



Clinical Service Governance

Annual Report 2015/16



Introduction

We are pleased to produce our sixth Clinical and Service Governance Board (CSGB) Annual Report, which outlines how The Big Life group continually strives to improve the quality and safety of services we deliver. We continue to benefit from the expert steering of the CSG Board by our Medical Director, Louise Grant. Thanks to all our staff, who contribute to ensuring we have a culture that is open to learning.

I have been privileged to once again spend another year with the Big Life Group; an organisation that fully understands the responsibility it has to its staff and service users to be open, honest and to share learning when things could have been gone better.

Particular achievements in the last year include the updating of several training courses to ensure the highest quality of delivery whilst continuing to refine and update the mandatory training in order to meet the changing needs of the group. I am equally impressed by the maintenance of CHAS accreditation across the group showing the continuous dedication to health and safety group wide.

A number of changes occurred throughout the Group during the reporting period of this report (2013/2016). In January 2014 Big Life Nurseries was established as a business unit and separated from Big Life Families. In 2015/16 Unity Community Primary School was opened and also in the same year, Big Life Families had an increase in day care provision.

I am particularly pleased that, at a time when legislation, health and safety and training compliance place increasing responsibility on all organisations, it is clear that the staff at the Big Life Group continue to achieve in these areas without compromising on the values which form the foundation of the group as a whole.

I am pleased with the work of the CSGB and appreciative of all those who have contributed to an increasingly safe, open and effective workplace.

Louise Grant, Medical Director, The Big Life group.

**BUSINESS
CHANGING
LIVES**

Contents:

Health and Safety	4
Incidents	6
Complaints	10
Positive Comments	12
Risk Register	13
Training	15
Safeguarding Children	17
Adults at Risk	19
Information Governance	20
Service Experience Audit	22

Health and Safety

The Big Life group is committed to ensuring Health and Safety is at the forefront of its business. This year we have invested in a variety of ways to ensure the group is able to comply with statutory requirements and ensure best practice in each of our businesses. As a result we successfully retained our CHAS accreditation. CHAS is an industry recognized Health and Safety standard.

We increased the resources available for Health and Safety across the group – appointing two internal H&S Leads who work alongside the Assistant Director for Assets to provide advice and monitor compliance. All businesses received an unannounced audit/inspection by a Health and Safety lead, who provided an Action Plan for any improvements that needed to be implemented. Actions Plans are reported and monitored by the CSGB.

Health and Safety Leads provided advice in response to 21 enquiries, ranging on issues such as Risk Assessments, responsibilities of landlords, contracts for equipment maintenance and mobility issues. Through the Big News we have cascaded learning from Incidents and Accidents.

Health and Safety leads audited all the groups' electronic green books and found them to be of variable standard. Some staff were still keeping paper copies and not uploading to the electronic folder as required. We will review the electronic green books to make them as easy to complete as possible and ensure standards are consistent across the group.

We reviewed Health and Safety training and have introduced mandatory basic awareness training as part of the Group Induction. Managers across the group were also trained to deliver an H&S refresher briefing to all staff.

By March 2016, 323 staff were fully trained (60 % compliance) and we aim to complete the remainder of the staff in the first term of 2016. Further work is being carried out to ensure the HR database provides accurate information on compliance with training.

This year we have trained;

IOSH	x 9
Fire Marshal	x 25
First aid at work	x 17
Pediatric First Aid	x 8

Progress on priorities from last year:

- Maintain CHAS standards – Achieved
- Build on our positive Health and Safety culture using a variety of communication methods - Achieved
- Share best practice of electronic green book management – More work to be done
- Deliver basic Health and Safety awareness course Achieved
- Ensure Health and Safety training records are kept up to date – Good progress made but more to be done

Priorities for the year ahead :

- Review and revise the H&S Policy
- Complete Mandatory H&S Briefing
- Ensure accurate records of training are maintained
- Review Electronic Green Books to ensure simple for staff to use
- Develop H&S reps in every business

