

The logo for The BigLife group is a white, rounded hexagonal shape with a thick orange border. Inside the hexagon, the text "The BigLife group" is written in a white, sans-serif font. "The" is on the top line, "BigLife" is on the second line, and "group" is on the third line, all in white. The background of the entire page is a dark blue color with a pattern of lighter blue, abstract, organic shapes that resemble cells or biological structures.

**The
BigLife
group**

Clinical Service Governance Annual Report

2016 - 2017



Introduction

The
BigLife
group

“Once again it has been a privilege and a pleasure to chair the Clinical and Service Governance Board. The last year has seen a great improvement in the mandatory training numbers leading to 100% compliance across the group.

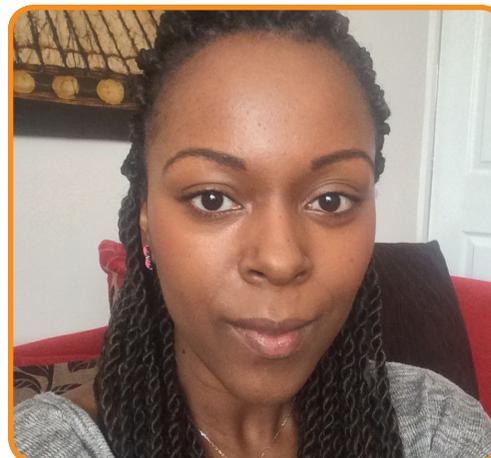
It is fantastic that we are able to report no RIDDOR accidents compared to the four last year.

There has been a huge improvement in reporting this year, especially in safeguarding and training, and we are working hard to ensure that this progress

continues over the coming year.

The planned move to an integrated group-wide audit next year, instead of individual audits, will consolidate all aspects of CSGB areas ensuring that there is high quality, efficient and effective audit across the group.

It is clear that all staff across the Big Life group are continuing to work hard to minimise the number of incidents and accidents occurring whilst reporting promptly and in the correct way.



As the group grows, we must continue to operate in a safe, open way whilst staying true to the Big Life values.”

Louise Grant, Medical Director, The Big Life group.

Health and Safety



We're committed to ensuring that health and safety is at the forefront of our business, and this year we successfully retained our Health and Safety CHAS accreditation.

We have more staff trained in health and safety than ever, with:

- **28** health and safety reps
- **17** fire marshalls
- **31** emergency first aiders
- **5** paediatric first aiders
- **9** staff trained in IOSH

100% of Big Life staff have mandatory basic health and safety awareness training.

Last year, we said we would...

- ✓ Review and revise the health and safety policy – **complete**
- ✓ Complete Mandatory health and safety briefing – **complete**
- ✓ Review Electronic Green Books to ensure simple for staff to use – **complete**
- ✓ Develop health and safety reps in every business – **complete**
- Ensure accurate records of training are maintained – **ongoing**

This year we will...

- Embed the health and safety rep role
- Maintain CHAS standards and accreditation
- Ensure certificates for training are saved on HR database
- Provide online health and safety training

Incidents



The number of incidents and SUIs has increased by **28%** this year. This reflects the increase in the mental health services we deliver and better internal reporting of incidents by the drug and alcohol service.

All SUIs were fully investigated and reports sent to the CEO and Chair of the CSGB.

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

Actions were instigated to resolve all matters, including:

- Updating the Self Help operating manual,
- New procedures for escalating matters to senior officers
- Improved administration procedures and checks
- New assessment tools introduced across Self Help

Last year, we said we would...

- ✓ Review Incident and Serious Incident policies – **complete**
- Roll out root cause analysis training – **ongoing**
- ✓ Continue to cascade lessons learned – **complete**
- > Review and improve electronic incident recording – **to action this year**

This year we will...

- Introduce a new electronic incident recording system
- Deliver Root Cause Analysis training to all managers

Accidents



We significantly reduced the number of accidents this year. This reflects the decision to categorise bumps and scratches in our early years settings as minor accidents. Bearing that in mind, the number of minor accidents has remained relatively stable compared to last year.

This year we had **0** RIDDOR reportable accidents, compared to **4** last year.

