

# COUNCIL FOR SOCIAL WITNESS

Convener: Rev Dr T J McCORMICK  
Secretary: Mr LINDSAY CONWAY, OBE

## EXECUTIVE SUMMARY

1. **The Council Report** addresses the general work of Council for Social Witness (CSW) (Strategic Objectives and endeavours to communicate its work to its members, the wider Church and community).

2. **Disability Services Committee** reports on the Day, Residential, Supported Housing and Respite Care in four locations, along with the ongoing and developing work of Kinghan Church for the Deaf. Inspiration from the 'Christmas Cracker' project is shared and the Committee notes the ongoing discussions in relation to The Peacehaven Trust in Greystones.

3. **Older People Services Committee** reports on the extensive work carried out in Residential and Nursing Homes in 9 locations. It also highlights the consistently high quality of residential care provided by the Presbyterian Church in Ireland (PCI) which is an acknowledged witness within the Health and Social Care world and wider social care sector.

4. **Taking Care Committee** reports on a comprehensive programme of training for leaders, designated persons, ministers, and Taking Care trainers. The Committee is bringing the Adult Safeguarding Policy and Guidelines to this year's Assembly for approval.

5. **Specialist Services Committee** reports on work in 3 sheltered housing locations with those with addictions, and/or offending behaviours. Initiatives to address issues such as Suicide Awareness and Domestic Abuse are being developed in partnership with Flourish and the Safe Church initiative.

## MAIN COUNCIL REPORT

6. It is difficult to illustrate the diversity and challenges of Social Witness in a report to the General Assembly. It always appears inadequate, given the size of the work and the breadth of the services. Any attempt to keep the wider Church well-informed will always fall short of telling the whole story. The Presbyterian Church in Ireland is recognised for its provision of a first-class care service. The Council is regularly informed of reports from RQIA, highlighting the dedication, professionalism and personal commitment of so many CSW staff.

7. The Council is actively seeking to be true to that unique aspect of our call to action – what would God have us do in a Christ-like way? That's why the Church is different in what we do and how we do it, not special, simply different.

8. The Council strives to give the best possible care, to work hard at being a good employer, to cope with inadequate funds from Trusts, to encourage involvement from families, and to nurture good relationships with other agencies.

9. The Long Service and Recognition Awards event on 8th December 2016 was another celebration of long service and dedication of staff and volunteers – a recognition of Social Witness both in congregations and the Council. For example, the Staff Commitment and Dedication Award was awarded to a member of staff with 20 years' service, who was described as having "the patience of a saint, who promoted the independence of residents and always went the extra mile." The Involvement Award went to a Youth Leader who displayed confidence beyond her 22 years – "Living and Sharing God's work in the schools and wider community" and the Unsung Hero Award went to a volunteer in one of CSW homes, for many years – going in and out twice a week – sharing his interest in music and drama. In total there were 13 awards recognising the work and witness of staff and volunteers – the people who make it all happen.

10. The Council has actively pursued different ways to engage with Council and Committee members. Different days and times have been tried with little or no noticeable change in attendance. A questionnaire has now gone to all Council and Committee members, seeking their feedback.

11. The Council will commence the next Strategic Planning Exercise for 2018 – 2023 at the 2017 October Council meeting. This will afford an opportunity for Council and Committees, Staff and Service Users to engage with and directly influence the work and witness of Council activities.

12. Council Conveners and Staff are grateful for the numerous opportunities they have in sharing the work and witness of the Council with congregations.

13. The uncertainty at Stormont, and the fact that no budgets are being set are making the whole Social Care Sector nervous and many voluntary, community and faith groups are feeling very vulnerable.

14. The routine work of Council within Social Care is staff intensive. Training is the key to good practice for all staff. As well as mandatory training there is a wide range of training being delivered – Induction, together with a number of Master Classes in a range of topics – Death and Dying, Nutrition, Diabetes.

15. Close working links have been developed with the Council for Public Affairs, having recently worked together on the Church's response to a Safeguarding Board for Northern Ireland consultation, in particular addressing guidelines on Spiritual Abuse, Bullying, Disability Issues and E-Safety.

16. The Council upheld a resolution from the Older People Services Committee that the new home in Garvagh should be called 'Trinity' and that particular areas will retain the names of Ard Cluan and York.

17. Welfare Reform is impacting thousands of claimants as the reform reaches full implementation. Both the Council for Social Witness and the Council for Public Affairs remain connected with the changes in benefits through the Irish Council of Churches (ICC).

18. A number of Council Units are rented from Housing Associations. Both Council and Committees have had occasions to discuss the poor level of service in relation to maintenance and repairs. The Council congratulates Fold and Helm Housing Associations, which have now merged and are known as Radius Housing.

19. The Flourish Project – "A Churches Initiative on Suicide" continues to assist and equip those working with the aftermath of suicide. It is currently under review by the Health Promotion Agency.

20. The Convener and Secretary are members of the Priorities Committee and have been engaged in setting the denominational priorities, which will be presented at this year's General Assembly.

21. The Council hosted an event on the subject of "Dementia and Faith", a conversation on how dementia is impacting church life. Professor June Andrews in her keynote address challenged the churches on how we should be more accepting for those who have dementia.

22. To enable the Council to follow the Gospel imperatives of "loving one another" (John 13:34), to "love thy neighbour" (Luke 10:27), to "look after the orphans and widows" (James 1:27) – requires the support of both Church and state. Equally a church as a caring community must be resourced from both Council and state. The Good Samaritan offering to settle the final account with the Innkeeper (Luke 10:35), illustrates sustainability of care. The story of the Good Samaritan is not about one good deed, but sustaining the care.

**23. The Strategic Plan of the Council for Social Witness, presented as an Appendix to The General Assembly (2015), has three vital applications:**

- (a) to enable the Council to stay focused on the work and responsibilities remitted to it by the General Assembly;
- (b) to give a structured account of the work of the Council to the General Assembly;
- (c) to relate to statutory agencies, regulatory authorities, service-users and others, the particular focus and ethos of the Church's work in this particular area.

Thus the work of the Council and its Committees is presented within the framework of The Strategic Plan.

**24. Strategic Objective:** *"The Council shall deliver an effective Social Care service for the Presbyterian Church in Ireland and to the wider community by the provision of Residential, Nursing, Supported Housing, Respite and Day Care and Community Based Programmes."*

25. To fulfil the remit given by The General Assembly, and the responsibilities of Social Witness to all service users and staff, Council staff have ongoing interaction with a diverse range of regulatory and statutory bodies and the wider voluntary sector. In particular: Regulation and Quality Improvement Authority (RQIA); Northern Ireland Social Care Council (NISCC); Criminal Justice Inspectorate (CJI); Probation Board Northern Ireland (PBNI); Supporting People Initiative (NI Housing Executive); and Health and Social Care Trusts, and partner housing associations.