Incidents

	Big Life Centres	Big Life Families	Big Issue North	Big Life Company	LCP	Big Life Emp	Unity	Big Life Nurseries	Self Help	Total
Incidents										
2013/4	73	18	104	1	0	2			152	350
2014/15	115	7	60	1	2	3		21	130	339
2015/16	130	2	34	5	0	5	2	11	240	429
SUI										
2013/14	0	0	5	0	0	0			8	13
2014/15	4	0	2	0	0	0		2	11	19
2015/16	4	0	6	0	0	0	0	0	8	18
Near miss										
2013/14	4	5	189	0	0	0			1	199
2014/15	1	0	61	0	0	0		2	2	64
2015/16	0	1	3	1	1	0	2	0	2	10

This year we clarified the categories of Incident, SUI and Near miss and as a result we have improved the consistency of reporting across the group. The overall number of incidents and SUIs have remained relatively stable over the last two years. However the near miss reporting this year had decreased and this may be due to under reporting.

Most Incidents happen in Self Help and these reflect the nature of the service: suicide, suicidal ideation and safeguarding. However there were a number of Information Governance breaches which related to sending information to the wrong person. These have been addressed under the Information Governance section.

Big Life Centres have the next largest number of incidents and these relate to suicidal ideation, self neglect, self harm, domestic violence, reports of sexual abuse, threatening behavior and breaches of lone working procedures.

Big Issue North had 34 Incidents, primarily relating to thefts and aggressive behavior. Big Life Nurseries incidents primarily related to domestic abuse and supervision of children.

All of these incidents were reviewed at SMTs and summarised at the CSGB for identification of trends.

The number of Serious Untoward Incidents (SUIs), stayed similar to previous years, and took place in three service areas – Self Help, Big Issue North and Big Life Centres. They mainly related to the death of clients through suicide and 1 homicide. A number of clients died as a result of health issues relating to long term alcohol or drug use. There were a number of cases of overdose, one of violent aggression and an allegation of rape against a support worker. All of these SUIs were fully investigated and reports sent to the CEO and Chair of the CSGB. Summaries were provided at the CSGB to identify trends and learning.

We introduced the Incident Tracker this year, but staff struggled with keeping it up to date as it duplicated other paperwork and systems. This will be reviewed in the year ahead. The Incident and Serious Incident Policy has been reviewed and updated.

Progress on priorities from last year:

- Continue to improve consistency of reporting to CSGB to ensure lessons learned are recorded and monitored - ACHIEVED
- Design in house 'root cause analysis' training – MORE TO BE DONE
- Move to simplified electronic incident recording – MORE TO BE DONE

Priorities for the year ahead:

- Roll out root cause analysis training
- Review and improve electronic incident recording
- Review Incident and Serious Incident Policy
- Continue to cascade lessons learned

Accidents

	Big Life Centres	Big Life Families	Big Issue North	Big Life Company	LCP	Big Life Emp	Unity	Big Life Nurseries	Self Help	Total
Riddor										
2013/14	0	1	0	0	0	0			0	1
2014/15	0	0	0	0	0	3		0	0	3
2015/16	2	1	0	0	0	0	0	0	1	4
Accident										
2013/14	0	0	1	0	1	3			0	5
2014/15	0	0	2	2	0	1		0	0	5
2015/16	0	0	1	0	1	0	0	0	0	2
Minor										
2013/14	7	714	6	0	0	3			0	733
2014/15	3	62	4	0	14	0		1344	0	1427
2015/16	6	109	5	1	136	1	59	1173	1	1491
Near Miss										
2013/14	0	0	3	0	0	1			0	4
2014/15	0	0	0	0	0	0		1	0	1
2015/16	0	0	0	0	1	0	0	0	0	1

The clarification of categories has meant more accurate reporting, as confusion between 'minor accidents' and 'accidents' had previously led to a lack of consistency across the group.

