

Change Grow Live

Annual Report and Accounts

For the year ended 31st March 2020

Contents

Chief Executive's Report	3
Chair's Report	4
Trustees' Annual Report	5
Independent Auditor's Report	51
Consolidated Statement of Financial Activities	53
Balance Sheets	54
Consolidated Statement of Cash Flows	55
Accounting Policies	56
Notes to the Accounts	59

Our values: Be open, be compassionate, be bold.

Chief Executive's Report

I am writing this at a time when it is hard to look back and remember a world precoronavirus. Inevitably, responding to the demands of the pandemic dominated our thinking for the first part of this year, but prior work to refresh our strategy and values found us well-prepared.

Coronavirus demanded swift action to safeguard the people who access our services and enable us to continue to deliver safe and effective treatment. Ensuring continuity of care for vulnerable people who were self-isolating and shielding was essential. Digital service delivery and remote working were invaluable as a means of getting support to those people quickly and safely. Our new values - be open, be compassionate, be bold - underpinned our response and formed the basis of our decision making as we navigated new ways of working.

Our highest priority initially was to work in partnership with community pharmacies to maintain services for people on medication-assisted treatment. Prescribing regimes were changed and we focused on getting people into services as fast and safely as possible. Our more streamlined approach saw waiting times in many services halved and more people entering treatment. Recognising our wider sector responsibility we closely supported PHE and the Royal College of Psychiatrists in developing guidance for England and the wider United Kingdom.

Services across the country responded to the need to support people whose lives were made so much harder during lockdown. For example, we headed a crossprovider partnership of NHS Trusts and other charities who provide substance misuse treatment services across London to meet the drug and alcohol needs of several thousand homeless people who were moved into hotels during the pandemic. We also developed practice guidance with the Salvation Army Housing Association to promote closer and more effective joint working protocols between hostel and treatment providers to support homeless people with alcohol needs during the lockdown.

Staff dealt with the challenges of coronavirus calmly and professionally, putting their belief in people at the heart of their response and demonstrating our values in action. The people we support also accepted the need for change and responded willingly to new ways of working with us.

Over the coming year we will need to look at how we can continue to deliver effective services in new, socially distanced ways. Strong partnerships with our fellow social care providers and our colleagues in the NHS will continue to be essential. The pandemic has brought out the best in all of us and we are working together as never before in stronger more open partnerships.

Coronavirus challenged our normal patterns of life and work, but amongst the difficulties, there were some positives. There was a heartening resurgence in community values. People showed in many ways that they cared about their neighbours and the more vulnerable people in society, including older people and people who are homeless. There was a huge increase in volunteering and direct community action to care for people social distancing and self-isolating. All around we could see fantastic examples of people working together to make a difference in their local communities and support people in need.

Post lockdown, I hope people will retain their passion for community action and will continue to help people who are lonely and isolated, people who are homeless, people whose circumstances have been adversely affected by illness and unemployment. Coronavirus has given everyone a once in a lifetime opportunity to embed community values and compassion for others into their daily lives and change our society for the better.



Mark Moody Chief Executive

Chair's Report

Coronavirus inevitably dominated all our thinking in the early part of 2020. The impact of the pandemic on the people we support was by far the most important issue we faced leading to potentially permanent changes in the way we work and ongoing challenges for the foreseeable future. I am very proud of the selfless and resourceful response of all our staff to the coronavirus crisis, which ranks among so many amazing achievements from the past year.

We are committed to working closely with fellow providers in the sector and are proud to be one of the founding members of Collective Voice - the group representing the main voluntary sector treatment providers. We worked together to manage coronavirus more effectively and will continue to share resources and research and to develop approaches and evidence to better support those who use our services. Partnership across the sector is critical to meeting both the challenge of coronavirus and deliver our fundamental work to improve services for those we support. I want to draw particular attention to the vital role of our Pharmacy team. They have worked with thousands of community pharmacies across the country to deliver safe, effective and legal changes to prescribing regimes to both improve medicationassisted treatment and respond to the challenges of coronavirus.

Reducing drug-related deaths is one of our major goals. Developing our services in Scotland has been a priority for us for some time so we were pleased to grow our presence in treatment services and our involvement in policy making during the year. We ran a successful conference on emerging drug trends, participated in the Scottish Drug Policy Summit and shared our learning on improving medication-assisted treatment with the Scottish Drug Deaths Task Force.

This is just one of a number of areas in which we are leading and influencing national treatment guidelines. For example, our unique Camden REST service, contributed specialist advice on benzodiazepines to several government committees and our clinical team is influencing national public health guidelines on alcohol. Our Psychology team worked with the Ministry of Justice and the NHS to trial a new approach to treating people with mental health and substance misuse difficulties.