26. Throughout the year Inspection Reports have commended the standard and range of care that is provided and several have had no recommendations for further action. This standard of care is appreciated by service users and their families and is respected by other service providers, one evidence of which is the request to take over the Peacehaven Trust in Greystones.

27. In the Homes and Units a range of opportunities and resources are provided for ministry and spiritual nourishment, including daily devotional times, weekly worship, Bible study, and distribution of devotional books and literature. This aspect of ministry is appreciated by residents, service users, tenants, their relatives, and staff.

28. The Council continues to value the professional skill, diligent commitment and human tenderness of staff. This is foundational to the care that is offered. In addition to regular training and professional development, the Social Witness Awards Ceremony recognising Long Service and Outstanding Contributions is an inspiration to all.

29. The work of the Council also relies on the faithful support of a vast number of volunteers: the Local Support Committees, “Friends of” groups, and volunteers in the “Getting on Board” programme. CSW continues to develop the role of volunteers in CSW projects and in an increasing number of both familiar and innovative projects initiated by congregations, groups and individuals. This will engender further engagement and deepen the sense of partnership throughout the Church.

30. A major piece of work has been the completion of the Congregational Guidelines for Adult Safeguarding. With the benefit of the help of leading professionals in associated bodies, a robust policy and valuable resource is being delivered (see Appendix 1). In the next year this will be rolled out across the Church.

31. The Council benefited from a visit from the Commissioner for Older People, addressing concerns about exploitation, scams and a ‘suckers’ list’. This is an issue to be addressed further in the coming year. The issues of Domestic Violence and Human Trafficking have also been considered with the appropriate committees developing information and resources. The hosting of a conference titled ‘Faith and Dementia’ with others in the Faith and Social Work sectors was both informative and timely in view of increased awareness of the issues dementia presents for individuals, families, churches and society at large.

32. All of this work is heavily dependent upon the professional standing and immeasurable commitment of Lindsay Conway, Linda Wray, Deborah Webster, Denise Keegan, Laura Kelly and David Hooks who guide, develop and enhance all of CSW’s work. The day to day functioning of the Council is facilitated by Julie Sykes (Office Manager), Gail Gamble, Wilma Steele, Jennie Telford, and Cathy Mullin; to each Council expresses sincere thanks.

33. **Strategic Objective:** *“Business and Finance Panel – will monitor the Financial Management, Personnel Functions, Information Technology and Property Management of the Council supported by the Finance and Staffing Commission.”*

34. The financial climate in which the Council operates remains challenging. The Business and Finance Panel, in monitoring financial, property and personnel issues has kept the realities of current budgets and the necessities of future provision before CSW.

35. Considerable time has been given to the finance and staffing implications of relocating Ard Cluan and York House to Trinity House in Garvagh. In making progress the Council is aware that the transition will impact the budget for at least two further years.

36. The endeavours to maintain budgetary control are further complicated by a lack of clarity in future funding arrangements by some external bodies and agencies. The uncertainty of the future payment of the Special Needs Management Allowance is ongoing and the extension of the National Living Wage has brought additional pressures on the finances.

37. **Strategic Objective:** *“The Council shall effectively communicate to its members, the wider Church and community the work, services and achievements of the Council.”*

38. The Council continues to work towards a revitalised communications policy which includes newssheets and updates, website, and prayer bulletins. The Council believes that the investment of staff time and finance in such a programme will expand the awareness of the work of CSW, encourage prayer support and stimulate engagement and support.

39. While CSW has neither the resources nor expertise to address every situation CSW is developing a signposting initiative to give accessible information to members of PCI, and be a help to the whole Church and a benefit to many individuals.

40. During this year the Council has had helpful engagement with other PCI Councils and Departments and appreciates the developing sense of collaboration with, in particular, the Council for Congregational Life and Witness, the Council for Public Affairs, Communications, Information Technology, Finance and Personnel Departments, the Assembly Buildings Management Team and the General Secretary’s Department.

41. A comment of John Stott in ‘Christian Counter Culture’ (IVP 1978 p.118): *“Do-gooders’ are despised in today’s world, and, to be sure, if philanthropy is self-conscious and patronising, it is not what Jesus meant by ‘doing good’. The point he is making is that true love is not sentiment so much as service - practical, humble, sacrificial service. As Dostoyevsky put it elsewhere, ‘Love in action is much more terrible than in dreams.’”*

42. **Strategic Objective:** *“Disability Services Committee – will deliver a high standard of Day, Residential, Supported Housing and Respite Care in all of our Units. Oversee the Ministry of the Kinghan Church and wider Ministry to the Deaf. Contribute to the Disability, Health and Wellbeing work of the wider Church in partnership with the Council for Congregational Life and Witness.”*

- (a) By expanding the ‘Christmas Cracker’ respite initiative throughout PCI congregations. (49)
- (b) By supporting the ongoing ministry of the Kinghan Church. (50)
- (c) By promoting deaf awareness throughout the Church. (51)
- (d) By exploring opportunities to establish outreach to the Deaf Community. (50)
- (e) By the ongoing development of our ministry with the deaf community. (50)
- (f) By promoting Lawnfield House as an all-year Respite Service. (47)
- (g) By exploring opportunities for development at the Aaron House site. (45, 46)
- (h) By encouraging the integration of people with Additional Needs in organisations and congregational life. Raise awareness of Disability issues throughout PCI including carers/ issues. (56)

**Residential Care – for those with Learning Disability**

- Aaron House, Dundonald – 16 beds

**Residential Respite Care – for those with a Learning Disability; Physical Disability, Sensory Impairment and Older People**

- Lawnfield House, Newcastle – 20 beds
- Aaron House, Dundonald – 2 beds

**Day Care – for those with Learning Disability**

- Aaron House – 9 service users

**Supported Living**

- Willow Brook, Coleraine (learning disability) – 9
- Topley Terrace, Coleraine (physical disability)

**DISABILITY SERVICES COMMITTEE**

43. The Committee received very positive and encouraging reports from Aaron House, Lawnfield House, Willow Brook/Topley Court and the Kinghan Church, over the past year.

44. The Committee has now met in all the CSW facilities under their care.

45. Aaron House continues to provide a high standard of Residential, Day and Respite care. It has been a difficult year for everyone connected with Aaron House due to the passing of two residents. The Committee took great encouragement to hear of the appreciation of the families concerned for the care given to their loved ones by the staff in the Home. The Committee welcomes the appointment of Isabel Harper as Home Manager.