There has been an increase in Riddor reportable accidents this year. The four reported accidents were:

- A member of staff tripped on a raised mat in the reception of a building we tenanted. The injuries led to a period of absence over 7 days. A report was made to the landlord.
- A staff member from a partner agency in one of our Centres tripped over a gate post when walking out of the vehicular exit. Signs have now been erected prohibiting use and the gates kept shut.
- A member of staff was knocked down by a speeding car outside of one of our Centres. The member of staff was incapacitated for over 7 days.
- A child fell from play equipment and broke a limb

The number and nature of accidents has remained relatively stable this year. The minor accidents are primarily in the Nurseries and Schools and are mainly bumps and scratches as in previous years. Note: Big Life Families is still reporting on nurseries in Stockton which explains large number of minor accidents.

The number of near misses that have been reported remains low. This may suggest a lack of reporting or awareness of hazards. The Accident tracker has not been well used and services are still using their own systems for monitoring and recording.

Progress on priorities from last year:

- Design Root Cause Analysis training and roll out – MORE TO DO
- Implement simplified electronic recording system – MORE TO DO
- Review staff awareness of Accident Reporting systems to ensure reporting taking place – ACHIEVED

Priorities for the year ahead:

- Roll out root cause analysis training
- Review electronic recording system and check process for near miss recording

Complaints

	BL Centres	BL Families	Big Issue	BL Co	LCP	BL Emp	SH	Unity	BL Nurseries	Total
2013/14	50	25	319	3	0	2	23			422
2014/15	39	4	294	0	0	0	14		15	366
2015/16	30	1	201	1	0	0	11	0	7	251

There has been a gradual decline in Complaints over the last three years and it is not clear if this reflects improved services or under-reporting. As the group has grown over this period, it would suggest the latter. In the year ahead we will review how we tell people about the complaints process.

The Big Issue North continue to have the highest number of complaints. Most complaints were about vendor behaviour on the street and were made by members of the public. Other complaints included issues such as the magazine price rise and quality of supported accommodation. The Big Issue North staff have reviewed pitch management systems and maximize the outreach they undertake to minimize complaints. The magazine price was raised for the first time in three years and only a small number of complaints were received on this issue. One of the supported housing units had an infestation of mice and lice, which was treated speedily.

Big Life Centres had the next highest number of complaints. These varied across a number of issues including: missed appointments by a coach, wrong template letters being sent out, lack of professionalism by staff, information governance breaches, bathroom facilities, room bookings, cleaning, restrictions on access to services (age), waiting times, and mail distribution in Centres. Action has been taken to address these where possible.

Self Help complaints related to administrative errors when booking appointments, information governance breaches when sending information, waiting lists, discharge procedure, quality of interaction with staff, interruption of self help group. All these were investigated and action taken.

Big Life Nurseries complaints have halved since their first year of operation (from 15 to 7). The main complaints related to: regularity of nappy changing, communication with parent, and settling in procedures. However, reporting has been irregular and suggests that some complaints have not been recorded.

	BL Centres	BL Families	Big Issue	BL Co	LCP	BL Emp	SH	Unity	BL Nurseries
2013/14	98	48	77	100	N/A	50	100/A		
2014/15	94	80	80	N/A	N/A	N/A	100		100
2015/16	83	100	88	100	N/A	N/A	100	N/A	100

Percentage of complaints responded to in 7 days

The number of complaints responded to in seven days has improved across the group except in BL Centres. It is not clear why this is the case, and may reflect more complex complaints. This will be reviewed in the year ahead.

Progress on priorities from last year:

- Continue to publicise 'You said - we did' across all services – MORE TO DO
- Focus on improving response rates in businesses not achieving targeted seven days – ACHIEVED except for BL Centres
- Add a section on the report to ask for explanation of why we are not responding with seven days - ACHIEVED

Priorities for the year ahead:

- Review how each service publicises complaints process
- Support BL Centres to improve performance on response rate
- Review how complaints are recorded

Positive Comments

	BL Centres	BL Families	Big Issue	BL Co	LCP	BL Emp	SH	Unity	BL Nurseries	Total
2013/14	86	263	55	5	3	4	723			1390
2014/15	136	253	71	46	15	5	1699		98	2323
2015/16	67	140	99	28	40	7	2138	20	59	2598

The total number of positive comments has increased year on year. However this hides a variation in the group, with Big Life Centres, Families and Company showing a decline. The large variation in number of positive comments across business areas is explained by different reporting – SH collate positive comments made in exit interviews, whereas other business areas don't. Next year this will be standardized.

