panel Papers February 2023
- 008 Complaints Annual Report
- 009 Approach to CSSA for collaboration on survivor reference group
- 010 Briefing meeting with Safeguarding Panel Chair and interim sample e-mail correspondence
- 011 Charity Commission Serious Incident Reports ("RSIs")
- 012 Commissioning of independent (external) officer to investigate complaint
- 013 Trustees sample correspondence on national and church safeguarding issues
- 014 Communications Plan Development session with Catholic Voices (slides)
- 015 Community Guidance - AAT procedures for managing allegations
- 016 Complaints Policy and Procedure
- 017 Composite Safeguarding Reports to Trust Board July 2022 - May 2023
- 018 Board Minutes July 2022 - May 2023 (safeguarding excerpts)
- 019 Consultation and visits with Monastery Matron (sample correspondence)
- 020 Conventual Chapter Safeguarding Training and Discussions December 2022 & March 2023
- 021 CSSA Casework Audit Report May 2022
- 022 CSSA Casework Audit Action Plan April 2023
- 023 Data Protection Review Report
- 024 Data Protection Review Action Plan
- 025 DBS referral (example referral)
- 026 Executive Team weekly meeting agenda (sample agenda)
- 027 Holiday Cover - Arrangements in Place for Safeguarding Personnel to cover (sample arrangements)
- 028 Triduum Safeguarding Protocols - Missing Child Procedure
- 029 How to handle a call from a victim of abuse - info sheet
- 030 IICSA Comms Plan
- 031 Leeds Diocese Retreats Safeguarding Journey Briefing March 2023 (school group visits)

- 032 Lessons Learned From Previous Allegations Safeguarding Committee Discussion
June 2022
- 033 Lourdes Safeguarding Policy and Procedures
- 034 Lourdes Safeguarding Training
- 035 DBS Training Feb 2021 Carolyn Eyre
- 036 Monastery Safeguarding Update Meeting (combined notes from May - July 2023)
- 037 Notification to trustees of high profile issues (sample correspondence)
- 038 Notifications and consultations with statutory agencies including LADO and Police
(sample correspondence)
- 039 Notifications to CSSA of high profile issues (sample correspondence)
- 040 Peer Safeguarding Casework Audit Terms of Reference June 2023
- 041 Praesidium Accreditation February 2023
- 042 Praesidium Annual Assessment Summary November 2022
- 043 Privacy policy – monastic
- 044 Privacy policy – staff
- 045 Procedure for safety checking of visiting priests (system reviewed in October 2022)
- 046 Protocol for Responding to Contact from Victims and Survivors of Non-Current
Abuse
- 047 Restorative Practice Training for Survivor Working Group
- 048 Review of Safeguarding Structures Following Elliot Review Board Paper July 2021
- 049 Follow up Review of safeguarding deliberative structures Board paper November
2022
- 050 Minutes of meetings with DBS (sample minutes)
- 051 Monastic Supporter Role Description
- 052 Safeguarding Adults at Risk Policy and Procedures July 2023
- 053 Safeguarding and Protection of Children Policy and Procedures July 2023
- 055 Safeguarding Advice to Retreats
- 056 Safeguarding Awareness Training Presentation – Students Monastic Experience
Week Summer 2022
- 057 Safeguarding Committee Papers June 2022
- 058 Safeguarding Committee Papers October 2022
- 059 Safeguarding Committee Papers February 2023
- 060 Safeguarding Committee Papers April 2023
- 061 Safeguarding Panel Papers June 2022
- 062 Safeguarding Panel Papers September 2022
- 063 Safeguarding Panel Papers December 2022
- 064 Safeguarding Panel Papers April 2023
- 065 Safeguarding Risks Register Papers to Safeguarding Committee
- 066 Safer Recruitment Training for Executive
- 067 Survive York Contract

- 068 Survivor Awareness Training (Ampleforth Staff ppt)
- 069 Survivor Engagement - sample correspondence and apologies
- 070 Survivor Liaison with Insurers
- 071 Survivor Log AAT PiB Insurers historical and current claims (redacted)
- 072 Survivor Prayer Card
- 073 Survivor Awareness Training (Monastic Community ppt)
- 074 Training Matrix 2023
- 075 Triduum Safeguarding Training
- 076 Triduum Safeguarding Protocols - Prudence Codes
- 077 Triduum Safeguarding Protocols - Volunteer Declaration
- 078 Safeguarding Culture Assessment Framework
- 079 Whistleblowing Policy
- 080 Monastic Community Safeguarding Training record 2021 - 2023
- 081 Provision of legal advice to respondent (example)
- 082 Reflective sessions for community (notes from series of 3 reflective sessions)
- 083 Safeguarding advice sought by monks from Director of Safeguarding (sample correspondence)
- 084 Safeguarding casework and Incident updates extracted from Safeguarding Committee papers June 2022, October 2022, February 2023, April 2023
- 085 Safeguarding dashboard extract of recording culture July 2023 Safeguarding Committee Paper
- 086 Safeguarding Dashboard reported to each Safeguarding Committee (example)
- 087 Safeguarding Panel Training and Development Session
- 088 Safeguarding Training to staff and monastic community (example from Staff Briefing 10 October 2022)
- 089 Survive York Example Referral
- 090 Survivor Engagement Log 2023
- 091 Survivor Working Group May 2023 sample papers
- 092 Survivor Working Group May 2023 sample minutes
- 093 Trustee Safeguarding Refresh Training September 2022
- 094 Safeguarding Advice to Summer Lettings Summary to Safeguarding Committee October 2022
- 095 Strategic Plan "Choosing a future together"
- 096 Strategic Plan action plan 2022
- 097 Strategic Plan action plan 2023
- 098 Communications Plan Development session with Catholic Voices (notes)
- 099 Safeguarding Committee (and Panel) Terms of Reference
- 100 Retreat Centre Proposal
- 101 Training report for staff from Breathe HR
- 102 Safeguarding Annual Report

- 103 Safeguarding Commitment
- 104 Commitment to Survivors
- 105 KCSIE Need to Know update AAT Nov 2022 training slides
- 106 Survivor Working Group Terms of Reference
- 107 Agreed redaction of information across deliberative structures
- 108 Monastery Customary
- 109 Abbot's Weekly Conference to the Monastic Community (examples relating to safeguarding)
- 110 Lessons learned from IICSA
- 111 Lessons learned from CSSA Diocesan Audit
- 112 Safeguarding Information Sharing Protocol
- 113 Lourdes Pilgrimage Safeguarding Review
- 114 Staff and Volunteer Safeguarding Incident or Concern Opening or Closure Procedure
- 115 Redacted Staff Low Level Concern
- 116 Log of Safeguarding Incidents and low level concerns from 2021 updated August 2023 REDACTED
- 117 Escalation Process (draft)
- 118 Pontifical Commission Safeguarding Framework Consultation Response draft for SGC
- 119 Sample Board Approval Panel or Committee Member Appointment
- 120 Allegations by Decade as reported to insurers
- 121 Recruitment and Selection Policy

Appendix B: Case audits

CASE	INITIAL RESPONSE	ASSESSMENT	PLAN/REVIEW	MANAGEMENT OVERVIEW/DECISION MAKING	PERSON CENTRED PRACTICE	RECORDING	OVERALL
AAT22-2	n/a	Good	Good	Good	Good	Good	Good
AAT22-3	Outstanding	Outstanding	Good	Good	Outstanding	Good	Outstanding
AAT22-6	n/a	Good	Good	Good	Outstanding	Good	Good



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