



Clinical Service Governance

Annual Report 2020/21

Introduction

Last year saw us face some of the biggest challenges we have dealt with at Big Life and I am honoured to say we continued to offer safe and effective services despite the pandemic. Our response to the crisis was timely and efficient as we managed staff, service user and public risk by implementing a number of operational measures. A Covid Response team was set up immediately and communication with staff remained a priority. Services were adapted to ensure they could still be delivered effectively but also safely. Risk Assessments were developed and procedures implemented across all sites to maximise safety for all parties. These included the wearing of suitable PPE, increased cleaning, social distancing measures and safe working guidance. Agile working allowed us to continue to maintain frequent contact with our staff, people who use our services and third parties and has proven to be a valuable tool that we will continue to use as we move forward.

I am delighted to report that all services have been brought into scope for ISO 9001 and 14001 and have been subject to external audit which validated our processes as strong. We have retained our CHAS standard for another year and will work towards bringing services into scope for a new Health and Safety standard next year.

Our centralised Incident Management System has now been launched and is being used across all services. This centralised management system will improve quality, reporting and shared learning for the Group.

We have continued to develop our staff through offering new and bespoke training via our Learn Well team as identified through training needs analysis.

This year we will continue to focus on how we can demonstrate our Big Life values and improve our service offer through learning via our staff, people who use our services and the wider community as a number of new projects are launched inline with our business plan.

Louise Grant, Medical Director, The Big Life group.

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Health and Safety

Health and Safety has been a top priority and fundamental in ensuring we have kept our staff, people who use our services and third parties safe when delivering our services and adopting agile working measures throughout the pandemic.

A Director and Quality Manager are responsible for providing leadership on Health and Safety across the group. They support a network of Health and Safety representatives in each service.

The 22 Health and Safety Representatives have continued to meet quarterly and have been influential in making decisions on safe practice and staff welfare. This has helped us promote a positive culture within the group as we continue to collaborate with our staff on decisions.

We have developed new risk assessments for our buildings, offices and staff that focus on Covid risk and how we can safely mitigate these. We have produced safe working guides and best practice for staff when they have been at a work site or working from home. A Covid Response team was set up using managers and key staff to discuss our controls and approach, keeping Health and Safety at the top of our priority.

Staff comment about H&S Rep in Big Life Schools:

Rachel is always quick in responding to queries, especially around sensitive issues such as pregnancy concerns and covid. At the school we have a number of staff that are working so closely with children every single day, and most of these children are little and do not understand personal space. Expectant staff mothers were concerned around their safety, yet wanted to ensure that they could continue their valuable work. The feedback Rachel sought from the Health and Safety Lead, gave us confidence and helped us put a plan in place for staff members to feel safe throughout their working day.'

We have successfully retained our industry recognised standard Health and Safety CHAS accreditation for another year. Next year we will look to bring all services into scope for the ISO 45001 Health and Safety standard which will bring inline our management of Health and Safety with our current management systems across the Group.