We have also been collaborating with the Centre for Expertise on Child Sexual Abuse to review approaches and develop improved standards to improve our support for people who have experienced child sexual abuse.

Our partnership with Gilead Sciences on a programme to reduce the risks of Hepatitis C infection by maximising the uptake of testing and treatment led to the micro-elimination of Hepatitis C in both Knowsley and Richmond and was recognised by two prestigious partnership awards from the Health Service Journal.

Three of our services – in Halton, Warrington and Wirral – were rated 'outstanding' by the Care Quality Commission (CQC), this year for being caring, responsive and well-led. CQC inspections can be daunting but we have tried to view them as a positive opportunity to communicate the quality of our work and share our achievements.

I am also particularly pleased that we won the Investors in People Diversity and Inclusion Excellence award in 2019 and retained our Silver status. Both achievements reflect the hard work and commitment of staff across the organisation to make Change Grow Live not only the best it can be for service users but also a supportive and inclusive environment for our staff.

I have been so impressed with what our staff have accomplished this year and how they have continued to work tirelessly to make the world a better place. Their actions demonstrate so much more vividly than my words that our organisation lives and breathes its values of openness, compassion and boldness.



Trustees Annual Report

Strategic Report

Our mission

Our mission is to help people change the direction of their lives, grow as individuals, and live life to its full potential.

Our whole person approach addresses all the factors that impact on individual health and wellbeing and contribute to strong and cohesive communities.

Objectives and Activities

Our objective is to help people achieve their goals, to be the best they can be and to help change society for the better.

We believe in people and everything we do is designed to support them to make their lives better. Our services empower people to take control of their lives, improve their health and emotional wellbeing and build strong, positive relationships in their local communities.

Activities

We provide personalised care and treatment to improve people's physical, mental and emotional health. Our whole person approach includes practical guidance to resolve issues around housing, benefits, education, employment and training. We also support people affected by crime, domestic abuse and social and economic deprivation.

Our welcoming and non-judgmental services can be used by anyone who needs us in the local areas we support. This includes adults, children and young people and their families, friends and carers.

Health and wellbeing

We support adults, young people and families to improve their physical and mental health and emotional wellbeing. Our services support people affected by social and economic deprivation, childhood trauma and abuse, homelessness, offending, substance misuse and smoking.

We combine medical, psychological and social work interventions to engage people in lifestyle and behavioural changes that increase their independence and self-determination.



Some highlights

- > We supported over **22,200** people to attain abstinence and achieve their goals.
- > We prescribe opiate substitute medication to over **33,000** people per day and provide psychosocial treatment, which is also offered to **18,000**.
 All services are aimed at recovery and rehabilitation rather than maintenance.
- > We work with around 7,900 people with a mental health condition every day and have worked with 15,471 over the last year.
- > Last year 2,182 young people joined structured services as new clients.
- > 80% of young people left structured services having overcome their substance misuse.

Children, young people and families

We support children, young people and families with issues ranging from emotional and mental health needs, lack of family or parental support, problems with drugs and alcohol and involvement in other risky behaviours. Our support is tailored to individual needs and we seek to intervene as early as possible to prevent problems escalating and to keep families together.

Our professional teams of counsellors, social workers, family support workers, youth workers and clinical psychologists deliver integrated services to optimise physical, mental and emotional health and improve young people's life chances.

Carers, families and communities

Our services also offer help and advice to the families and social networks of the people we support. This includes family, friends, carers and members of the wider local community. We provide information and advice on how people can support themselves and the people close to them and opportunities to meet and share experiences with people in similar circumstances.

Substance misuse

Our drug and alcohol treatment and recovery services support adults and young people to safely reduce their drug or alcohol use.

Services are delivered in local communities by integrated multidisciplinary teams of doctors, nurses, psychiatrists, psychologists, community pharmacies, recovery coordinators, recovery champions, peer mentors and volunteers.

Work with people involved in the criminal justice system

We support people to stop offending and regain control of their lives.

Our services in communities and prisons aim to improve the physical and mental health and social behaviour of offenders and promote rehabilitation in the community. Our wideranging approach covers substance misuse issues, housing and employment needs, family work, mentoring, work with young people who are at risk of offending and supported housing for people leaving prison who are regarded as 'high risk or high profile'.

Domestic abuse

Our domestic abuse services keep people safe and support them to make informed choices about their future. We offer in-person and online information, advocacy and practical and emotional support. We also work in GP surgeries and hospitals to reach out to people in need.

Housing and street services

Our street outreach services work with vulnerable people who sleep rough or beg on the streets or who are in insecure accommodation. This includes people with additional needs such as mental health problems, drug or alcohol dependencies and past traumatic experiences.