We have had **4** non-RIDDOR accidents, including:

- A pupil hit with a football following a hernia operation
- A pupil trapped finger in door
- A pupil bumped head
- A pupil hit in face with ball

Near misses has increased to a total of **5** this year. This is positive in that staff are reporting better and we are able to learn lessons quicker to prevent accidents in the future.

Last year, we said we would...

- ✓ Review electronic recording system and check processes for near miss recording – **complete**
- Roll out root cause analysis training – **ongoing**

This year we will...

- Review options and implement new electronic accident recording software

Complaints



We have had 2% decrease in complaints than this year, continuing a decline which has continued for 4 years. However, as the group has grown over this period, this suggests under-reporting.

Skills and Employment received **182** complaints:

- Big Issue North complaints were often about vendor issues and behaviour
- Employment services complaints were more often about client experience

Children and Families received **33** complaints, related to:

- Lack of childcare places
- Communication with parents
- Settling in procedures

Health and Wellbeing received **60** complaints, including:

- Lack of information on services
- Waiting lists
- Lack of professionalism by staff

Group Services received **4** complaints, all relating to other services in the group.

All complaints were investigated and action taken where required. The percentage of complaints responded to in seven days has improved across the group.

Last year, we said we would...

- ✓ Review how complaints are recorded – **complete**
- Continue to publicise 'you said - we did' across all services – **ongoing**
- Support Health and Well Being to improve performance on response rate – **ongoing**
- Review how each service publicises complaints process – **ongoing**

This year we will...

- Support Health and Wellbeing to improve performance on response rate
- Review how each service publicises the complaints process
- Publicise 'you said – we did'

Positive Comments



The number of positive comments has decreased this year, but there is work to do to ensure consistent reporting. It was agreed to standardise reporting across the group and only record unsolicited positive comments in future.

Positive comments were received about:

- The helpful, friendly staff at a nursery
- A lovely assembly at a school
- The work of the communications team
- The CEO update in the Big Life Bulletin
- The content of Big Issue North
- Support from caseworkers
- The look of the reception, with books laid out for children to read
- The quality of services provided at Manchester's health and wellbeing centres
- The welcome at our centres

**Last year,
we said we would...**

- Review how positive comments are collected across the group and standardise reporting – ongoing

**This year
we will...**

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

Risk Register



The general trend is for the total number of risks to continue to reduce over the last four years. This reflects improved risk assessment and faster action taken to reduce risks to an acceptable level.

The risk register is now an integral part of the monthly senior management meetings, which brings earlier risk assessment and earlier mitigation.

The key risks in 2016/17 were:

- The financial performance of several nurseries
- A loss-making contract in Employment Services
- The closure of a contract
- Uncertainty of the future for Roma vendors of Big Issue North
- Cash flow within the merged Big Life Company
- Insufficient accommodation for HQ and short term accommodation for Self Help

Last year, we said we would...

- ✓ Review Risk Framework and Policy – **complete**
- Implement an Audit tool to monitor effectiveness of SMTs at updating Risk Register – **ongoing**

This year we will...

- The Quality Lead will attend SMTs across the group, to keep risk an integral part of their agenda

Training



Over the past 12 months we have focused on ensuring that accurate training data is held on the HR database, enabling good quality reporting and reliable data.

We have identified the training associated with every functional role within the group (first aider, fire marshal, and health and safety representatives).

We have increased the number of training courses we have run, especially in terms of mandatory training.

Number of courses run: **280**

Number of mandatory training courses run: **185**

Number of places taken on training courses: **1,832**

Last year, we said we would...

- ✓ Upgrade the HR database – **complete**
- ✓ Achieve 100% compliance with mandatory training – **complete**
- ✓ Develop auditable means of recording central safeguarding training – **complete**
- Develop an online training tool for refresher training and mandatory training – **ongoing**
- ✓ Evaluate requirements across the group – **complete**

This year we will...

- Create a training plan to include mandatory, optional and vocational training
- Implement an online training portal
- Develop a combined adult and children's safeguarding course
- Use the apprentice levy to deliver occupational training
- Create a centralised process for managing apprenticeship programmes
- Offer expert learning sessions delivered by guest speakers

Safeguarding Children



Last year, **325** safeguarding concerns and incidents were reported, and all of them were submitted within 24 hours of being identified. Concerns and alleged incidents included physical and emotional abuse and neglect.