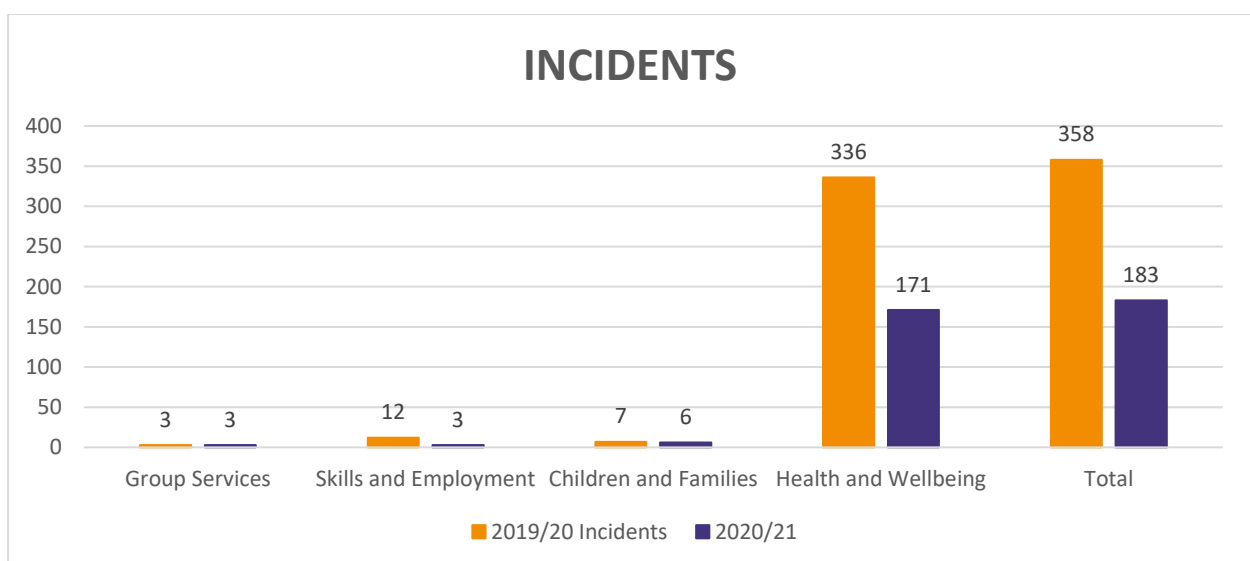
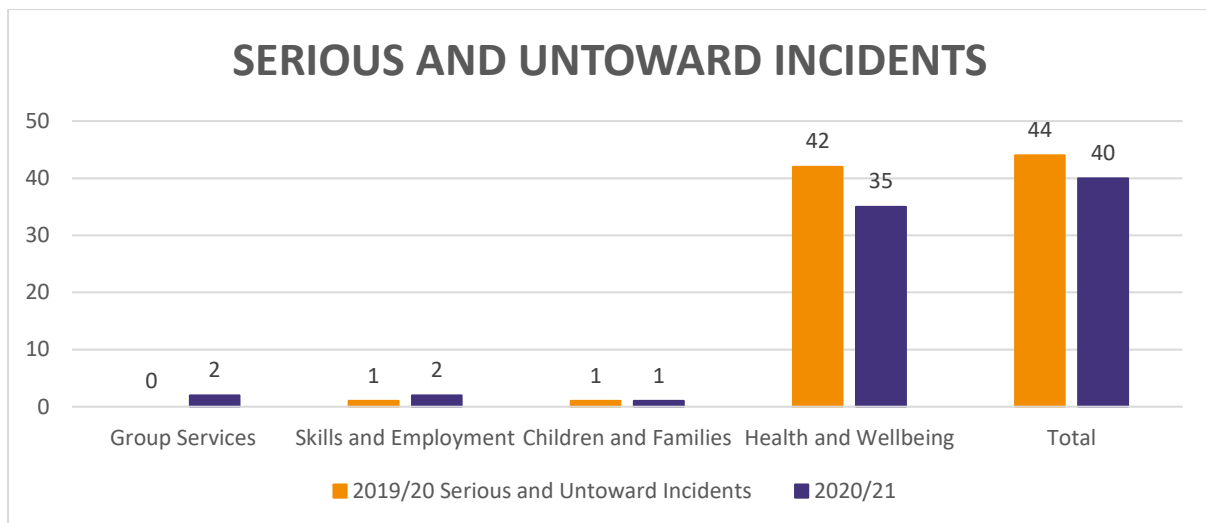
Despite the disruption and closure of sites we have remained up to date with our Health and Safety Audits and have continued ongoing maintenance where necessary and possible. One of the biggest challenges this year has been updating training for staff in Health and Safety roles, such as Fire Marshalls and First Aiders. This training is delivered face to face due to the practical elements and due to restrictions and the closure of our buildings we have not been able to facilitate face to face training. As more people return to our workplaces we will prioritise refresher training to ensure we have sufficient trained staff in all locations.

This year we have trained:

- Paediatric First Aid - 20
- Emergency First Aid at Work - 3

Incidents

The number of SIRIs has decreased slightly by 9%, but the number of people we worked with this year decreased by 20%, which means that proportionately we had more SIRIs. The majority of SIRI reviews are client deaths and primarily in the Health and Wellbeing Division, which is consistent with previous years. All SIRIs were fully investigated, and reports reviewed by an Executive Director and the Medical Director (Chair of CSGB). Summaries of all SIRIs are provided at the CSGB meetings to identify trends and learning.



Incidents have decreased disproportionately to the reduction in number of people we worked with (by 48% compared to 20%). This is due to a decrease in the number of people we have engaged with face to face, meaning that staff have been less likely to pick up on suicidal ideation or child safeguarding risks.

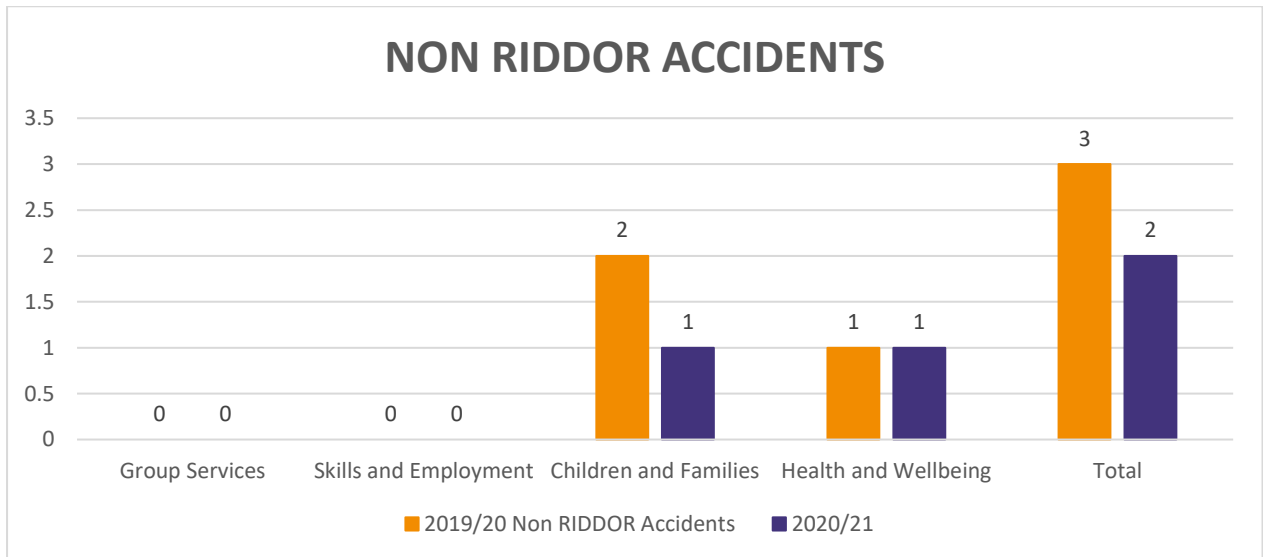
Incidents include - breaches of confidentiality; suicidal ideation; threats of harm to others; Covid infections; hoarding; and bike theft. There was one incident of an unknown person accessing a school lesson online.