We also provide supported housing for people with substance misuse needs and help people in the community to learn life skills and maintain tenancies.

Service Delivery

Some examples of diverse service delivery across the UK...

Delivering innovation through co-production

We believe in working in partnership to get the best for our service users and the wider community. We have taken this to a new level in Nottinghamshire where we are working with our commissioners to co-produce a whole system approach to service delivery.

Our initial tender submission was derived from discussions with commissioners and the local team and included two dedicated co-production posts that we would fund to demonstrate our commitment to the concept.

Post tender we continued to work with our commissioners to establish a working methodology for co-production that would incorporate the views of local teams, focusing on the key themes of children's social care, family services and mental health.

For us, co-production was about more than liaising at manager level to share decision-making and planning: it needed the engagement of frontline practitioners in all the other organisations involved in delivering services. So we brought people together at community events to share our vision of how co-production could benefit service users. We found a real willingness to work together and do things differently that has led to an open and transparent co-production forum.

Our next step is to recruit our dedicated co-production leads to realise the positive impact on service users and staff of our co-productive approach.

"Co-production has produced open and honest lines of communication and true collaboration with Change Grow Live. We are working together to raise issues and solve problems in an equal delivery partnership with the service user at its heart...

...The success of this progressive approach is down to personalities and the ethos of the charity which shines through in the people they recruit. Co-production demonstrates their lived values and willingness to acknowledge when things can be done better...

...The co-production approach to problem-solving helped us respond really well to the major challenges of coronavirus, such as proactively finding people who had dropped off the radar and supporting them back into treatment."

Sarah Quilty, Senior Public Health and Commissioning Manager, Nottinghamshire County Council

Multidisciplinary approach to homelessness and begging

A multidisciplinary approach to working with people sleeping rough and begging is making a difference on the streets of Manchester.

Despite initiatives such as A Bed Every Night, homelessness and street begging have continued to impact on people, communities, businesses and tourism. Rather than criminalise vulnerable individuals our comprehensive approach offers a positive way out of this harmful lifestyle.

The ARC in Manchester brings together a wide variety of agencies in multidisciplinary teams to provide a practical response to the complex issues leading to homelessness and street begging. Rather than cautions, fines and other sanctions, we offer a range of treatment options to address people's needs and support them to change.

Agencies including Change Grow Live substance misuse services, physical and mental health teams, police, housing support and benefits advice and a food bank, offer a truly 'one stop shop' for help, support and advice.

Same day prescribing of medication-assisted treatment for substance misuse, reduces dependence on illicit drugs and provides structure to people's daily lives. Access to naloxone, blood borne virus testing and vaccination also help reduce harm.

As a result of this multidisciplinary approach increasing numbers of 'harder to reach' people are now coming into services and accepting help. Street begging has reduced and more people are carrying naloxone. Our good practice was also recognised by a visit from the Mayor, Andy Burnham.

Developing a foothold in Scotland

Our first services in Scotland were inherited as part of the transfer of services from Lifeline. Since then we have expanded our delivery further - working in partnership with the NHS in the Forth Valley and an assertive outreach and community recovery service in West Lothian.

These services sit alongside an arrest referral and offender recovery service in Edinburgh and Midlothian, an assertive outreach service in West Lothian and recovery-focused harm reduction and psychosocial support services for people who use drugs and alcohol in the North West, South East and South West of Edinburgh.

All our services are a partnership with NHS clinical teams, social services and local recovery projects to reduce drug and alcoholrelated harm across the regions and support individuals, families and local communities to bring about positive change. The assertive outreach and offender recovery team also works in partnership with the Scottish Prison Service, Police Scotland, Community Safety and other providers in prisons, custody suites and urban and rural hot spots to engage with people who might not readily access the main service.

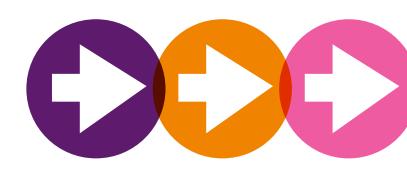
High impact from targeted interventions

Our Coventry drug and alcohol service uses caseload analysis to target people with highly effective interventions focused on their specific needs.

The team inherited large caseloads with a mix of dormant and active service users. Splitting the caseloads into different groups meant the team could plan and target care pathways appropriately and understand how to work with people more effectively. Now one half of the team works with problematic users with a recovery focus while the other half targets casual users who do not want to change their behaviour but can benefit from harm reduction information and advice.

An innovative approach by the complex needs team has also made a big impact with homeless people. The team brings together partnership organisations, including the council, the rough sleepers' team, refugee and mental health crisis teams to provide a seamless approach to individual's diverse needs. The approach combines outreach with a dedicated hub providing healthcare alongside food and social support and links to partner agencies.