Positive comments were received about:

- Big Issue Vendor behaviour
- Big Issue magazine content
- Activities in supported housing and Children Centres
- Support from caseworkers
- Staff in Rochdale and Salford going the extra mile to help out after flooding
- Friendly, welcoming staff

Progress on priorities from last year:

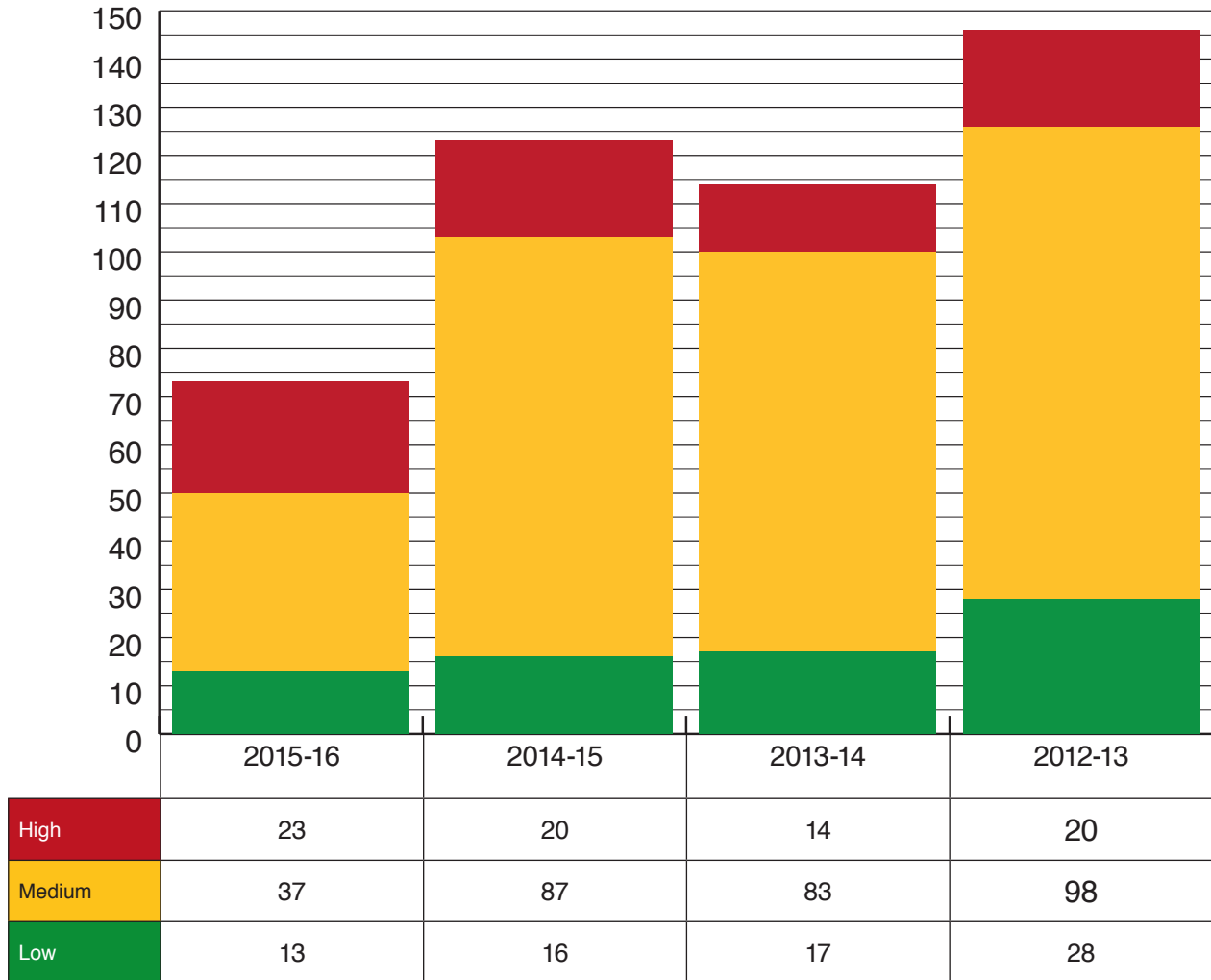
- Services to feedback how positive comments led to service improvements – MORE TO DO
- Share good practice on monitoring positive comments – MORE TO DO