All of these incidents were reviewed at Senior Management Teams and actions taken to minimise risks and repetition. This included new guidance being produced on Zoom settings and improvements to CCTV coverage. Incidents were summarised for the CSGB to identify trends and share learning.

This year we developed a new Incident Management System (IMS) to record Incidents, Accidents and Safeguarding documents. The IMS is being tested in services and will be rolled out next year. We are confident that it will be a real resource to help improve the quality and safety of our services in the future. In developing this project, we have identified a skills gap in business process analysis and a formal process for change management, which we will fill in the year ahead.

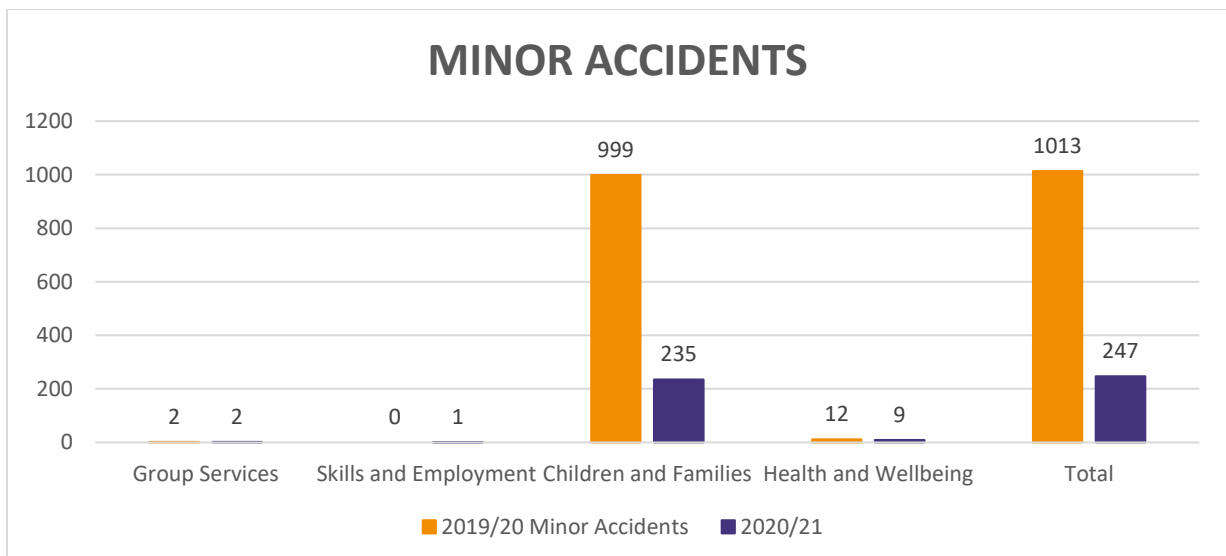
Accidents

This year we have had no RIDDOR reportable accidents, which is consistent with the previous year, and non RIDDOR accidents remain low.



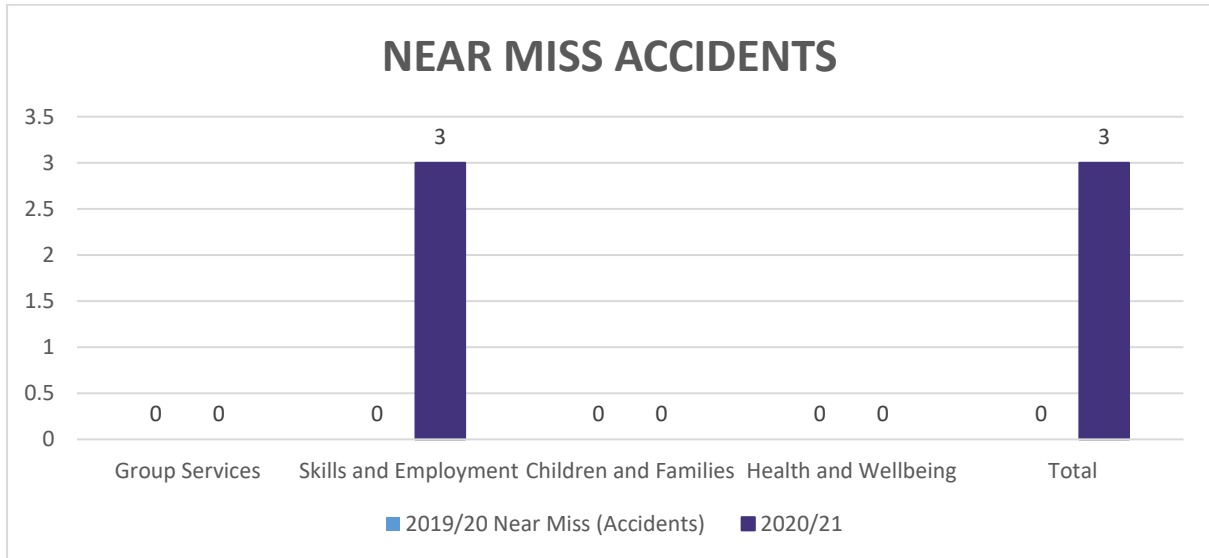
The Non RIDDOR accidents were:

- Child bumping their head.
- Staff member tripped whilst getting out of their car.



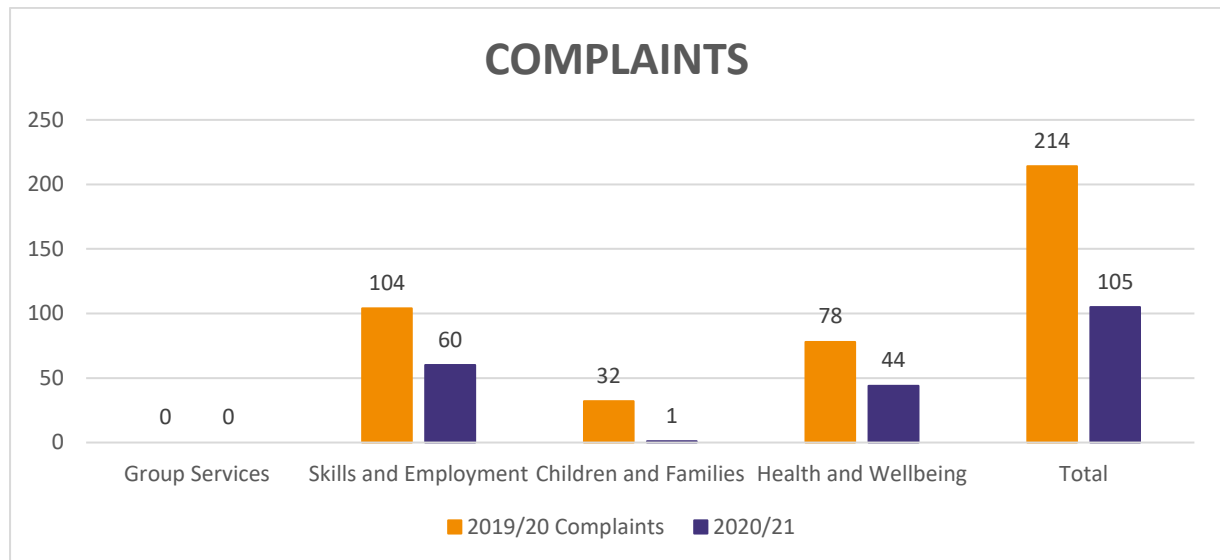
The number of minor accidents has decreased by over 75% this year compared to the previous year. This is due to the closure of the schools and nurseries during the Pandemic.

Accident types continue to remain consistent with previous years, with the majority arising at the schools and nurseries. Accidents were - bumps, grazes, trips, and falls, in the main occurring during playtime.



Complaints

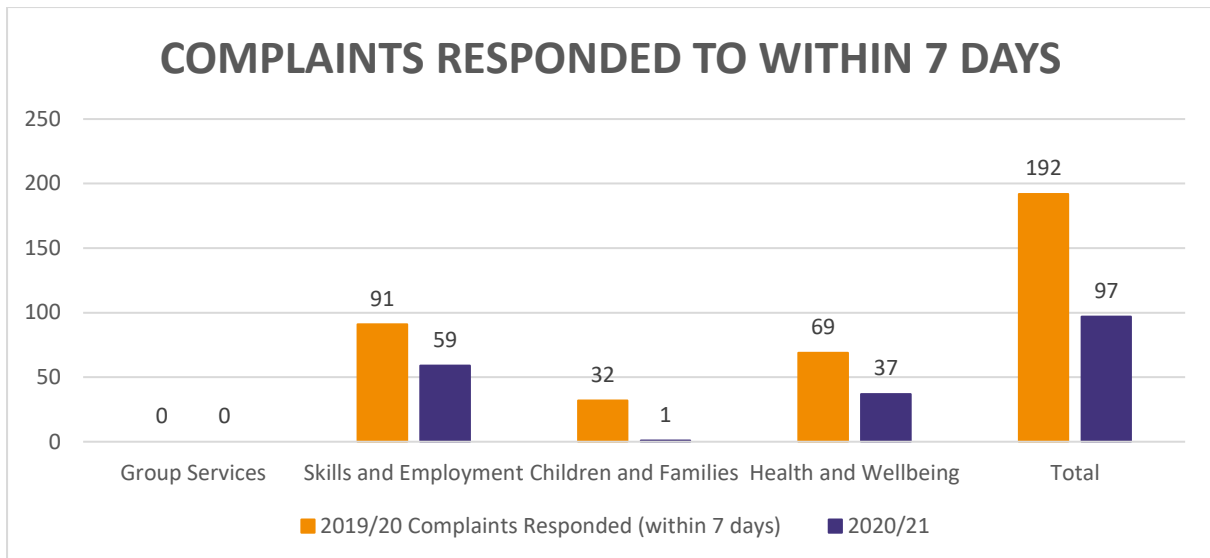
The numbers of complaints have decreased by over 50% compared with last year with all divisions seeing a reduction. This is disproportionate to the decrease in the numbers of people we worked with over the last year (20%). This is possibly due to the reduction in face-to-face activity in all service areas.