This more targeted approach has enabled the service to fast track people into treatment and medication and get into contact with people they would otherwise have struggled to engage with. As a result, people with complex needs have successfully recovered and come back into the service as volunteers or paid workers.



A new approach to population health

We are working with a range of specialist partners in North and Central Lancashire to improve health and social care services across local communities. Together, our multidisciplinary early intervention and prevention services form an integrated approach to improving physical and mental health and wellbeing.

The 'New You' model of care seeks to manage and prevent a range of health problems in the general population such as those caused by smoking, alcohol and drug use and improve the outcomes for people with long-term conditions and other complex care needs.

Our aim is to reduce harm caused by preventable health problems and the poor management of health conditions and reduce the demands made on health services. For example, using early intervention to prevent escalating substance misuse problems and reduce the need for structured substance misuse treatment in the future.

The approach involves supporting people to adopt healthier lifestyles, take a more confident and active role in the management of their long-term health and get involved in the life of their local communities. There is a strong emphasis on using digital tools to reach out to as many people as possible with flexible and accessible resources.

Our partners include Active Lancashire, Recovery Works, Emerging Futures, The Well, Tempo, Red Rose Recovery, Inspire and Pause Recover. We work together to support people with life skills, health advice, employment, education and training, housing support, family support and volunteering opportunities.



Helping smokers to quit

Hull is an area of high deprivation with the second highest rate of smoking-related mortality in the country (26% of adults smoke and some 20% of mothers smoke during pregnancy).

Our team of psychosocial workers make it as easy as possible for people to access stop smoking support, including nicotine replacement therapy and psychosocial therapies. Radio adverts and a dedicated website with a specific portal for under 18's help target people who need support. Plans to launch an e-cigarette pilot were delayed by the coronavirus crisis and direct work with hospital patients and staff will also resume when safe to do so.

Service Development

These are some of the new services we began to deliver during the year:

1 Brighton & Hove Adult Substance Misuse Service

This recovery-focused drug and alcohol service for adults in Brighton & Hove provides recovery support for individuals, families and communities. Delivery partners include the Oasis project for women and families, Cascade Creative Recovery and Lloyds Pharmacy.

2 East Sussex Dependence Forming Medications Review

Building on a small pilot, this service will support patients in East Sussex who use dependence forming medications. The service will be delivered in collaboration with Clinical Commissioning Groups, Primary Care Networks and GPs alongside our East Sussex Adult Substance Misuse Service (STARS).

3 London HIV Prevention and Support

We have received grant funding from the London Fast Track City's Improvement Fund to deliver a specialist HIV prevention and support service for vulnerable people, working collaboratively with NHS HIV clinics.

4 Barnet Adult & Young People's Substance Misuse Service

This integrated substance misuse prevention, treatment and recovery service for adults and young people will work alongside Barnet community partners.

5 Tower Hamlets RESET

This expanded service builds on the adult recovery substance misuse service run since 2017 to include adult clinical services supporting people who use any substance, including alcohol, opiates, stimulants, cannabis and new psychoactive drugs.

6 Derbyshire Targeted YPSMS

A new harm reduction substance misuse service targeting children and young people who are most at risk of using drugs, alcohol or other psychoactive substances. This new service complements our existing services in Derbyshire.

7 Smoke Free Hull

A 12-week support service to reduce the risk of smoking-related illness by assisting local people to achieve their non-smoking goals. The service also offers more general advice and support for those looking to stop smoking.

8 Manchester Tobacco Addiction Treatment Service

This community service provides evidence-based psychosocial/ behavioural support combined with nicotine replacement therapy. The service will also train partner agencies to deliver stop smoking support, including volunteer Stop Smoking Ambassadors.

9 Walsall, Sandwell & Dudley (Black Country) Family Drug & Alcohol Court

This new multidisciplinary service is an alternative way to support parents whose substance misuse, mental health and domestic abuse problems have put their children at risk of serious harm. Specialist roles include a social worker, adult psychiatrist and clinical psychologist, as well as family and substance misuse intervention workers.

10 Forth Valley Adult Recovery Service

This new integrated adult alcohol and drug use treatment service works across Clackmannanshire, Falkirk and Stirling, providing harm reduction advice, key working, one-to-one and group work, as well as counselling and cognitive behavioural therapy, in partnership with NHS Forth Valley. The service also supports volunteering, training, education and employment opportunities.



A selection of existing services which we retained when retendered during the year:

1 New Directions Nottinghamshire

Having worked in Nottinghamshire since 2014, we are now working with individuals and their families to address the impact of substance misuse on the whole family. Coproduction is an important new element of this substance misuse recovery service. A consultant psychologist is also addressing the relationship between substance misuse and complex needs such as trauma and Adverse Childhood Experiences.