46. One of the service-users in Day Care at Aaron House had his art exhibited at Lisburn Civic Centre. The Lord and Lady Mayoress had visited Aaron House at Christmas and were impressed with his work, resulting in the Art Exhibition.

47. Occupancy levels in Lawnfield House continue to improve but more still needs to be done to maximise uptake of this valuable resource in order to make the Home more financially secure. Recent articles in both the *Herald* and *Wider World* have helped to promote the work and improve the potential take-up of places. Lawnfield, with a small core group of permanent residents and as a specialised centre for Respite and Short-Time Care, together with Holiday placements, is very attractive to the wider care sector. Permission was given for the re-registration of the bungalow for “Supported Living”.

48. Willow Brook and Topley Terrace continue to provide a high standard of service, supporting young adults living in their own homes. The Friends of Willow Brook were presented with the Director’s Award for services to Willow Brook at this year’s CSW Recognition Awards ceremony. The Moderator visited and conducted a Harvest Services for Willow Brook residents, friends and family.

49. ‘Christmas Cracker’ was run four times in three locations this year – twice in McQuiston Memorial, once in Bangor West and once in Hillsborough. The Disability Services Committee identified a number of possible locations to which the initiative might be extended in the next couple of years and is taking steps to make contact. Hillsborough congregation is planning a pilot “Summer Cracker” in 2017.

50. The Kinghan Church continues to provide ministry to the deaf community in Belfast and Ballykelly. The Committee recognised the Ministry of the Rev Glen Jordan and thanked him for his six years of Ministry in Kinghan. Mr Jordan has been installed as Minister in the congregations of Bellaghy and Knockloughrim.

51. The Council has agreed to the formation of a Task Group, drawn from Council and South Belfast Presbytery, to totally review the Church's Ministry to the deaf.

52. The Committee had written to the Planning Group regarding a couple of matters about the plans for the 2017 Residential Assembly. These include: the provision of signing for deaf people during the main sessions; and, with the focus on making disciples of all people, the inclusion of some thought about how to disciple people with learning/intellectual disabilities during the seminars. Suggestions were submitted for a couple of speakers who could make a very positive contribution to such seminars.

53. The Committee discussed the inclusion of the Special Education sector in the work of the State Education Committee of the Council for Public Affairs and agreed that it be raised with its Convener.

54. The value of deputation about the work of the DSC was discussed and it was felt that 'roadshow' type events should be considered by the Council incorporating a number of areas of its work as a way of reaching as many people as possible across the church.

55. Progress regarding Peacehaven continues to be slower than expected due to legal matters. It is now hoped that the handover can be fully completed later in 2017. The Council is in the process of registering with the Health Information and Quality Authority (ROI equivalent of RQIA).

56. Discussion took place about the need to find ways of implementing the Committee's Strategic Objective regarding equipping congregations for integrating people with additional needs, and ministry to people with learning disabilities. Collaboration and cross-working with the Council Congregational Life and Witness will assist in this important objective.

57. **Strategic Objective:** *"Older People Services Committee – will deliver a high standard of day, residential, nursing and respite care to all our users and campaign and raise awareness on behalf of older people issues and services. Support the development of the Pastoral Support of those requiring support in their own homes."*

- (a) To continue to consider the relocation of Ard Cluan House and York House. (68-69)
- (b) To continue to challenge Government Policy in relation to 'Transforming Your Care' pertaining to older people. (63, 66, 67)
- (c) To explore opportunities to provide Home Care Services.
- (d) To train all staff and volunteers in dementia awareness and to develop awareness in the wider Church on dementia. (59)
- (e) To attain an overall occupancy rate of 95%. (62)
- (f) To increase the number of volunteers in the Homes to 250.
- (g) To provide respite/day care/holiday accommodation for an additional 50 residents.
- (h) To establish Activities Coordinators in each of the Residential Homes.

**Residential Care – for older people**

- Adelaide House, Belfast – 45 Beds
- Ard Cluan House, Londonderry – 13 Beds
- Corkey House, Belfast – 35 Beds

- River House, Newcastle – 29 Beds
- Sunnyside House, Bangor – 45 Beds
- York House, Portrush – 32 Beds
- Nursing Care – for Older People
- Harold McCauley House, Omagh – 32 Beds

**Supported Housing – Older People**

- St Andrew Bungalows, Mallusk
- Tritonville Close, Dublin

## **OLDER PEOPLE SERVICES COMMITTEE**

58. The Council of Social Witness continues to provide residential and nursing care for older people in its various homes in Northern Ireland and in Dublin. At present Older People Services homes provide 229 beds of which 50 are for residents with a diagnosis of Dementia. During the course of 2016 there were 295 “permanent” residents, of whom 70 were privately funded, and 225 “care managed”. In addition there were 63 “respite” residents, of whom 18 were privately funded and 45 “care managed.” Among the group of residents were 12 centenarians. Harold McCauley (Nursing Home) in Omagh will be celebrating its twenty fifth anniversary in December 2017.

59. Ongoing staff training is a regular part of the professional programme, and the Christian ethos is vital in what is an important part of the Church’s mission to older people.

60. Recent inspection reports from the Regulation Quality and Improvement Authority (RQIA) have been most encouraging and it is obvious that this ministry to older people is carried out by a dedicated and willing staff in a thoroughly professional manner in all locations.

61. The Moderator of the General Assembly, Rt Rev Dr Frank Sellar, and Mrs Sellar, have visited most of the CSW Units during the year. The visits were welcomed by residents and staff alike, who took great encouragement from the Moderator.

62. Homes have reached their targets in relation to 95% occupancy, resulting in a more encouraging financial footing.

63. Healthcare and its cost, and not least the cost of care of an increasingly older population, is often in the news. At a time when some residential/nursing homes have had to close, the Presbyterian Church in Ireland continues to provide residential and nursing care for older people in its various homes in Northern Ireland and in Dublin. Recent reports from RQIA of inspections of CSW Homes have included very few recommendations and no requirements, and it is obvious that this ministry to older people is carried out by a dedicated and willing staff in a thoroughly professional manner. The Committee welcomed the 4% increase in fees in relation to Residential and Health Care.

64. The “Caring for our Older Members” event at the General Assembly 2016 had been well received and greatly appreciated by those who were present. It was also noted that the Assembly minutes solemnly record that the Moderator was presented with a “tiddlemuff” by Mr Conway.



65. The “twiddlemuff” is a clear example of the ability of our Church to respond in a practical way. An initiative which started with the 3C’s Craft, Chat and Coffee, group in West Church Bangor, has spread, mainly through Presbyterian Women in the provision of “twiddlemuffs” to homes and hospitals.