Actions for the year ahead:

- Review how positive comments are collected across the group and standardize reporting

Risk Register

The risk register is a working document and each business uses this to manage risk. The register is updated monthly at Senior Management Meetings and compiled into a group Risk Register by the Finance Director. Risks are reviewed at the CSGB and the Group Board to ensure mitigations are in place.



Over the last three years the number of risks on the group register has gradually declined. This reflects improved assessment of risks and better mitigations. Risks may not escalate from the individual service area to the group register due to improved mitigations being in place.

The key risks in this year were:

- Transfer of Open Door to a new provider
- End of the Harvey contract leading to staff shortage and financial pressure
- Financial performance of the new nurseries and exit of two
- Transfer of ICT to a new provider
- Delays to the Unity school building resulting in a reduction in pupils entering in 2016

All of these were successfully managed and the risks mitigated.

The Risk Management Policy was reviewed and Senior Management Teams are now required to review the Risk Register for their service area every month. Reminders are sent to managers with the monthly cascade email. However, more work needs to be done to ensure that this is consistently undertaken.

Progress on priorities from last year:

- Embed review and update of Risk Register by SMTs – MORE TO BE DONE
- Ensure recording of new risks following Incidents etc – MORE TO BE DONE

Actions for the year ahead:

- Implement an Audit tool to monitor effectiveness of SMTs at updating Risk Register

Training

Monitoring compliance with mandatory training has continued to prove challenging due to problems with the HR database. Progress has been made in data cleansing and improving the recording process to ensure that mandatory training is captured. Issues identified include duplicate entries which will be addressed in the HR database improvement project next year. The issue with recording of internal Safeguarding training is that the current system does not differentiate Level 1, DSO or other safeguarding training, which means that relying on the HR database record for compliance is problematic. We have undertaken local audits of Schools, Children and Family services to ensure relevant Safeguarding training has been completed. We are also confident that Safeguarding is included in external key performance indicators with our Commissioned services and so is auditable and on track. Improvements to the HR database has been delayed due to the need to replace our ICT provider in year. This is now planned to be complete in 2016.

In order to ensure we keep up with mandatory training the number of courses on offer has increased year to year and we have increased the number of people trained every year:

	2013/14	2014/15	2015/16
No. of courses run	78	96	195
No. of mandatory training courses run	56	70	195
Total no. trained	730	860	884

The Group Induction, Health and Safety Briefing, IG training and Equality training have all been updated this year to respond to feedback and ensure the highest quality of delivery.

The development of a Training Academy was reliant on securing external funding, which was affected by the postponement of European Social Funds and the Skills Funding Agency. Focus is now to link to local projects / funding streams as well as evaluating opportunities within Big Life Employment to expand provision.

There has been some success this year in the roll out of Motivational Interviewing training across the Group to help underpin the approach to service delivery. Health and Safety and DSO training for senior management has also resulted in increasing skill set and competencies across the teams.

