

The Diocese of London Survivor Pathway

Introduction

The Past Cases Review 2 (PCR2) was commissioned following a report from the Independent Scrutiny Team led by Sir Roger Singleton in 2018. All national church institutions and dioceses are required to complete the review and all parishes, cathedrals and other church bodies are required to participate.

The PCR2 protocol and practice guidance has been approved by the House of Bishops. All dioceses and church bodies are required to have 'due regard' to this guidance in completing the review. It makes specific provision for the involvement of victims, survivors and those with a lived experience of abuse. We recognize that the welfare of children or adults at risk of abuse must be of paramount importance in the planning and delivery of the PCR2 and we want to ensure that we are using this as a framework for improvement for our ongoing work with victims and survivors.

The specific objectives of PCR2 are:

- To identify all information held within parishes, cathedrals, dioceses or other church bodies, which may contain allegations of abuse or neglect where the alleged perpetrator is a clergy person or other church officer, and ensure these cases have been independently reviewed.
- To ensure all allegations of abuse of children, especially those that have been recorded since the original PCR, have been handled appropriately and proportionately to the level of risk identified and with the

paramountcy principle evidenced within decision making.

- To ensure that recorded incidents or allegations of abuse of an adult (including domestic abuse) have been handled appropriately demonstrating the principles of adult safeguarding.
- To ensure that the support needs of known survivors have been considered.
- To ensure that all safeguarding allegations have been referred to the Diocesan Safeguarding Advisers and are being/have been responded to in line with current safeguarding practice guidance.
- To ensure that cases meeting the relevant thresholds have been referred to statutory agencies.

Appendix 3 sets out the checklist for implementing PCR2 guidance for survivors. This covers:

- Reference Group responsibilities
- Communications
- The involvement of victims, survivors and those with a lived experience of abuse
- Survivor engagement
- Survivor support plan

Each diocese is expected to put systems and services in place and to bring the appropriate agencies together to support victims and involve them in the programme, whether as contributors or as participants of the reference group. Both NAPAC and Victim Support are members of the Diocese of London PCR2 Reference Group and they are partnering us with the delivery of this pathway and our engagement with victims and survivors.

We have also reviewed the current literature to understand what is important to survivors (see Appendix 4).

As an institution, abuse has had a major impact on the churches' reputation and trust. Abuse can have a significant impact on people's lives, increasing the risk of poorer physical and mental health and poorer social, educational and criminal justice outcomes. Supporting someone who has been abused can be a

complex and long-term intervention that needs specialist skills and knowledge.

Often agencies who are funded to work with victims to improve their outcomes are health and social care professionals eg. Counsellors, therapists etc. Our duty towards victims of all abuse, not only that perpetrated by church officers, is to support them to disclose the abuse and help them to access appropriate support by signposting and referring to more specialist support as required.

In the past clergy and laity have often wanted to support people in their own congregation and while this can be appropriate in a general way, specialist support will need to be found outside of the local church community.

The role of the diocesan safeguarding team in relation to victims is important to set out, so that both the duties and the limitations of the team are clear.

To ensure people get the support they need the Church of England guidance requires each diocese to have listening services. These are intended as short-term support to provide victims and survivors of abuse within the church settings with support during the disclosure process.

To meet the needs of victims appropriately we have mapped a survivor pathway for the PCR2 review process in the Diocese of London, to ensure victims and survivors are well supported.

Mapping our development priorities

We have used the document called: STRATEGIC DIRECTION FOR SEXUAL ASSAULT AND ABUSE SERVICES: Lifelong care for victims and survivors: 2018 – 2023¹ that sets out the strategy for NHS England² and represents a shared vision and focus for improvement in support for victims and survivors.

¹ <https://www.england.nhs.uk/wp-content/uploads/2018/04/strategic-direction-sexual-assault-and-abuse-services.pdf>

We have set out the PCR2 survivor pathway using this framework so that all the facets of this work are presented in a way they can be measured by the Past Case Review Reference Group (PCRRG). We will also use this as the foundation for the Diocese of London Survivor Strategy.

Based on the six core priorities identified in this NHS framework, we have identified the priorities for the Diocese of London as follows:

1. Building our Safer Churches Strategy to help prevent future abuse
2. Promoting safeguarding and the safety, protection and welfare of victims and survivors
3. Involving victims and survivors in the development and improvement of what we do
4. Developing key performance indicators to ensure timeliness of our response and the quality of what we do
5. Developing our partnerships with Napac, Victim Support and other service providers
6. Ensuring that our clergy, and all those involved in the life of our churches receive safeguarding training appropriate to their roles.