66. Eighty copies of a questionnaire distributed at the Assembly were returned. From these it emerged that throughout PCI there are indeed many organisations and gatherings at congregational level that seek to care variously for the social, pastoral and devotional needs of older members, and there are also teams that visit older members at home. Quite a few congregations have members involved in visitation or the provision of worship services in local residential or nursing homes.

67. The Dementia Garden at Corkey House is now complete, enhancing and improving the quality of life for residents. At the NI Amenity Council Awards Ceremony in Armagh, Sunnyside House came top in the Residential Home category in the South Eastern Health and Social Care Trust Region and River House was runner-up in the same category. Ard Cluan House and Adelaide House received commendations. Applications are now being submitted for 2017.

68. The relocation of Ard Cluan House in Londonderry and of York House in Portrush was a stated strategic objective of the Board of Social Witness since 2007. These have been wonderful Homes for the residents in terms of care and community, but in an age of increasing regulation and ever more stringent requirements for Health and Safety, they are fast becoming unfit for purpose. For reasons of age and size and configuration they have been run on a deficit, something which was long since recognised to be unsustainable.

69. The Older People Services Committee requested that the Council for Social Witness proceed with the purchase of the Garvagh Care Home to replace and relocate York House and Ard Cluan.

70. The Council purchased and took possession of the 67-bedded nursing home at Garvagh in September and is occupied with the process of reconfiguring it as a residential home with every room en suite and with a dedicated dementia wing. Other changes to the layout are planned to allow for communal areas and a suitable venue for worship services.

71. There was a good response to the competition to suggest a name for the new home. Much thought had gone into the suggestions, drawing from local townlands, place-names and Scripture. The Committee agreed on the name ‘Trinity House’, both symbolic of the coming together of three homes and giving the home a clear Christian identity. The names of Ard Cluan and York will be retained within Trinity House, giving the home a link with our history.

72. The Council was more than aware that the Ard Cluan residents, staff and residents’ relatives were less than happy at the prospect of having to travel to Garvagh, particularly in winter. This resulted in the Presbytery of Derry and Donegal calling a Special Meeting to discuss the situation. At this meeting the Secretary and Finance Manager, the Residential and Supported Services Manager and the Convener of Older People Services were present.

73. Presbytery and the Ard Cluan Local Support Committee have brought some legal issues to the attention of Council; these are currently being addressed.

74. The final design and specification of the new home has now been agreed and the final tender accepted, with a provisional completion date of September 2017.

75. The entire process of this relocation has involved and continues to involve the Assembly Buildings staff in much additional work; but they have continued to engage with all parties and with every aspect of the task with their accustomed professionalism, diligence, compassion and Christian faith. The Committee sought God's guidance for the best possible outcome for all concerned in this context as well as in all the work of Older People Services in its various Homes.

JOHN SEAWRIGHT, Convener

**76. Strategic Objective:** *“Taking Care Committee (The Safeguarding Programme of the Presbyterian Church in Ireland) – creating a safe environment for all our members, users, volunteers and staff.”*

- (a) To provide training for those working with or in contact with children and adults at risk.
- (b) To prepare for Access (NI) applications going online and the portability scheme. (86)
- (c) To review current policies and devise relevant responses to Safeguarding issues.
- (d) Organise conferences and seminars in conjunction with the Council for Congregational Life and Witness.
- (e) To raise awareness of Child Protection Issues.
- (f) To develop a training programme for Kirk Sessions. (82)
- (g) To appoint a network of Taking Care Ambassadors.
- (h) To develop a Taking Care Sunday strategy.
- (i) To develop a working relationship with our Public Protection partners.
- (j) To develop a Safeguarding strategy for adults at risk of harm, who attend our congregations and participate in activities. (89, 90)
- (k) To continue to build relationships with other faith and voluntary groups. (88)
- (l) To raise awareness of Human Trafficking and Domestic/ Sexual Violence.

## TAKING CARE COMMITTEE

77. The Committee acknowledges that the child protection programme (Taking Care) for PCI has been built up over 20 years on a firm foundation of guidelines, policies and practices. There is constant monitoring and amendment to all aspects of the contents and regular updating of information and its methods of delivery.

78. The Taking Care programme requires that Leaders and Staff are always vigilant and constantly striving for best practice at all levels of congregational life and witness. The next development is safeguarding of all adults who are at risk of harm, abuse or exploitation within the members and users of congregations. Guidelines have been compiled and training on all aspects of these wide-ranging

topics will be required.

79. Foundation Training events are arranged at different venues for new leaders. Last year 600 people received this training. Refresher training, of which there were 98 sessions in 2016, is ongoing.

80. Training is provided by accredited trainers. There are 4 trainers' evenings per year where the Programme Co-ordinator provides feedback from the sessions and deals with any problems. Quality assurance is being implemented and each trainer will be assessed every three years. Six new trainers have completed a course of instruction to become accredited.

81. Information seminars regarding Garda Vetting at venues in the Republic of Ireland took place: 69 people attended. Garda Vetting is now a legal requirement and the process went online on 11th April 2016.

82. Kirk Session training modules have been piloted and will soon be available. As the Charity Commission NI has now designated Elders as Trustees, it is vital that they are informed of their responsibilities regarding child protection.

83. The Taking Care Office has one clerical staff member, Cathy Mullin. She has received 988 Access NI forms for processing, the largest number from any organisation apart from the GAA. She deals with day-to-day enquiries, arrangements, training dates and provides Taking Care literature to congregations when requested, together with relaying information to her programme co-ordinator.

84. The workload in Taking Care increases rather than diminishes. The Committee is conscious that the present staff level is critical and have requested an urgent Staff Review.

85. The Committee drew Council's attention to the fact that the Committee has no Republic of Ireland members to represent their congregations in matters which are specific to this region. After consideration, the Committee suggested that an Advisory Task Group be formed to assist with this situation.

86. Portability, a scheme that will reduce the number of Access NI checks that individuals will require, will come into operation in the later part of 2017 or early 2018, a facility that PCI and others have lobbied on for a considerable time.

87. A congregational audit of the Taking Care Programme is planned for October 2017 and this will provide information that will assist in the overall assessment of Safeguarding needs throughout PCI.

88. The Faith Group of the Safeguarding Board for Northern Ireland continues to meet to discuss mutual topics and to offer support. The Group has hosted "Lunchtime Seminars" and has produced Guidance for Faith-Based Groups – Use of Social Media and other E-Based Communication. A Safeguarding Sunday strategy is currently being drawn-up and will be ready in the Summer of 2017.