Significant progress has been made last year. Following a group-wide audit, an action plan has been devised with a clear schedule of service-based audits in place to focus on individual safeguarding practices.

The quality case file audit document has been revised and shared with teams, and service managers have been given the opportunity to feedback. Following the first round of audits, a 'lessons learned' document has been shared with service leads and Divisional Directors.

The new starter process has been amended so all new staff must go through a safe recruitment process.

Last year, we said we would...

- ✓ Review safeguarding policy and associated policies – **complete**
- ✓ Put in place a safeguarding audits schedule – **complete**
- ✓ Put in place a clear training plan – **complete**
- ✓ Put in place a DSL meeting schedule – **complete**
- Establish an audit cycle and integrate into the group audit cycle – **ongoing**

This year we will...

- Ensure each service completes an audit in line with the schedule
- Appoint a Domestic Abuse Lead
- Develop systems to securely report on safer recruitment
- Improve processes for tracking safeguarding incidents

Adults at Risk



126 people accessed Adult at Risk training last year. We have been developing joint training with Children Safeguarding leads, and intend to roll out combined safeguarding sessions from September.

115 concerns were made to DSLs and reported to the safeguarding lead last year. The main reporting trends were:

- Domestic violence
- Concerns about emotional abuse
- Self-harm
- Suicidal ideation

The Adults at Risk Policy has been reviewed and updated, and now includes 'Claire's Law' to support people to access information about partners who may have previously committed domestic violence offences. We are also developing access to Freedom Programme for people who suffer Domestic Violence abuse.

Last year, we said we would...

- ✓ Identify all Adult at Risk Safeguarding Leads on STARs directory – **complete**
- ✓ Develop auditing process for Adults at Risk – **complete**
- Ensure all staff attend mandatory training for all staff – **ongoing**

This year we will...

- Implement joint safeguarding training
- Roll out an auditing process as part of a safeguarding audit plan
- Increase the role and responsibilities of DSLs

Information Governance



There were **19** Information Governance incidents this year. The majority of these were minor, with one more serious incident, which was reported to the Information Commissioner.

Measures to reduce the number of incidents include:

- Standard operating procedures for administration
- Audits and error meetings
- Checking client contact details at every contact

In total there have been **33** public interest information requests this year, which is a significant increase from the previous years. There have also been **4** FOI requests.

There were several laptop thefts reported. As the laptops did not contain personal data these incidents did not have to be reported as IG incidents. However as a precaution IT have encrypted all of the group's laptops.

This year we have sourced a new archive for the group's paper-based historic information – and done extensive work to sort out the current archive. We will transfer information to the new archive next year.

Last year, we said we would...

- Reorganise the group archive and transfer to a new provider with an inventory – **ongoing**
- Implement division-level IG leadership – **ongoing**

This year we will...

- Consolidate the IG toolkit
- Ensure compliance with General Data Protection Regulation

Service Experience Audit



We carried out **122** audits altogether across all services within the group (an increase from **101** audits last year).

18 Mystery Shops

- ✓ Most centres were tidy and clean
- ✓ Generally environments were bright and clean
- ✓ No health and safety issues were seen
- There was no-one to speak to at one reception
- Big Issue North Sheffield was hard to find
- Our nurseries felt quite clinical inside
- No prices were given for room bookings at the centres

19 Email Audits

- ✓ Some responses were quick and clear
- One auditor had seven emails with no reply or invalid email addresses
- An email to received an out of office for a member of staff who had left, but no further contact details
- All auditors felt the response rate to emails were very slow

40 Website Reviews

- All websites were quite confusing, particularly the group site
- The Manchester centres “What’s on guide” needed to download as a PDF
- There was no clear contact details for Group Services
- Links were broken on some pages
- There was no response from submitting enquiry forms

45 Telephone Calls

- ✓ Most auditors were happy with the majority of calls and information given
- A nursery was very noisy and the call felt rushed
- A caller was passed around and given several different numbers to ring
- Staff sounded stressed and not very helpful
- A voicemail was left about a referral but was not returned

The audit is available on the group’s website. Each division reviewed the findings and agreed action plans to address issues and ensure improvements.





The Big Life group

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 @biglifetweets