Skills and Employment received 60 complaints, all of which were for Big Issue North. The themes remain similar to previous years and relate to vendor selling issues and behaviour on the street. Due to the pandemic vendors have not been present on the street selling the magazine as often and as a result we have seen a reduction in complaints. The staff have continued to do outreach work on the streets when we were not in lockdown and have worked on new solutions to provide vendors with support during this difficult period.

Children and Families received one complaint regarding potential breach of Covid safety guidelines for a planned event at school. As a result of the complaint plans for the event were changed to ensure it was Covid safe.

Health and Wellbeing had a decrease in complaints this year by 42%. Key themes include client dissatisfaction with advice and service provided and staff interaction. Complaints have been spread evenly across the services, with no service receiving significantly more complaints than another. All complaints were investigated, and action taken where required.

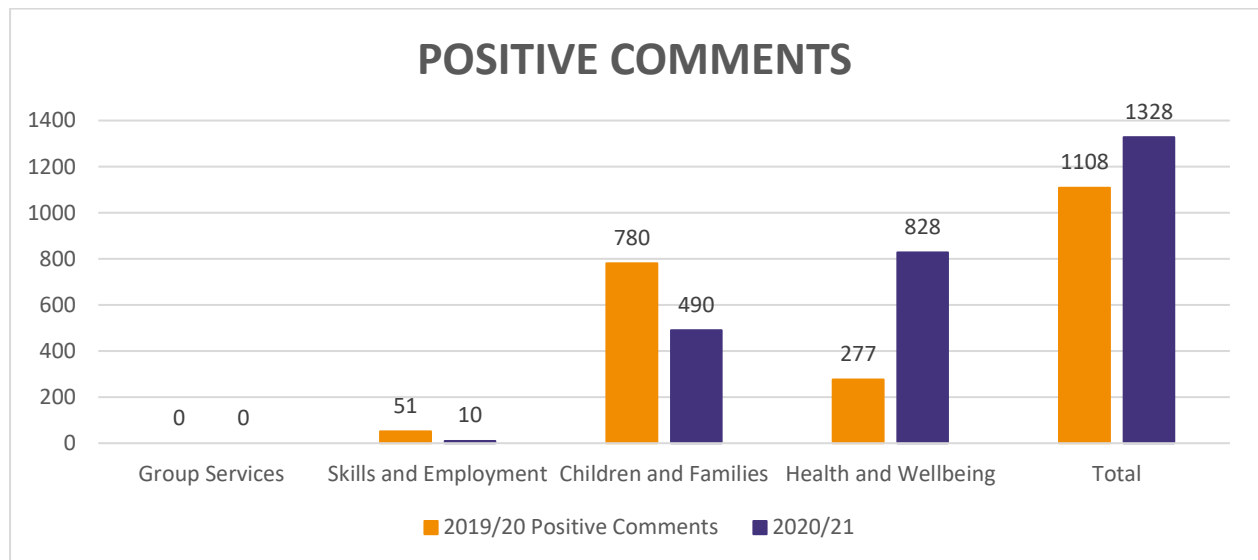


A total of 92% of complaints received were responded to within 7 days. Those that were not responded to within that time was due to the inability to contact the complainant. Some people who complained did not require a formal response.

Following a complaint in 2019/20 we committed in our Business Plan to introduce a call recording service to drive quality improvement in customer experience. In the last year we have explored options for implementation and will be progressing with a solution in the year ahead.

Positive Comments

The total number of positive comments has increased this year by 20%. However, this is mainly due to a substantial increase in the Health and Wellbeing division, whilst other divisions saw a decrease.



Children and Families received fewer positive comments this year as a result of the lockdown which intermittently closed face to face services. To facilitate home learning the schools introduced a new online platform - Class Dojo. They received many messages through Class Dojo which were supportive of the home learning support and thankful for the COVID and vaccination communications.