2 Wirral Ways to Recovery

Delivered since 2015, this adult community substance misuse service takes a whole person approach to physical and mental health and social and psychological issues. It builds service users' recovery capital and resilience, improving access to employment, education, training, income, stable housing, and social support to improve health and wellbeing and sustain recovery. A partnership with the Spider Project offers creative arts courses, holistic therapies and physical exercise sessions.

3 Stockton Recovery Service

Having delivered substance misuse services in Stockton since 2005, we now run a new integrated substance misuse service for adults and young people. Part of a recovery support system, the service includes health and social care, youth, education and criminal justice. The service is delivered in partnership with Recovery Connections who promote visible recovery in the community and Emerging Futures who offer a community housing model.

4 Leeds Integrated Offender Management

Having held this contract for 14 years, we now deliver a wider range of support to promote successful rehabilitation. Specialist partners support us to provide a holistic approach to meet people's needs. For example, Emerging Futures provides prison-to-community aftercare and innovative coaching and transitional housing to address two of the key barriers to breaking the cycle of reoffending.

5 The Corner, Sheffield

We've provided this young people's substance misuse service since 2010 and are developing the service to increase community resilience and improve access and pathways into the service. A new Child Exploitation and Vulnerable People lead will provide specialist substance misuse support within partner agencies, focusing on criminal exploitation and gang involvement.

6 Stoke & Staffordshire Advocacy & Independent Visitor Service

Having worked in Staffordshire since 1999 and delivered the Independent Visitors service since 2010, we are now contracted by the Staffordshire and Stoke-on-Trent Children's Rights Service to provide: children and young person's advocacy; Independent Visitors for Looked After children; independent persons for secure accommodation reviews; and appropriate adults for independent age assessments for unaccompanied asylum-seeking children and young people.

Continues on next page...



7 The Beacon Walsall

This new integrated adult and young people's substance misuse services builds on the adult service we have run since 2015, and a decade of delivering young people's services. It supports long-term abstinence from dependency and associated harms to individuals, their families and communities. Building on strong partnerships with midwifery services, the Glebe Centre, social care and housing, the new approach includes improved alcohol engagement, whole family approaches and support for complex needs.

8 Birmingham Youth Promise Plus

This existing service addresses the individual needs of 15-29 year olds with significant barriers who are Not in Education Employment or Training (NEET). For example, young people at risk of offending and those leaving or about to leave local authority care.

9 London

In London, we have retained a number of our adult and young people's substance misuse services including:

Ealing RISE & EASY Project

This new drug and alcohol service integrates the adult substance misuse service we've run since 2012 and the young people's service we've run since 2009. The service works in partnership with other key agencies providing a flexible, holistic community-based service. It continues our wellestablished partnership with CNWL as clinical provider and Build on Belief who deliver peerled activities in the evening and at weekends.

Rise Newham

We've delivered adult and young people's services since 2014 and 2018 respectively. This integrated recovery-based service matches intensity of intervention to severity of need. Focused on early intervention and prevention it also supports families and carers. This service also continues to work with Build on Belief who deliver an out-of-hours, peer-led socially based, befriending service and social activities.

Waltham Forest Drug & Alcohol Service

Having previously delivered the adult drug and alcohol service since 2017, we were awarded the new integrated alcohol and drug behaviour change contract for both adults and young people. The service offers a personalised package of psychosocial, clinical, harm reduction and recovery interventions.



We were very sorry to say goodbye to staff and service users at the following services which were not renewed during the year:

- Greenwich Adult Substance Misuse
- Lambeth Street Outreach Services
- Newcastle Harm Reduction & Psychosocial Adult Substance Misuse
- North East Prisons
 Psychosocial Substance
 Misuse Service
- Richmond Adult Substance Misuse
- Staffordshire Young People's Substance Misuse
- Wakefield Young People's Substance Misuse

Our Clinical Services

Improving medicationassisted treatment

During the year we continued our work to improve the quality of our medication-assisted treatment and reduce the use of illicit drugs on top of prescribed treatment regimes. As a result of our improvement plan, for the first time on record the proportion of people not using street opioids is greater than those who do. Whilst a small change in absolute numbers, this is nevertheless a momentous step in tackling the harms of substance use.

We were assisted in achieving this goal through detailed data analysis, comparing trends in services and individual service user journeys. Coronavirus interrupted some of our improvement activity, including plans for a North East regional forum to share good practice, successes and challenges. We hope to resume these activities when restrictions from the pandemic have eased.