89. The Adult Safeguarding Task Group has completed the Adult Safeguarding Policy and Guidelines for congregations. At the core of the Policy is the Taking Care of All statement that was passed at the General Assembly in 2016 "Christ calls us to love, care for and value everyone." "This gospel imperative of loving our neighbour as ourselves leads us to respect all as individuals, treating each with dignity and empowering them to reach their full potential. The Presbyterian Church in Ireland seeks to reflect Christ's compassion for everyone and to safeguard all those who come into contact with the mission and ministries

of the Church, by preventing harm and protecting those at risk.”

90. The Policy and Guidelines set out the Key Messages and Underpinning Principles as they relate to the church, defines abuse, clearly stated Do’s and Don’ts and how to report concern. (See Appendix 1 for full text).

DR PAMELA MARSHALL, Convener

91. **Strategic Objective:** “*Specialist Services Committee – will deliver a high standard of service to those with Addictions, Offending Behaviours and who require Supported Housing.*”

- (a) Establish a closer collaboration between Thompson House, Carlisle House and Gray’s Court.
- (b) Develop a Crime Reduction and Life Skills Programme for Thompson House. (93,94)
- (c) Develop the Fresh Start Programme in partnership with the Northern Ireland Prison Service. (99)
- (d) Develop a link with Prison Chaplains and contribute to the development of Community Chaplains.
- (e) Establish stronger links with Juvenile Justice Centre.
- (f) Include work of Flourish! Churches’ Initiative on Suicide.
- (g) Raise awareness of Domestic/Sexual Violence. (Reports 2016, 96, 98)
- (h) Explore with Oaklee/Trinity the refurbishment of Carlisle House.

**Work with people with Addictions**

- Carlisle House
- Gray’s Court

**Work with Offenders**

- Thompson House
- Fresh Start Initiative at Hydebank Wood Prison and Young Offenders Centre

## SPECIALIST SERVICES COMMITTEE

92. The Specialist Services Committee oversees the work of Thompson House, Carlisle House and Gray’s Court, These Units provide a high standard of service for those with Addictions, Offending Behaviours and those who require additional Supported Housing to assist their transition and integration back into society. They continue to promote and encourage service-users to engage in the spiritual opportunities available, alongside their current therapies and the practical professional advice on offer.

93. Thompson House continues to provide much needed accommodation and a wide range of valuable voluntary programmes for service-users. Staff at Thompson House have noticed a significant increase in the complex issues service-users present with, eg alcohol, drug, mental health and personality disorders. As a result management and staff have introduced and now implement positive Safeguarding Support Structures when required.

94. Thompson House, having run the Christianity Explored programme for a number of years, have changed to the new Christian study material entitled

'Life Explored'. Again, management have identified that an increasing number of service-users have little or no biblical knowledge and this new material (published by Christianity Explored) will seek to address this issue.

95. Carlisle House continues to provide a six-week residential treatment programme for people with alcohol and drug issues. Installation of new emergency lighting, a fire alarm system and the refurbishment of the heating system to gas is now complete. Recent Open Mornings over a number of days have been well received with 289 attendees, of which 245 individuals were service-users and family members, plus 44 substance abuse practitioners. The therapy programme on offer is wide-ranging, and consists of interactive, creative and complimentary therapy group sessions, in addition to advice given on healthy eating, plus a Housing and Benefits Clinic.

96. Specialist Services continues to highlight the issue of Domestic and Sexual Violence in our society. The Committee is actively seeking to engage with Women's Aid on this issue.

97. Funding and the financial pressures of the work of Specialist Services have been discussed at length. Some encouragement has been evidenced in the financial turn-around over the past 24 months, with the move to Regional Funding, benefiting Carlisle House in particular. The Committee has taken under consideration that if Carlisle House was able to offer two extra beds it would increase its financial viability considerably.

98. Safe Church, an initiative with Women's Aid is a project that addresses the issue of Domestic and Sexual Violence is being rolled out throughout local churches.

99. The Fresh Start Programme, in collaboration with the Northern Ireland Prison Service, continues to utilise the use of volunteers in working with Hydebank Wood College.

100. The Committee discussed a recent statement made by Cheryl Lamont, Chief Probation Officer of the PBNI "that 70% of those currently on probation have an issue with drugs and/or alcohol." This affirms the observations of Thompson House staff, since the majority of new residents accessing their services arrive with support workers in place to assist them in accessing local drug/alcohol services.

101. Gray's Court remains at full occupancy, offering a valuable resource for individuals in recovery, being able to stay for up to two years.

JOHN STANBRIDGE, (Acting Convener)

# COUNCIL FOR SOCIAL WITNESS

## APPENDIX 1

### Adult Safeguarding: Congregational Policy and Guidelines

#### TAKING CARE OF ALL

1. Christ calls us to love, care for and value everyone.
2. This gospel imperative of loving our neighbour as ourselves leads us to respect all as individuals, treating each with dignity and empowering them to reach their full potential.
3. The Presbyterian Church in Ireland seeks to reflect Christ's compassion for everyone and to safeguard all those who come into contact with the mission and ministries of the Church, by preventing harm and protecting those at risk.

#### Introduction

4. The Presbyterian Church in Ireland has 539 congregations with around 250,000 people attending worship and a range of other activities. Our Child Protection Guidelines were adopted by the General Assembly in 1996 and were further developed on the launch of Taking Care and establishment of a Taking Care Office in 2006. Every congregation has a named designated person for child protection and adheres to the stated guidelines as laid down by the General Assembly.

5. This Policy and Guidelines, together with our well-established Taking Care Programme, will ensure that we reduce the risk of harm, abuse or exploitation for all within the Church. The Presbyterian Church has a zero-tolerance approach to all forms of harm, abuse and exploitation.

6. As a Church we have a duty to protect all who are members or participate in the life and work of our church community. Harm, abuse or exploitation can happen anywhere, even in churches. Safeguarding is everyone's business and should be an integral part of congregational life and monitored by Kirk Sessions. It should not be seen as another burdensome policy, but as the living out of the Gospel imperative to love and care for one another.

7. The Pastoral Care of members, church based activities and events will be the main context of many of our concerns. Doing nothing is not an option; better to share a concern than run the risk of a serious event going unreported.

8. This response will involve us as a Church discussing our concerns and, when necessary, reporting them to the appropriate person and cooperating with Statutory Bodies, whilst ensuring that the appropriate support is afforded to all parties concerned.

9. Our churches have a significant presence in our communities. Individuals, families and groups participate in activities every week. They have a right to feel safe and secure and when systems fail we have a duty to act immediately.

10. *“As a denomination, it is vital that we ensure that all of our members and visitors are protected from abuse, exploitation or neglect and the risk of harm. Safeguarding adults is complex and challenging and it is vital that we work in partnership with other agencies to protect all.”*

11. 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.