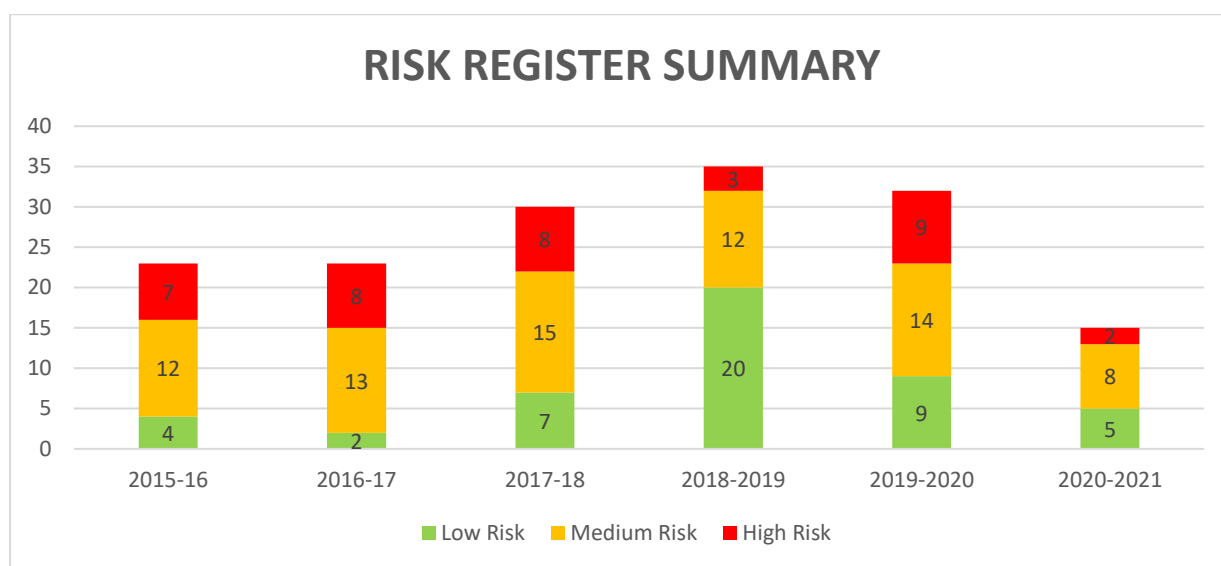
Health and Wellbeing has had a significant increase in positive comments on last year. This is due to an increase in online social media presence where comments are captured and improved recording. Key themes include the value of support people have received; food distribution support from our Healthy Living Centres, and praise from GP's regarding the service provided to individuals.

Changes made as a result of positive comments:

During covid Be Well received lots of positive comments from people who use our services about the flexibility of doing sessions over telephone or on zoom and also doing sessions out and about walking, rather than at a venue. Although lockdown is now eased, we have continued to offer this flexibility. Now when someone comes to the service we ask them how they want their sessions to be delivered and they can pick and choose how they want to continue to be supported during their journey with us.

Risk Register

Figures for 2020-21 indicate that the total number of risks have decreased substantially from 32 in 2019-20 to 15 this year. Whilst this might seem odd in a year where we have experienced a pandemic, it reflects the reduction in risks associated with delivering services in person, as well as a reduction in the numbers of people we have worked with. Unsurprisingly, the main risks relate directly the Pandemic. The Risk Register remains a critical tool for the organisation in managing risks and external uncertainty and is an integral part of early-stage risk assessment and mitigation.



The key risks in 2020/21 were:

- Covid - Impact on Big Issue North magazine sales and vendor loss
- Covid - Potential financial loss in Nurseries
- Contracts due for renewal

Whilst Covid has been a key risk we have been able to successfully continue to offer a safe and effective service through the early identification of issues and implementation of management actions. A Hardship Fund was quickly established for Big Issue North vendors as soon as the first lockdown was announced, enabling us to give cash to peoples whose income had disappeared overnight. We reduced costs in all budgets to help weather reductions in income. We furloughed staff in a timely manner and were able to top up government payments to ensure staff were paid in full. We developed a RAID log to manage contract renewals.

Training

This year we invested in Learn Well (the group's online training platform), and it has increased its offer, it now hosts 38 courses, 28 developed by the group and 10 purchased from an external provider.

New courses developed this year include 'Trauma and ACE's', supporting the group to embed its objective of becoming a trauma informed workplace; an online version of the face to face 'Strengths Based Approaches' training; 'Domestic Violence and Abuse'. 'Menopause Awareness'; 'Drug and Alcohol Awareness'; and 'How to get the most out of Supervision and Appraisal'.




In response to the Covid-19 pandemic the group created a number of new courses to support staff including 'Bereavement' and 'BLG Wellbeing' (a resource which enables staff to see the groups full wellbeing offer). Alongside this the group continued to provide Mindfulness training and an art therapy course.


Comment by staff member on the Mindfulness Course:

I attended the 6 weeks mindfulness taster session with Karen. I found the sessions extremely useful in helping raise awareness of my feelings and living (and coping) in the moment. After just 1 week, I was already using some of the strategies introduced at the sessions and could feel an improvement in my wellbeing and self-care. After 6 weeks I coped better with some of the stresses of Covid and everyday life and was taking better care of myself, and now, some weeks after the course, I still practice mindfulness and the useful strategies taught to me."

During 2020/21 online training was accessed 2319 times.