Responding to coronavirus

The year ending March 2020 was overshadowed by the unfolding of the coronavirus pandemic. The rapid development of events called for us to act fast to review our medication-assisted treatment policy to work differently with vulnerable people to ensure the continuity of life-saving treatment. This included liaising closely with our partners in Public Health England, local GPs and pharmacies. Having a clear organisational strategy, values and clarity around decision-making helped us to manage these potentially risky events as effectively and safely as possible.

Examples of new ways of working prompted by the coronavirus crisis include:

Prescription changes

In response to physical distancing measures and disruption to pharmacy operations we moved the majority of people, including those on supervised consumption, to a two-week supply. We considered it safer to give people access to sufficient medication rather than see them try to source substances elsewhere and increase their risk of exposure to the virus.

We prescribe opiate substitutes to more than 30,000 individuals and worked with thousands of small pharmacy businesses to effect this change.

Remote assessments

Nurses used their clinical expertise to conduct remote assessments, exploring symptoms, assessing risk and making decisions about people's care as part of the multi-disciplinary team. They accessed medical records remotely and used Skype, Zoom or phone calls to plan safe treatment.

For example, nurses delivered over 600 remote alcohol triages in the first few weeks of the lockdown.

Socially distanced service delivery

We purchased 4,300 mobile phones for our service users at a cost of £60,200 to enable us to stay in regular contact with people while services were operating under lockdown restrictions.

Partnership with Salvation Army

We accelerated existing work with the Salvation Army to provide safe care for alcohol-dependent people in hostels. We pioneered this work with a nurse-led clinic in St Helen's combined with training for hostel staff in opiate and alcohol withdrawal. In Nottingham, we worked with the commissioners and Framework Housing to develop an out-of-hours service to support dependent drinkers at serious risk of withdrawal.

Supporting homeless people in London

We headed a cross-provider partnership of NHS Trusts and other charities to provide substance misuse treatment services across London for several thousand homeless people who were moved into hotels during the pandemic. The service provided expert advice and information on drug and alcohol issues to staff working in the hotels, substance misuse awareness training, and distributed harm reduction resources (including naloxone, needles and syringes, and nicotine replacement therapies). To date, nearly 100 residents with complex needs have been supported to access treatment. As the hotels are closing, the service is working with local treatment services to support continuity of care as hotel residents are offered move-on housing across London.

Mobile outreach

In Kirklees and East Lancs we delivered medication and needle exchange equipment using clinical vans to support people selfisolating or shielding. Up and down the country we collaborated and worked in partnership with local community hubs as part of a collective effort to provide vital support to some of the most vulnerable in our communities.

Planning for future alcohol services

We now have an online campaign to engage with an anticipated increase in people seeking help for alcohol problems as a result of drinking at home during the coronavirus crisis.

Sharing and learning together

Clinical Conference 2019

After an interval of five years, we re-launched our clinical conference in November 2019 with the theme 'Improving together - building new connections'. Our staff were joined by national and international external speakers who came together to share their experiences.

We used the conference to trial the virtual platform Slack as a shared space for further collaboration. Our aim was to create a lively forum for organisations with a common goal of working together to improve performance. Nearly 400 people have since joined in conversations on diverse topics around substance misuse and recovery.

We have now donated the space to Collective Voice who will continue to use the platform to share ideas, support and resources across the sector. Visit https://makingadtogether. slack.com/ to join the conversation.

Harm reduction conference Edinburgh

Our clinical harm reduction conference in Edinburgh looking at current drug trends in opiates, cocaine and benzodiazepines was well attended by over 120 NHS clinicians, public health commissioners and voluntary agencies. Delegates heard about innovations in treatment and former service users described their journeys to recovery. Papers from the conference were shared online with space for ongoing discussions.

We also attended the Scottish Drug Policy Summit and are contributing to work on updating and improving treatment standards by the Scottish Drug Deaths Task Force, sharing the learning from our work to improve medication-assisted treatment.

Our Medical Director, Dr Prun Bijral, was invited to join an independent working group evaluating the Scottish heroin assisted treatment service. funded by the Chief Scientist Office of Scotland.





Reducing long-term dependency on prescribed medication

Dependency on prescription medicines used to treat conditions such as pain, anxiety and insomnia is a growing concern. Withdrawal can be a long and difficult process and must be carefully managed to avoid and mitigate against potentially intense withdrawal symptoms. Our new prescription medicine services support people to safely overcome these issues and reduce costs to health services.

Camden REST

In Camden, we offer a unique specialist service for people dependent on prescribed or illicit benzodiazepines via the REST (Recovery Experience Sleeping Tablets and Tranquilisers) service. Originally part of MIND, our approach is user-centred and provides advice and information, advocacy, a support group and formalised one-to-one counselling, art therapy and mindfulness.