12. These guidelines are for anyone within the Presbyterian Church in Ireland who is working with adults at risk, whether they are in a paid position or are a volunteer.

Examples:

- Ministers
- Elders
- Deaconesses
- Volunteers
- Staff Members
- Pastoral Care Workers
- Pastoral Team Members

13. Kirk Sessions, Presbyteries, General Assembly Councils and the General Assembly are responsible for ensuring the implementation of, and compliance with these guidelines.

The guidelines aim to:

- (a) Raise awareness of harm to adults at risk.
- (b) Define what harm is and how it might be recognised.
- (c) Explain what process should be followed within PCI if there is concern that an adult at risk might be experiencing harm.
- (d) Set out how the Presbyterian Church in Ireland aims to prevent harm taking place and protect those who are at risk from harm. Key Messages

14. **Safeguarding is for all** – As a Church we are now familiar with the whole concept of Child Protection. We are to apply those good sound principles in the area of Adults. Adult Safeguarding is much more than the care of Older People and those with Disabilities. These Guidelines will assist us to keep safe all those over the age of 18 who are at risk of harm.

15. **Taking Care of All** – demands that we strive to prevent harm and protect those at risk:

We have a duty to:

- (a) Protect, as well as a duty to care;
- (b) Adopt a zero tolerance approach to all forms of harm/abuse/neglect/exploitation;
- (c) Deliver training;
- (d) Report concerns immediately;
- (e) Understand that a delay may place individuals at further risk;
- (f) Co-operate and be in partnership with other agencies;
- (g) Take our responsibilities seriously as stated within the policy;
- (h) Appropriately share information that may assist in the protection of others and in the promotion of good practice.

**16. Who is responsible for ensuring implementation of and compliance with Taking Care of All?**

- General Assembly
- Presbytery
- General Assembly Councils
- Kirk Sessions

17. These guidelines move away from the concept of “vulnerability” in adulthood and towards establishing the concept of “risk of harm” in adulthood. In doing so, the guidelines place the responsibility for any harm caused with those who perpetrate it and not with the person who has been harmed.

18. Harm resulting from abuse, exploitation or neglect violates the basic human rights of a person to be treated with respect and dignity, to have control over their life and property, and to live a life free from fear. Harm can have a devastating and long lasting impact on victims, their families and carers. It is the impact of an act, or omission of actions, on the individual that determines whether harm has occurred.

19. Any action which causes harm may constitute a criminal offence and/or professional misconduct on the part of an employee.

20. Adult safeguarding is based on fundamental human rights and on respecting the rights of adults as individuals, treating all adults with dignity and respecting their right to choose.

21. It involves empowering and enabling all adults, including those at risk of harm, to manage their own health and well-being and to keep them safe. It extends to intervening to protect where harm has occurred or is likely to occur and promoting access to justice. All adults at risk should be central to any actions and decisions affecting their lives.

22. **Preventative Safeguarding** includes a range of actions and measures such as practical help, care, support and interventions designed to promote the safety, well-being and rights of adults which reduce the likelihood of, or opportunities for, harm to occur. Effective preventative safeguarding requires partnership working, that is, individuals, professionals and agencies working together to recognise the potential for, and to prevent, harm. Prevention is therefore the responsibility of a wide range of agencies, organisations and groups; indeed it is the responsibility and concern of us all as good citizens and neighbours, including those who may be at risk of harm, must be alert to the individual’s needs and any risks of harm to which they may be exposed. Prevention will strive towards early intervention to provide additional supports at all levels for adults whose personal characteristics or life circumstances may increase their exposure to harm.

23. **Protective Safeguarding** will be targeted at adults who are in need of protection, that is, when harm from abuse, exploitation or neglect is suspected, has occurred, or is likely to occur. The protection service is led by HSC Trusts and the PSNI. The input of other individuals, disciplines or agencies may be required, either in the course of an investigation of an allegation of harm or in the formulation and delivery of a care and protection plan.

24. Effective preventative safeguarding requires partnership working and is the responsibility of everyone – individual/staff/volunteer/Minister/Deaconess/Pastoral Care Worker/Elder and all teams and organisations that come into contact with adults.



## DEFINITIONS

25. **It is important to understand what we mean when we talk about adult safeguarding.**

26. In **Northern Ireland** an adult at risk is defined in the government policy.

*Adult Safeguarding: Prevention and Protection in Partnership* (July 2015) defines an “**Adult at risk of harm**” as a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics which 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
- (b) Life circumstances
- (c) Who are unable to protect their own wellbeing, property, assets, rights or other interests?

Previous safeguarding policies focused on protection and the term “vulnerable adult”. This policy moves away from the concept of “vulnerability” and towards establishing the concept of “risk of harm” in adulthood. It places the responsibility of harm caused with those who perpetrate it.

27. In the **Republic of Ireland** the National Policy Safeguarding Vulnerable Persons at Risk of Abuse (December 2014) states that a **vulnerable person** is “an adult who may be restricted in capacity to guard him/her against harm, exploitation or to report such harm or exploitation”. Restriction of capacity may arise as a result of physical or intellectual impairment. Vulnerability to abuse is influenced by both content and individual circumstances.

In other words some can be vulnerable to abuse at some stage in their lives, depending on their age, disability or need for support.

28. **What do we mean by “abuse”?**

Abuse is ‘a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to another individual or violates their human or civil rights’.

Abuse is the misuse of power and control that one person has over another. It can involve direct and indirect contact and can include online abuse

29. **What do we mean by “harm”?**

Harm is the impact on the victim of abuse, exploitation or neglect. It is the result of any action whether by commission or omission, deliberate, or as the result of a lack of knowledge or awareness which may result in the impairment of physical, intellectual, emotional, or mental health or well-being.

Harm resulting from abuse, exploitation or neglect violates the basic human rights of a person to be treated with respect and dignity, to have control over their life and property, and to live a life free from fear. Harm can have a devastating and long lasting impact on victims, their families and carers. It is the impact of an act, or omission of actions, on the individual that determines whether harm has occurred.

Any action which causes harm may constitute a criminal offence and/or professional misconduct on the part of an employee.