Mandatory courses

Course	Compliance 2020/21	Compliance 2019/20
Induction	96% 	95%
Safeguarding (Adults and Children combined)	88% 	84%
Equality and Diversity	88% 	87%

Data Security Awareness	76% 	73%
Gender Inclusivity	91%	NA
Prevent	64%	NA
DSE	61%	NA

Mandatory training compliance has remained consistent for Induction, Safeguarding, Equality and Diversity and Data Security. Data security compliance is slightly lower than compliance for other mandatory courses. Staff in non-client facing roles have fed back that the course is too in-depth for their role and not suitable for all staff. A less in-depth course will be made available to staff whose role does not involve data in the next year.

Three additional courses were made mandatory this year: 'Gender Inclusivity', 'Prevent' and 'DSE'. Whilst compliance of Gender inclusivity is high, Prevent and DSE are lower. Monthly compliance reports are shared with all managers to increase compliance and overall compliance is reported in the bulletin.

The number of mandatory courses which staff are required to complete will change in 21/22 following a review of safeguarding training requirements.

In this year 2 staff have completed apprenticeships, 7 remain underway and 2 are paused enabling staff to take a break in learning. Apprenticeships will continue to be mapped against BLG roles, and next year new training pathways will be created to support personal development.

A member of staff describes the difference an apprenticeship can make:
 Completing my apprenticeship in Business Administration has enhanced the confidence I feel in being good at my job, as well as my ability to progress further. I have gained a better understanding of how to manage an office and I have been able to put the skills I gained into practice when managing the office independently during covid. I would recommend completing an apprenticeship to all my colleagues if they are given the opportunity.

The Multi Modal Practitioner PG Cert Course created with Salford University launched this year. 20 staff from services across BLG were accepted onto the course and 4 staff from Complex Lives (Doncaster Council).





Safeguarding - Children and Adults at Risk

A Director and a Group Designated Safeguarding Lead (DSL) provide leadership and support to service specific DSLs across the group. Group leads review changes to legislation, share best practice and identify lessons learned from incidents and concerns to inform and develop safeguarding practice across all levels of the group.

Quarterly DSL meetings are facilitated by the group leads, reviewing themes, trends, lessons learned from the previous quarter, engage with DSLs in the development of group wide training and completion of a range of quarterly and annual audits that informs the development of a group wide safeguarding action plan, reporting to the CSGB quarterly on progress.

This year has seen the introduction of division specific safeguarding supervision for DSLs, reviewing incidents, concerns to ensure learning and sharing of best practice is identified and disseminated.

Safeguarding Concerns and Incidents

Number of new SG concerns	Total 2020-21	Total 2019-20
Of which adults	333 	158
Of which children	190 	239
Number of new SG incidents		
Of which adults	56 	51
Of which children	56 	69

The various lockdown measures contributed to fluctuating patterns of concerns and incidents being reported, and means that providing a comparison to previous years is unlikely to be useful.

Most concerns and incidents relating to children were reported from our Children and Families division, which experienced a decrease in both concerns and incidents compared to the same period last year. Whilst services remained in contact with children and families, it proved difficult to identify signs and indicators where only remote contact was permissible due to lockdowns.

Overall, we saw a large increase in reported concerns for adults. Although we had an increase in the number of services working with adults this year, the pandemic meant that we engaged with less people. Despite this the number of concerns nearly doubled. Some of this is likely to be attributable to the stresses of the pandemic on the people we worked with, but some of it is the result of improved reporting by our Drug and Alcohol services.

Themes in order of volume (children and young people)

- Concerns: Parenting concerns (including neglect), physical.
- Incidents: Neglect, physical, parenting concerns, domestic violence, and abuse.

Themes in order of volume (Adults)

- Concerns: Psychological and emotional, alcohol/drug misuse, self harm.
- Incidents: Other (including self harm), domestic violence and abuse, psychological and emotional.

Service specific Designated Safeguarding Leads (DSLs) are responsible for reviewing all incidents and concerns and signing off actions once completed. All service Team Meetings include a standard safeguarding agenda item to discuss any themes, trends, lessons learned and review of cases. Cases are escalated to the group leads if the local DSL requires further clarification on next steps.

Early Help Assessments/CPP/CIN/LAC

Type	Number of new in 2020-21
Early Help Assessment (EHA)	60
Children subject to Child Protection Plan (CP)	2
Child in Need Plans (CIN)	5
Looked after children (LAC)	7

We completed less Early Help Assessments (EHA) this year due to the lockdowns, but as restriction lifted we saw increases.

We do not currently record any themes and trends for EHAs but will develop this next year, so that we can identify if there are emerging themes that may impact on families and services supporting them.

Child in Need (CIN) numbers fluctuated from a high of 7 to a low of 2 at year end. The reductions were mainly a result of children exiting services. This was the same for Looked after children. At the end of the year, we had 5 children who were LAC in service and two moved out of the service.

Incidents and concerns are audited quarterly by the Group Safeguarding Leads, providing feedback on quality and compliance of forms completed and compliance with policies and procedures. All services demonstrated a significant improvement on both compliance and quality.

Having developed the full annual Section 11/175 Safeguarding Audit Framework, a group wide audit was completed, demonstrating a high compliance with most areas. An area of focus next year will be to consider how safeguarding policies, procedures and development includes the voice of children and adults.