Individuals are also linked into further psychological support, counselling for issues such as divorce or bereavement and advocacy around benefits and housing. REST also raises awareness of the dangers of dependency on prescription medicines and has contributed specialist advice to government committees informing public policy. For example, meetings have taken place with the Department of Health, health ministers and the All Party Parliamentary Group on Prescribed Drug Dependence.

Hastings opiate pilot

In Hastings, East Sussex, a year-long pilot at GP practices has successfully reduced dependence on prescribed opiate medications. 60 patients have stopped using opiate medication and 64 others have reduced their use.

Patients were supported to overcome their dependence through interventions including Motivational Interviewing, mindfulness, TENS (Transcutaneous electrical nerve stimulation) machines, group work and other psychosocial support. Some also received specialist prescribing support from a GP and practice pharmacist. The reduction in dependence has improved people's quality of life, reducing pain and improving sleep, and achieved significant reductions in medication costs and GP time.

NHS pain service partnership in Luton

We developed a pilot to address long-term dependency on opioids for chronic noncancer pain alongside specialists from an NHS pain service. This was commissioned by the Clinical Commissioning Group for patients belonging to a Luton GP surgery. The primary goal was to facilitate review and support controlled reduction for people identified as being prescribed high dose opioids for pain in primary care.

Those referred to the pilot were eligible if they had been prescribed ≥120mg morphine or equivalent over 24 hours. Their subjective experience of pain, anxiety, depression and sickness impact were assessed.

Results are in the process of being analysed but indicate that an integrated approach combining the expertise of pain and substance misuse specialists can lead to successful reductions for those who have been on longterm, high dose opioids prescribed for pain.



Naloxone activities repr A 'National Naloxone Conversation' in 2019

Revitalised Naloxone Strategy

Naloxone is an emergency treatment used to

drugs such as heroin, methadone, fentanyl and

services to individuals, family members, carers,

professionals and hostel workers to help save

lives from overdose.

During the year we relaunched a

increase distribution includina:

data on naloxone use.

Improved family, carer and

revitalised naloxone strategy and are

developing an innovative new plan to

• A single point of contact for capturing

Webinars and online training material

for staff, carers and practitioners.

• Rapid access to stocks of naloxone.

community access to naloxone.

people who are hard to reach.

• A naloxone peer education network

to raise awareness with vulnerable

reverse the life-threatening effects of opioid

morphine. The drug can be given out by drug

- Manchester brought together clinical treatment providers, health professionals, people we support and peer educators to innovate and share ideas for increasing naloxone use across the UK.
- A six-month pilot into nasal naloxone (nyxoid), was well-received by people

using drugs at sites in Manchester, Halton and HMP Risley and welcomed by key stakeholders in hostels and drop-in centres.

• We trained officers from the West Midlands Police Force to carry naloxone and will replicate this training with Greater Manchester Police.

Peer approach boosts naloxone take-up

Peer Educators have successfully encouraged more people to carry naloxone in St Helens on Merseyside. A three-month pilot achieved service take-up rates of over 64% compared to a Change Grow Live average of just under 47%. Naloxone was also distributed to people who use opiates in the community that were not engaged in treatment services.

St Helens has a large injecting population and high number of deaths from overdose. A naloxone programme has been running since late 2017. The Peer Educator scheme was designed in partnership with service user representatives and piloted in November 2019 to boost naloxone take up and help reduce avoidable drug-related deaths.

Peer Educators wear branded hoodies and t-shirts. They get around using bus passes and the local police force also donated three pedal bikes. Their role involves talking to people about the benefits of carrying naloxone: training people to use it and issuing kits and replacement kits. They target people in services and needle exchanges and reach out to individuals in high areas of need who are most at risk of overdose.

The enthusiasm and authenticity of Peer Educators has been key to their success. People who use services engage more readily with their peers and have taken naloxone kits they had previously refused to accept from staff.

The St Helens Peer Educators also train partners from probation, housing, hostels and homeless outreach teams and take their message out into the wider community on a mobile bus.

The project is on a pause at the moment due to coronavirus but the Peer Naloxone Educators are keen to get back to their roles when it is safe to do so. In the meantime, staff have been delivering naloxone through pharmacies and delivering kits to people's homes using both Prenoxad and Nyxoid nasal naloxone kits.



An NHS partnership led to the appointment of two full time Hepatitis C clinical nurse specialists to work

 Piloting a needle exchange project in Gateshead to stimulate take-up of Hepatitis C treatment following blood borne virus testing.

Dedicated clinic achieves success in Halton

across East and West Sussex.

Our integrated drug and alcohol service in Halton successfully micro-eliminated Hepatitis C by making the screening process as simple and smooth as possible.