Progress on priorities from last year

- Complete changes to HR database to enable accurate recording of compliance with mandatory training – MORE TO DO
- Continue to refine and update the mandatory training courses to meet the changing needs of the group – ACHIEVED
- Develop a training academy – MORE TO DO
- Offer more bespoke training packages to teams – MORE TO DO

Priorities for 2016-17

- Complete upgrade to HR database to achieve accurate reporting of training
- Achieve 100% compliance with mandatory training
- Develop on line training tools for refresher and mandatory training
- Develop auditable means of recording Central Safeguarding training – both internal and external
- Evaluate requirements across the Group as part of an update to the Training strategy linked to staff Competency Frameworks

Safeguarding Children

A Section 11 Audit was carried out by external consultants on the groups Safeguarding processes and an Action Plan developed. To oversee this a full time Safeguarding Lead was appointed to work across the group. Key actions undertaken:

- Trained 56 Designated Safeguarding Leads
- Established electronic Safeguarding Tracker
- Mandatory Safeguarding training reviewed
- Established a Safeguarding Leadership Team to oversee compliance and embedding a learning organisation approach to Safeguarding

There were 89 reports of Safeguarding concerns to the group lead this year. The Safeguarding lead advised on practice and monitored implementation of actions. The concerns came from all areas of the group, but primarily (as in previous years) from SH and Big Life Families. In the final term requests for support reduced from Self Help as the result of staff training on managing disclosure of historical abuse.

The Safeguarding Lead audited the Electronic tracker against her own record of Safeguarding concerns and found that it was not being used effectively. It appears that most staff used specific database case recording systems and the central tracker was seen as duplication of paperwork. It was therefore agreed that the Safeguarding Lead would have access to audit individual service Safeguarding records, rather than keep a central record as an interim measure. Schools have purchased a bespoke system for monitoring all safeguarding concerns and incidents called CPOMs and this is being reviewed for use across Children and Family Division to support identification of patterns and improve reporting.

The Safeguarding training is being reviewed across the group as historically some areas of the group have only accessed external training via local children's safeguarding boards. An interim system has been put in place to audit previous training accessed and identify priority areas for training across the group. The revised policy will clarify expectation on levels of training and ensure that those accessing external training also attend an internal policy briefing so they are aware of the Big Life policy and how it applies to their individual business division and service area.

Progress on priorities from last year

- Embedding Section 11 audit across group – ACHIEVED
- Improve understanding across group of required standards for internal reporting – ACHIEVED
- Introduce use of client database (Big Life People) to record safeguarding incidents – MORE TO BE DONE
- Develop a system for file audits to ensure quality and compliance across the group – MORE TO BE DONE

Priorities for next year

- To review safeguarding policy
- To carry out revised Section 11 audit
- Audit current compliance with safeguarding training and implement training plan
- Establish cycle of DSLs meeting informed by feedback from CSGB
- Embed audits and peer audits and integrate into group audit cycle

Adults at Risk

The Adults at Risk Policy was reviewed this year and updated. Designated officers to provide advice on Adults at Risk were identified across the group and 22 people undertook training facilitated by NAPPI UK.

27 enquiries were made to the Adult at Risk Lead asking for advice and support, ranging from prevention measures to reports of abuse, including :

- How to support a client alleging harassment by a staff member of another service
- Attack on a non English client by his landlord
- Clients reporting self harm and suicidal ideation
- How to manage allegations of sexual exploitation or breach of professional boundaries

The Adults at Risk Lead has been working jointly with the Safeguarding lead to revise the training and auditing process across the group. 9 people have accessed Training the Trainer course delivered by NAPPI UK and will facilitate a new Adults at Risk mandatory training course for all staff over the next 12 months

The recording of Adult at Risk concerns is primarily through individual client records or centrally through the Adults at Risk Lead. This will be reviewed in the year ahead.

Progress on priorities from last year

- Training for all safeguarding leads - ACHIEVED in all adult services
- The development of an audit tool to check compliance with the new Adults at Risk Policy – Audit template ACHIEVED

Priorities for next year

- Adult at Risk Safeguarding Leads to be identified on STARs
- Roll out integrated audit of systems and processes across the group
- Review recording of Adults at Risk Concerns
- Attendance at Mandatory training for all staff

Information Governance

There were 29 Information Governance Incidents this year. The majority (20) were in Self Help and related to the transfer of information (information sent to the wrong person by post/fax or email). Three of these were due to a technical error with equipment or software. The other breaches also related to transfer of information to the wrong recipient. All information has been destroyed by recipients. To address these breaches a number of actions have taken place:

- A learning the lessons article has been included in the Big News to remind staff to be extra vigilant
- An audit of the GP addresses on SH database has been undertaken to ensure they are up to date
- Big Life Database security has been reviewed to reduce the risk of personal information being shared in error
- Cryptshare has been obtained for group use and staff have been briefed to use this for the transfer of all confidential information.