**30. What are the main forms of abuse?**

Abuse can take many forms. The most commonly cited forms of abuse are:

- (a) **Physical Abuse**
  - (i) Physical abuse is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury.
  - (ii) This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty.
- (b) **Sexual Violence and Abuse**
  - (i) Sexual abuse is any behaviour perceived to be of a sexual nature which is unwanted or takes place without consent or understanding.
  - (ii) Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material, or being made to watch sexual activities. It may involve physical contact, including but not limited to non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (known as groping).
  - (iii) Sexual violence can be found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.
- (c) **Psychological/Emotional Abuse**
  - (i) Psychological/emotional abuse is behaviour that is psychologically harmful or inflicts mental distress by threat, humiliation or other verbal/non-verbal conduct.
  - (ii) This may include threats, humiliation or ridicule, provoking fear of violence, shouting, yelling and swearing, blaming, controlling, intimidation and coercion.
- (d) **Financial Abuse**
  - (i) Financial abuse is actual or attempted theft, fraud or burglary. It is the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception.
  - (ii) This may include exploitation, embezzlement, withholding pension or benefits or pressure exerted around wills, property or inheritance.
- (e) **Institutional Abuse**
  - (i) Institutional abuse is the mistreatment or neglect of an adult by a regime or individuals in settings which adults who may be at risk reside in or use. This can occur in any organisation, within and outside the HSC sector. Institutional abuse may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid

routines which violate the dignity and human rights of the adults and place them at risk of harm. Institutional abuse may occur within a culture that denies, restricts or curtails privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services, and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

- (f) **Neglect**
  - (i) Occurs when a person deliberately withholds, or fails to provide, appropriate and adequate care and support which is required by another adult. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time.
  - (ii) It may include physical neglect to the extent that health or well-being is impaired, administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing, or failure to intervene in situations that are dangerous to the person concerned or to others particularly when the person lacks the capacity to assess risk.
- (g) **Exploitation**
  - (i) Is the deliberate maltreatment, manipulation or abuse of power and control over another person; to take advantage of another person or situation usually, but not always, for personal gain from using them as a commodity?
  - (ii) It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse, sexual violence and abuse, or human trafficking.

This list of types of harmful conduct is not exhaustive or listed here in any order of priority. There are other indicators which should not be ignored. It is also possible that if a person is being harmed in one way, he/ she may very well be experiencing harm in other ways.

31. Are there any other **related definitions** we need to be aware of?

There are related definitions which interface with Adult Safeguarding, each of which have their own associated adult protection processes in place.

It is important that congregations are aware of the following:

- (a) **Domestic Violence and Abuse**
  - (i) 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.
  - (ii) 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.
  - (iii) It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship

with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.

- (b) **Human Trafficking**
  - (i) Human trafficking involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them.
  - (ii) It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting.
  - (iii) Victims of human trafficking can come from all walks of life; they can be male or female, children or adults, and they may come from migrant or indigenous communities.
- (c) **Hate Crime**
  - (i) Hate crime is any incident which constitutes a criminal offence perceived by the victim or any other person as being motivated by prejudice, discrimination or hate towards a person's actual or perceived race, religious belief, sexual orientation, disability, political opinion or gender identity.
  - (ii) Victims of domestic violence and abuse, sexual violence and abuse, human trafficking and hate crime are regarded as adults in need of protection.

### 32. **Adult Safeguarding Champion**

Adult Safeguarding: Prevention and Protection in Partnership requires us to have an identified Adult Safeguarding Champion in place.

The role of the Safeguarding Champion is to:

- (a) Provide information and support for congregations on adult safeguarding within the organisation.
- (b) Ensure that congregations disseminate the policy and guidelines and support implementation.
- (c) Design and deliver training.
- (d) Provide advice and support to volunteers who have concerns about the signs of harm, and ensure that it is reported.
- (e) Establish contact with the Taking Care Champion.
- (f) Establish contact with the relevant Health and Social Care Trust in respect of any safeguarding concerns.

### 33. **Recognising, Responding and Recording Adult Safeguarding Concerns**

Ministers, Pastoral Care Workers or volunteers who are concerned about someone who may be experiencing harm or abuse must report promptly

There are a variety of ways that you could be alerted that an adult is experiencing harm:

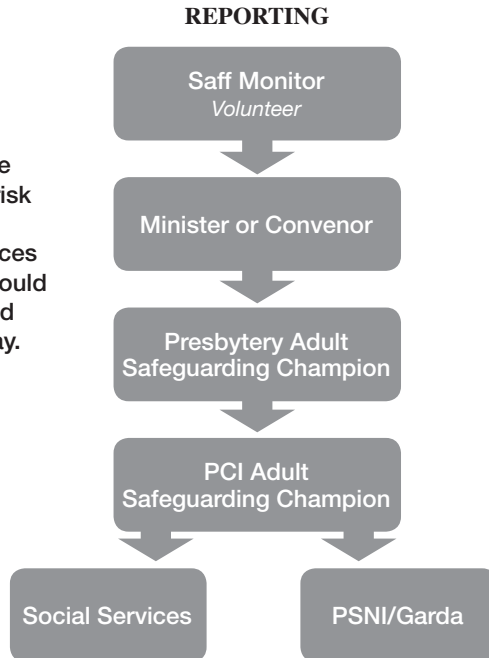
- (a) They may disclose to you as a Minister, Elder, Pastoral Worker or Friend.
- (b) Someone else may tell you of their concerns or something that causes you concern, following a visit or conversation.
- (c) They may show some signs of physical injury for which there does not appear to be a satisfactory or credible explanation.

- (d) Their demeanour/behaviour may lead you to suspect abuse or neglect.
- (e) The behaviour of a person close to them makes you feel uncomfortable (this may include other members of the congregation or organisation, a volunteer, peer or family member) or through general good neighbourliness and citizenship.

Being alert to potential abuse plays a major role in ensuring that adults are safeguarded and it is important that all concerns about possible abuse are taken seriously and appropriate action is taken.

- (i) **Responding:** Staff/Volunteers who find themselves dealing with an abusive setting may well have different reactions. Some may feel anger towards the abuser; others may block it out and may even deny it has happened, while some may become withdrawn and difficult to communicate with. Therefore it is vital that staff/volunteers are supported.
- (ii) **Reporting:** Staff or volunteers who are concerned about someone who may be experiencing harm or abuse must report promptly these to the Minister of the Congregation in which they are working (or convener of vacancy if applicable). The Presbytery Adult Safeguarding Champion should then be contacted. If they are concerned that it is a safeguarding issue then the PCI Adult Safeguarding Champion should be contacted who will make a report to the police or social services if appropriate

If at any time an adult at risk is in danger, Social Services or Police should be contacted without delay.



**24 hour Helpline +44 (0)28 9041 7235**

- (iii) Recording: If a staff member/volunteer is concerned that an adult is experiencing harm, then they should keep a written record of their observations, conversations and/or action points. Any written record (hard copy or electronic) must be kept confidential.

Note: This will depend on our discussions in relation to the Safeguarding Champion and the role of the Designated Person.