A Safeguarding Training Strategy continues to develop, identifying compliance with all new legislative requirements, in line with the intercollegiate documents. The introduction of mandatory courses this year includes specialist training courses such as Prevent and Child Sexual Exploitation.

We have launched the Domestic Violence and Abuse online training for people who use our services, all staff and managers of services to ensure compliance with reporting and improved understanding and identification of DV&A.

Development of an online DSL training course is prioritised for next year, supporting DSLs to feel confident in their role, internal and external reporting requirements. This complements the introduction of safeguarding supervision across divisions for DSLs.

The HR database provides reports on safer recruitment compliance for all employees, and shows significant improvements being made this year. This has also improved since the central HR team took over monitoring. The main area for development for the coming year will be to improve the HR database by amending the rules on historical references which will enable more accurate reporting.

Information Governance

Information Governance is overseen by the DPO, Quality Manager and Caldicott Guardian, who is a director. Our Information Governance Lead continues to remain responsible for an action plan which is reviewed quarterly at CSGB. This plan takes into consideration continuous improvement across our services in line with our obligations under UK Data Protection Legislation, gap analysis reviews and regular assessment of staff training and knowledge.

This year saw a significant reduction in the number of incidents - 18 recorded across the group, compared to 30 in 2019-20. This reduction was primarily due to the introduction of Docmail, a hybrid mail service that was rolled out across our mental health services. The recorded incidents were primarily email errors which led to confidentiality breaches. There were no serious incidents. All incidents were investigated, and appropriate actions recorded.

There were 90 Subject Access Requests (SAR) received this year (compared to 180 2019-20), a 50% reduction on last year. This is due to a change in classification for reporting purposes. Services receive a number of information sharing requests from partner agencies which were previously recorded as SARs.

We received 33 Third Party requests for information (primarily from Social Workers, and Police), compared to 20 last year. We received one Freedom of Information Request regarding mental health and staff data, compared to 4 the previous year.

In line with our new agile and homeworking methods we have completed suitable data risk assessments to identify and minimise risk to information we currently hold. Staff have been provided with good practice guidance and adequate training on utilising video conferencing tools.

Significant progress has been made towards the implementation of Office 365 across the Group and along with this the centralisation of control over our mobile equipment. Our Information Governance and IT lead are currently reviewing the new requirements under Cyber Essentials to progress with this next year.

Our DPO and Information Governance Lead continue to provide ongoing one to one support to all our services.

Quality

ISO

We are pleased that all services are now in scope for ISO14001 and 9001 and have been externally audited with very positive feedback. We are now looking to bring into scope all services for ISO45001 Health and Safety standard to replace CHAS. This has been delayed by a year due to the decision to bring all services into scope for 9001 and 14001 before we progressed with 45001.

Quality Case Management

This project initially focussed on Quality Case notes training and has since developed into a wider piece of work focussing on Case Management. This is now in development with the Quality Management and key service leads and will be completed by next year. A new auditing process will also be implemented to ensure consistency and quality.

Group Certification and Accreditations

For the second year running the group achieved a Two Star Accreditation in the Best Companies Employee Engagement Survey and were fourth in the Sunday Times Best Health and Social Care organisations to work for in the country.

We continued to hold the Investors in Volunteers accreditation and improved the HRDB to ensure all volunteer data is accurate, improving communication with all volunteers.

Key Priorities

Group Progress on Key Priorities 20-21

To retain CHAS or secure ISO 45001	Complete
To launch environmental strategy	Drafted
Ensure all staff complete H&S refresher training	Developing in house Health and Safety refresher training
Review Infection Control policies and guidance	Last year focussed on implementing Covid guidelines and procedures and we will now review Group Infection Control Policy
Introduce new electronic incident recording system	Complete
Develop risk management training for all staff	Incorporated in staff training including Confident Managers
Develop integrated database for risk management	Financial Director facilitates risk management
Create wellbeing offer for staff working at home	Complete
Centralise compliments and complaints process and publicise comments	Consulting with staff
Roll out Domestic Abuse training	Complete
Develop and roll out Quality Case notes training for all services	This has now developed into a wider piece of work regarding Quality Case Management as a whole
Implement new audit framework across the Group	To be picked up next year
Further develop safeguarding training strategy for group which identifies training specific roles	Complete
Improve risk identification and risk management	Now covered in Confident Managers and staff training/induction
Review, Develop and implement DSL training and development package and process	To be developed next year
Secure Cyber Essentials	Reviewing assessment due to change in requirements of certificate
Implement Hybrid Mail system in Mental Health Services	Complete

Group Key Priorities 21-22

Launch call recording pilot	
Achieve ISO 45001 for all services	
Update H&S policies in line with agile working	
Launch environmental strategy	
Ensure all staff complete H&S refresher training	
Amend HRDB rules to improve accuracy of safer recruitment reporting	
Centralise compliments and complaints process and publicise comments	
Develop and roll out Case Management training for all services	
Implement new audit framework across the Group	
Secure Cyber Essentials	
Develop service user engagement in Quality	
Develop Change Management skills and capacity	