Appendix 1 - A map of the survivor pathway

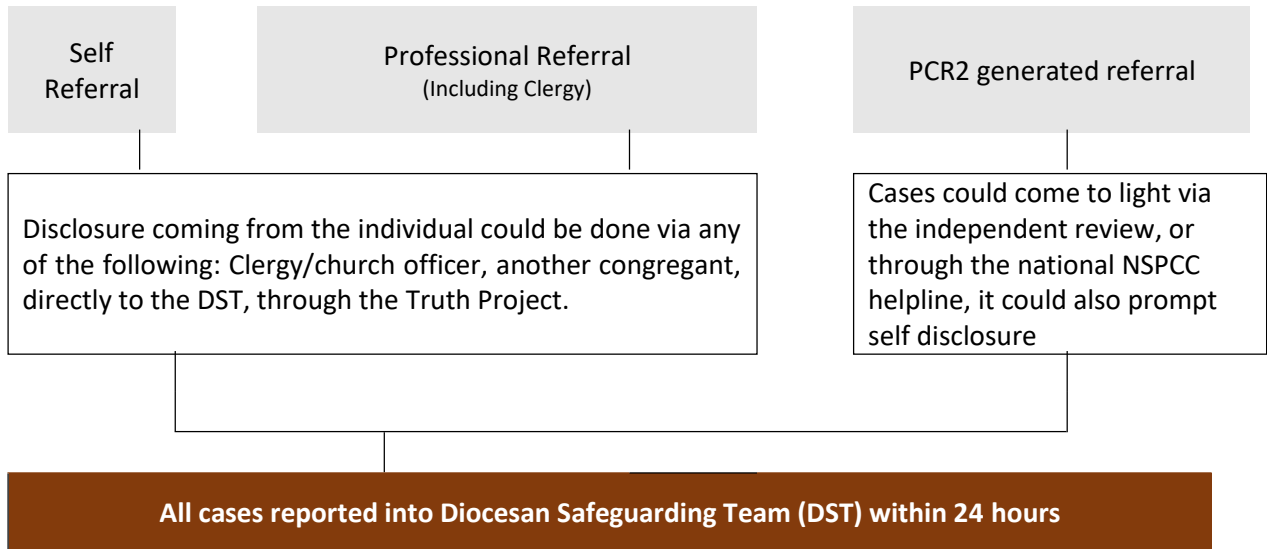
Appendix 2 - The Survivor and Victim Framework Summary for 2020/2021

Appendix 3 - How the priority outcomes will be achieved.

Appendix 4 – what victims tell us

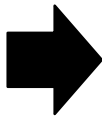
² NHS England leads the National Health Service (NHS) in England

Appendix 1 - Survivor Pathway



Initial Assessment of case and survivor services on offer:

If case doesn't meet criteria to launch investigation



Support on offer: Signposting to other relevant organisations, e.g. Mind or Napac, Victim Support.

Meets Criteria and investigation is launched



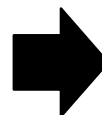
Police support: Victim Support
DST Support: Individual Survivor support plan - could include Napac group service (12- week program), counselling, listening service etc

During investigation



Listening service

Post investigation



Include EIG and how accessed as option and any other support still on offer

PCR2 cases



NSPCC helpline, and In addition to any of the above - opportunity to meet with Independent Reviewer

Historic cases could appear for whole process or if case has already been acted-on, they could receive post investigation support.

