



# Safeguarding and Dementia

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## Safeguarding? Or risk management?

As churches, we are of course keen to support people in joining in with our services and activities. As patterns change through advancing dementia or other challenges, it may be important that we flex things to accommodate individuals' needs: it's the right thing to do, keeping in step as patterns change. And it's actually a legal requirement that we do so: the right to worship is protected (under Article 9 of the Human Rights Act 1998) and disability discrimination legislation requires us to make reasonable adjustments to allow people to access services. This way, we are not turning people away, as patterns change for them: rather, we are continuing to "enable" people to participate, whenever we reasonably can.

For example, we might offer a shorter service of worship, with more sensory involvement; or we might offer home communion; and we might make adjustments to the physical environment at church, like improving our signage.

Alongside this we need to be aware of safeguarding boundaries, as behaviour changes. It may seem difficult to talk about, but it is essential to work together appropriately, as things change through advancing dementia, if we encounter challenging behaviour. This is explained more fully here. And there is an accompanying document of case studies to explore the practical impact.

## 1. “Safeguarding” – definition and framework

Safeguarding is all about acting in ways that mitigate any risk of harm. Adult safeguarding is defined as “Protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.” (Care Act 2014)

**THINK SAFEGUARDING** if there is any allegation, disclosure or information that indicates someone may be at risk of significant harm, including experiencing or witnessing or direct or indirect involvement in abuse or neglect.

Every parish is required to have its own Parish Safeguarding Policy, within the National and Diocesan Safeguarding Policies. Every parish also has a Safeguarding Officer.

The information here builds on this established Parish Safeguarding framework, exploring the additional considerations that are relevant when someone is living with or affected by dementia. Alzheimer’s Society’s website, on [“Safeguarding and dementia”](#), reminds us that: “People with dementia will have cognitive symptoms that may make them more at risk of abuse or neglect... Carers may also be at risk of neglect and abuse especially if they are overburdened, isolated, lonely or experiencing severe stress.”

## 2. Safeguarding? Or risk management?

If someone living with dementia does or says something inappropriate, how do we respond? Our response is coloured by the person’s capacity – and we recognise that capacity may fluctuate for someone with dementia

and may deteriorate, with advancing dementia, to a point where the person has no awareness of what they are doing.

Any issues should be discussed with the Parish Safeguarding Officer and/or with the Diocesan Safeguarding Adviser.

- For someone with full capacity, the behaviour might warrant full safeguarding procedures, perhaps going to the Police to report sexual assault.
- For someone with a degenerative cognitive disorder, where inhibitions are affected, the appropriate way forwards may be the “no fault” safeguarding route of a “risk management” response (within the Mental Capacity Act 2005). This allows appropriate management strategies to be discussed and agreed and shared – perhaps something as simple as not leaving someone unsupervised. This is effectively re-enabling someone to continue to participate in church activity, instead of excluding or further disabling them.

Here is the link to the Diocesan website to the our “Safeguarding Key Resources”, containing policy as well as all other relevant material from the national and local church: [Safeguarding Key Resources - Diocese of Lichfield \(anglican.org\)](#) The “Parish Safeguarding Handbook” includes wording for Parish Safeguarding Policy and other helpful information.

Here is a video link with our Diocesan Safeguarding Team discussing safeguarding and dementia, in October 2024: <https://youtu.be/--YlOJtKu6k>.

### 3. Safeguarding training – pastoral care & dementia

Speak to your Parish Safeguarding Officer about Safeguarding Training. The training can be completed online (via the Church of England National Safeguarding Team website <https://safeguardingtraining.cofeportal.org/>) or in person. As explained in the Parish Safeguarding Handbook:

- **Basic Awareness Training:** Safeguarding “Basic Awareness” training focuses on spotting signs of abuse: it is for everyone within Church

communities who need to have a basic awareness of safeguarding issues. If you see a bruise on someone, or if someone normally smartly dressed arrives looking disheveled, think "Safeguarding". So it may be appropriate for it to be completed by anyone at church with pastoral care for people affected by dementia, including everyone who volunteers with a church group for people affected by dementia.



- **Foundation Training:** Additionally, Foundation training is required for anyone who has safeguarding responsibilities/contact with vulnerable adults. So it may be appropriate for a church Dementia Coordinator, to complete the "Foundation" training.
- **Leadership Training:** Further, Leadership Training is required for anyone who has safeguarding leadership responsibilities/contact with vulnerable adults.

#### 4. DBS Checks – Dementia Coordinator

Disclosure and Barring Service (DBS) Checks are carried out within a fixed statutory framework which aims to balance the right not to have your privacy invaded with appropriate risk management.

- The need for a DBS Check is triggered not by a job title but by tasks which are completed.
- A DBS Check is needed if someone carries out a "regulated activity" (as defined) on a "frequent and regular basis".

"Regulated activities" include giving someone a lift, taking in shopping or food and taking someone to the toilet. However, going to someone's home on a pastoral visit and having a conversation is not defined as a "regulated activity". So a Pastoral Care Volunteer or a Dementia Coordinator does not automatically require a DBS Check.

Speak to your Parish Safeguarding Officer about DBS Checks: when they are needed, they are completed through an independent Christian charity called [thirtyone:eight](#) as agent for our Diocese.

## 5. Further Reference / Support

- If you or anyone else feel at immediate risk, call 999.
- Your local authority Adult Social Services Safeguarding Team can also offer support.
- From Alzheimer's Society:
  - Safeguarding: <https://www.alzheimers.org.uk/get-support/legal-financial/safeguarding>
  - Aggressive behaviour: <https://www.alzheimers.org.uk/about-dementia/symptoms-and-diagnosis/symptoms/aggressive-behaviour-and-dementia>
  - Losing inhibitions: <https://www.alzheimers.org.uk/about-dementia/symptoms-and-diagnosis/symptoms/losing-inhibitions>
  - Dementia Support Line for free on 0333 150 3456.
- From Dementia UK:
  - Keeping safe: <https://www.dementiauk.org/information-and-support/looking-after-yourself-as-a-carer/keeping-safe-when-you-care-for-someone-with-dementia/>
  - Admiral Nurse Dementia Helpline for free on 0800 888 6678.

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**CASE STUDIES:** Alongside this document, there is a document of Case Studies, setting out appropriate responses, in different situations involving people with dementia that we may encounter in our church communities.