There were a number of risks associated with the previous ICT supplier and the transfer to a new supplier. We undertook a full privacy impact assessment to manage the transfer of information during this high risk situation. During this period back up information was stored in a secure location, until the new supplier became fully operational.

There have been 17 requests for information across the group this year. Nine were in Self Help, 7 in Big Issue North and 1 in Big Life Families. The majority of these related to the investigation of crimes. Two requests were not authorized as the public interests grounds were not met. Self Help are very experienced at managing Subject Access Requests and similar robust procedures need to be developed in other areas of the group.

The Information Governance Briefing for staff was reviewed and updated, and is now incorporated in the Group Induction for all new starters. All staff are required to either complete the NHS Introduction to Information Governance module on line or attend an Information Governance Briefing. Compliance with training is being monitored and we are aiming for 100% compliance next year.

We have responded to one Freedom of Information Request this year about expenses paid to senior staff in Big Life Schools. We need to further develop procedures for responding to FOIs across the group.

Progress on priorities from last year

- Roll out secure eFax and secure file transfer across the group –
Secure file transfer – Achieved. eFax – MORE TO BE DONE
- Implement FOI policy and procedures – MORE TO BE DONE
- Support businesses to implement operational procedures for Subject Access Requests – MORE TO BE DONE
- Improve training compliance – MORE TO BE DONE

Priorities for next year

- Reorganize the group archive and transfer to a new provider with an inventory
- Implement division-level IG leadership

Service Experience Audit

The Service Experience Audit was undertaken in spring 2016. The purpose of the SEA is to add more qualitative data to the other surveys, interviews and focus groups carried out across the group and to improve the way people experience our services. 11 Volunteers applied to take part, 5 attended training, but only 3 completed the audit due to changing circumstances.

Four audit methods were used, in 101 separate audits, covering all areas of the group:

- Telephone calls x 41
- Website reviews x 20
- Emails x 21
- Mystery Shopping x 19

Below is some of the findings of the volunteers.

Phone calls:

- Most calls were answered quickly, with a clear tone. However, some calls took 5-6 rings before being answered
- Volunteers did not always feel listened to when calling asking questions
- The person answering the phone sometimes sounded rushed and wanted to get the caller off the phone
- If answering machines are used, who is responding to messages left?
- Volunteers were told that somebody would ring them back, but in some cases this has still not happened
- Reception staff don't always know about services located within their buildings

Website review:

- The information was not always clear enough
- Some of the websites can be confusing when you don't understand the group. For instance, when looking for Longsight Children's Centre, it can only be found on Big Life Families page – which is confusing
- Out dated information on websites
- Emails sent via the website page were not responded to
- Links on websites not working, such as links to questionnaires for further information
- No contact details on websites. Volunteers felt that names of a person/people to contact would feel more personal

Emails:

- Response time to emails was not fast enough
- Emails sometimes had to be sent a second/third time to get a response
- Email addresses are not available on the website
- Some volunteers were responded to saying that their query had been passed to another person, but no response after that

Mystery shops:

- Sometime there was a long time where volunteers were left waiting at reception desks, without being acknowledged
- Not feeling welcome, felt rushed
- After asking for information at reception, a volunteer asked to use the toilet. They were let through the door, into the centre without being accompanied, where children were present. They were not asked to sign in, or show any identification.
- Professional welcome, but could have been friendlier
- Some buildings looked tired and decor and furniture need updating
- It was not always possible to see rooms when visiting to book them. It would be good to have photos available for rooms to rent/meeting rooms, which could also be put on the website.

Following the SEA, each service received a detailed report giving feedback on their audits. Assistant Directors are now compiling Action Plans to address the issues raised.