Appendix 2 Summary plan

The Survivor and Victim Framework Summary for 2020/2021

2030 Vision						
Vision						
Priority outcomes	DOL is Strengthening its approach to prevention	Promoting safeguarding and the safety, protection and welfare of victims and survivors	Promoting safeguarding Involving victims and survivors in the development and improvement of services	DOL Introducing consistent quality standards	DOL is Driving collaboration and reducing fragmentation	Ensuring an appropriately trained volunteer and staff workforce
	Young people and adults are protected from harm and kept safe in our worshipping communities through safe practices. People seeking help from the church receive services and advice swiftly The church provides locally relevant information and advice about safeguarding support to enable choice and informed control	Everybody in our churches enjoys physical safety and feels secure People are free from harm in our churches Instances of abuse are investigated promptly and effectively Victims and survivors receive adequate support when making their disclosures People respect the dignity of the individuals and ensure support is sensitive and available to each individual circumstance People who are experiencing abuse are assisted with advice and support to help them maintain control over their situation	Responsible governance and partnership are in place Victims and survivors' are at the heart of what we do and their views are gathered to help services developments which we follow Survivors and victims' feel they are equal partners throughout any service change or design Survivor pathways are codesigned and impact assessments are used in commissioning	DOL Continue to improve the delivery of services and reliability of contractors through contract monitoring We ensure that clergy and church safeguarding officers have capacity and skills and expertise in safeguarding to deliver good services quality assurance frameworks for commissioning Risk Assessment for church officers	Use our learning from PCR to extend our networks and partnerships Have a diverse market in victim support services to offer choice and control for victims. Work with our partners in health to improve outcomes for victims and survivors of sexual/emotional abuse.	Everybody can access training to help them feel confident with their safeguarding duties People are protected as far as possible from avoidable harm by well trained safeguarding volunteers and members of clergy. Better identification and support to victims and survivors living in the London Diocese and to have a voice in the commissioning of training.
we aim to	work with Incumbents to gather historical cases of persons of interest to complete their returns Parish promote ways to report abuse and maintain safer recruitment practices To encourage incumbents and church communities to focus on prevention of abuse through the work of the DSSG and their PCC's Promote Leadership in safeguarding in parishes and encourage take up programmes	Ensure that people are free from harm in our churches through safer recruitment practices Ensure Instances of abuse are investigated promptly and effectively by appropriately trained personnel Victims and survivors receive adequate support through their disclosures and are offered support through the DST and church community where appropriate, work with independent advocates.	We aim to keep victims and survivors safe and support them to cope with the direct impacts of abuse when disclosing by working closely with agencies. Sign post victims who come to us to primary services to enable them to access where appropriate long-term recovery services to improve emotional wellbeing. CFPS recommendations are implemented to ensure effective survivor opportunity to influence governance and the way things are done around here	Review the case work within the DST to evaluate against practice standards and implement recommendations from the Independent Reviewers Feedback from training evaluations from face to face sessions is used ensure quality standards are maintained Introduce quality assurance framework for commissioning Risk Assessment for church officers	To work with police, social care and health to improve survivors and victims' experience when disclosing To provide access to justice for victims, and protect them when they are most vulnerable, we need to ensure they are supported before, during and after the criminal justice process, and that they are treated with kindness and consideration throughout Ensure we have enough capacity for victims to access our listening services. Improve collaboration with health services for victims to access lifelong services for victims and survivors through referral mechanisms	Ensure that clergy and church safeguarding officers have capacity and skills and expertise in safeguarding to respond well and they understand the complex needs of this client group. We aim to commission e learning and provide choices in relevant safeguarding to each episcopal area. Encourage volunteers in church settings to take responsibility for their own learning within and outside of the church.
Business support	These priority outcomes are supported by					
	Operational plan 2020					

Appendix 3-Checklist PCRRG PCR2 guidance for survivors

Reference Group responsibilities

- The DSAP chair must nominate a member of the diocesan PCR reference group to lead for survivor support and engagement.
- The DSA, DSAP chair and diocesan bishop must agree survivor-care strategy at Phase One
- To regularly review the survivor-care strategy
- Local Adult and Children's Safeguarding Partnership Boards to be notified of PCR2 with a link to the guidance.
- To establish local partnerships (e.g. with Victim Support, Rape Crisis, local counselling providers etc.) are in place

Communications

- The diocesan safeguarding team is the point of contact for the review/survivors
- The NSPCC helpline number and how to contact with the DST must be promoted locally

The involvement of victims, survivors and those with a lived experience of abuse

- The DSA will liaise with lead for survivor engagement and IR when someone wants to make representations to PCR2
- Where safeguarding professionals or diocesan clergy are in **current contact** with victims and survivors, an invitation to be offered to engage with the IR

Survivor engagement

- Individual who we are working with should be invited to express their views to the IR
- Any survivor engaging with the PCR2 process will be assured of support and of anonymity
- Advocacy or carers for individuals who lack capacity or under 18 should be in place

Survivor support plan

- Any investigations should have a multiagency survivor support plan in place prior to contact.
- Pastoral care should be included in the survivor support plan if required
- If the IR identifies unmet support needs, they should pass to the DSA

Appendix 4

The needs of victims and survivors

Victims and survivors tell us that, both before and after disclosure, they frequently find it difficult to navigate a confusing and disjointed array of services at the time when they need them most and at times when they are often in crisis. They also tell us that their experience can be compounded both by difficulties in knowing which services to access to get the help and support that they need, and by inconsistencies in the quality of care that they receive once they do access services. This heightens the risk of compound trauma that can occur as a result of repetitive, prolonged and sustained abuse and/or re-traumatisation, which is the reminder of a past experience resulting in re-experiencing the initial trauma.

Heightening the risk further, disclosure and identification of sexual assault and abuse often takes place in a more formal setting rather than within an environment dedicated to the care and support of victims and survivors. This can often mean that, whilst support is available, there may be little emotional and physical support longer-term and over the individual's lifetime.

The Diocese of London have engaged the support of Victim Support and Napac with the intention of gaining their specialist insight and knowledge as we work to ensure the needs of victims and survivors are central to our past cases review. They will help us to ensure that joined up support for individuals, as well as for their families and carers and that victims and survivors are directed to the most appropriate service at the right time in their journey to recovery.