#### **34. Support for Staff**

Staff/Volunteers who find themselves dealing with an abusive situation may react in different ways. Some may feel anger towards the abuser; others may block it out and may even deny it has happened; while some may become withdrawn and difficult to communicate with. Therefore it is vital that staff/volunteers are supported.

#### **35. Confidentiality**

Staff/volunteers must not breach confidentiality by discussing safeguarding cases with others inappropriately.

#### **36. Adult Protection Services**

##### **Northern Ireland**

- (a) Health and Social Care Trusts and the PSNI are the lead agencies with responsibility for adult protection.
  - (i) Each HSC Trust will have an Adult Protection Gateway Service which will receive adult protection referrals.
  - (ii) HSC Trusts will be the lead agency in terms of the co-ordination of joint Adult Protection responses.
  - (iii) Within each HSC Trust, responsibility for Adult Protection rests with the Executive Director of Social Work, and the lead profession within HSC Trusts is social work.
- (b) The PSNI will be the lead criminal investigation agency and a report should be made to the PSNI where a crime is alleged or suspected.
  - (i) A joint Protocol will guide interagency referral, consultation and information exchange and working arrangements and will provide clarity in respect of the roles of the PSNI and HSC Trusts in the delivery of the adult protection response.
  - (ii) The Joint Protocol will outline when and how other agencies will be engaged for the purpose of an adult protection investigation and protection planning.

##### **Republic of Ireland**

- (c) Health Service Executive
 

A Safeguarding and Protection Team (Vulnerable Persons) will be established in each Community Healthcare Organisation (CHO). The Safeguarding and Protection Team will work collaboratively with services and professionals in promoting the welfare of vulnerable persons and act as a resource to personnel and services having concerns regarding vulnerable persons.
- (d) An Garda Síochána
 

An Garda Síochána must be informed if it is suspected that the concern or complaint of abuse might be criminal in nature; this may become apparent at the time of disclosure or following the outcome of the preliminary assessment.

### 37. **Vetting**

#### **Northern Ireland (Access NI)**

- (a) Roles which require an Enhanced Disclosure Check (against the barred lists):
  - (i) Providing personal care, eg washing, toileting.
  - (ii) Assistance with general household affairs, eg paying bills or shopping on their behalf.
  - (iii) Transporting to a Health Care Appointment, eg taking an adult to and from their GP appointment on behalf of the church. Please note that if a friend takes their neighbour to a hospital appointment this would be a personal arrangement and therefore they would not need to be vetted.
- (b) Roles which require an Enhanced Disclosure Check (NOT barred lists):
  - (i) Visiting adults at risk regularly, ie every week in their own home.
  - (ii) Driving a church minibus on a regular basis where the majority of those on the bus are considered to be at risk.
  - (iii) Taking a group on an overnight stay where the majority of those on the holiday are considered to be at risk.
- (c) Roles which DO NOT require an Access NI check:
  - (i) Elders visiting their district.
  - (ii) Those delivering a hot meal to an individual (note the difference in delivering a meal and feeding the adult).
  - (ii) A friend or neighbour taking someone to hospital for an outpatient appointment.
  - (iv) Volunteers at a lunch club for older people.

#### **Republic of Ireland (Garda Vetting)**

According to The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 and 2016, "Any work or activity which is carried out by a person, a necessary and regular part of which consists mainly of the person having access to, or contact with, children or vulnerable adults" needs to be vetted. This is a legal requirement.

### 38. **Training**

- (a) It is recommended that all staff/volunteers within the Presbyterian Church in Ireland who are working with adults at risk whether they are in a paid position or are a volunteer should attend adult safeguarding training on a regular basis. The training will be relevant to their role in a church based setting working with adults.
- (b) Training seminars will be organised by the Council for Social Witness. This training will be based on the Volunteer Now Keeping Adults Safe programme and facilitated by those trained to deliver the programme.
- (c) Training seminars will also be provided for the Presbytery Adult Safeguarding Champions.

### 39. **Annual Report**

The Adult Safeguarding Champion must compile an annual Adult Safeguarding Position Report. This will include the number of referrals made to HSC Trusts and the number of adult safeguarding discussions where the decision

taken was to not refer to HSC trust. For this reason it is important that Presbytery Adult Safeguarding Champions maintain contact with the Adult Safeguarding Champion for PCI.

40. **Underpinning Principles:** All Adult Safeguarding activity must be guided by five underpinning principles:

- (a) **A Rights-Based Approach:** To promote and respect an adult's right to be safe and secure; to freedom from harm and coercion; to equality of treatment; to the protection of the law; to privacy; to confidentiality; and freedom from discrimination.
- (b) **An Empowering Approach:** To empower adults to make informed choices about their lives, to maximise their opportunities to participate in wider society, to keep themselves safe and free from harm and enabled to manage their own decisions in respect of exposure to risk.
- (c) **Person-centred Approach:** To promote and facilitate full participation of adults in all decisions affecting their lives taking full account of their views, wishes and feelings and, where appropriate, the views of others who have an interest in his or her safety and well-being.
- (d) **Consent-driven Approach:** To make a presumption that the adult has the ability to give or withhold consent; to make informed choices; to help inform choice through the provision of information, and the identification of options and alternatives; to have particular regard to the needs of individuals who require support with communication, advocacy or who lack the capacity to consent; and intervening in the life of an adult against his or her wishes only in particular circumstances, for very specific purposes and always in accordance with the law.
- (e) **Collaborative Approach:** To acknowledge that adult safeguarding will be most effective when it has the full support of the wider public and of safeguarding partners across the statutory, voluntary, community, independent and faith sectors working together and is delivered in a way where roles, responsibilities and lines of accountability are clearly defined and understood. Working in partnership and a person-centred approach will work hand-in-hand.

## COUNCIL FOR SOCIAL WITNESS

### RESOLUTIONS

1. That the General Assembly note the rise of the number of residents with dementia, both in the homes run by the Council for Social Witness and by other providers; call on the Governments in both jurisdictions to provide adequate funding and resources for those residents; and instruct the Councils for Social Witness and Public Affairs to pursue this matter in the ensuing year.

2. That the General Assembly approve the 'Adult Safeguarding Policy and Guidelines' (Appendix 1 of the Report of the Council for Social Witness).

3. That the General Assembly welcome the 'Who's Calling Initiative' (a scheme to prevent scams and financial abuse of the elderly) launched by the Commissioner for Older People in Northern Ireland.



4. That the General Assembly give thanks to God for the work and witness of Ard Cluan in Londonderry and York House in Portrush and seek the prayers of the Church as residents and staff relocate to Trinity House in Garvagh.
5. That the Report of the Council for Social Witness be received.