A monthly Hepatitis C clinic was set-up onsite in partnership with the Royal Liverpool Hospital offering blood testing and liver ultrasound on the same day. This one-stopshop replaced sending people to different appointments on different days in different locations, which was inconvenient and risked a high drop-out rate. People were also visited on the day of their appointment, encouraged to attend and given a lift to the clinic to maximise attendance.

This intensive approach cut treatment start times from 6 months to 4 weeks and testing from blood borne viruses has increased from 45% to 93% in the past 6 months.

ASE

STUDY:

Eliminating Hepatitis C

Hepatitis C is one of the most common blood borne viruses in the country. Testing and treatments have improved a lot over the years, and most people can now be cured with few or no side effects. We are working with Gilead Sciences to achieve micro-elimination of Hepatitis C in our services by 2025 in line with NHS England targets.

Local micro-elimination means:

- 100% of people using the service have been offered a Hepatitis C test.
- 90% of these people have then been tested.
- 75% of people who were diagnosed with Hepatitis C have started treatment.

Highlights of the year:

- Our Richmond service was the first service in the country across all providers to achieve micro-elimination of Hepatitis C, followed by our Halton service.
- Our innovative national programme to improve medication-assisted treatment for people who use opioids has helped improve Hepatitis screening rates and referrals into treatment. Our Hull service achieved a screening rate of 66% among people who inject compared to a national average of 31%.
- Change Grow Live won Best Pharmaceutical Partnership alongside Gilead Sciences and NHSE at the Health Service Journal (HSJ) Partnership awards in March 2019. Then in November 2019, we were picked as

the overall winner from all categories and awarded the HSJ Partnership Award.

 Pilots at six sites found that enhanced Hepatitis C training for key workers (including practical planning and goal setting), doubled testing rates in the short term.

Setting the standard

Drug treatment services were collectively responsible for 33% of the 10.210 treatment starts for Hepatitis C between May 2019 and March 2020. Change Grow Live contributed 46% of the overall treatment starts from drug treatment services (Data Source: NHSE HCV Treatment registry).

Our achievement was recognised as hugely impressive by the Hepatitis C lead for NHSE with our data highlighted as a significant contributing factor. The data we provide to the NHS is now considered the auality standard expected from all other drug treatment services engaged in the elimination project.

Local innovation

Innovation in services across the country boosted local testing rates.

 Visually motivating staff across the North East. Yorkshire and Humberside to achieve 'green' status for testing rates on our clinical data tracker increased testing rates in Hull by over 45% and 35% in Gateshead.



Psychologically Informed Care

Our growing psychology department is enabling us to shape the development of trauma and psychologically informed environments. This more nuanced approach is improving the care we offer to people with underlying or accompanying mental health needs alongside substance misuse problems.

We are evaluating a range of evidenceinformed and evidence-based approaches to support people's mental health needs and develop a shared multidisciplinary, trauma-informed protocol for all our services. Evaluation includes listening and responding to the views of people who use our services to find out what works for them.

Support for people with dual diagnosis and offending histories

During the year we worked with the Community Sentence Treatment Requirements steering group from the Ministry of Justice and the NHS to trial a new approach to treating people with combined mental health and substance misuse difficulties. This was for a new Mental Health Treatment Requirement order that could be delivered alongside existing Alcohol Treatment Requirements/Drug Rehabilitation Requirements for people on community sentences.

Those referred to the programme were among the more vulnerable in society having experienced homelessness, addiction, and mental health issues on top of offending. For many, taking part in the pilot was their first opportunity to receive regular psychological support despite their ongoing substance use. Our pilot showed a reduction in anxiety, depression and substance and alcohol use among participants and our findings will be published in a peer reviewed journal.

Understanding adverse childhood experiences

A new approach to substance misuse treatment at Inspire Blackburn with Darwen is looking at the impact of adverse childhood experiences (ACE), such as sexual, physical and emotional abuse by parents or carers and witnessing abuse, substance misuse or mental health issues.

These traumatic experiences are known to have lasting negative effects on an individual's health and wellbeing and also to significantly increase their likelihood of engaging in substance misuse and other risk taking behaviours.

An ACE Champion has given a focus to this work and supports staff to view their practice through an ACE lens and understand the underlying causes and conditions of multiple negative behaviours, attitudes and decision making. The ACE perspective has enhanced our trauma-responsive approach to encompass both adult and childhood trauma. The ACE Champion has developed a workshop for service users and staff called Embrace, which sensitively explores the impact of ACEs on brain development, thinking and behaviour and how to address this through trauma-responsive care. We are also championing ACE-aware approaches within the wider treatment community by providing training to other professionals such as social workers, teachers or hostel landlords and working with our other services to spread this movement across Lancashire.



Young People's Services

We deliver a diverse portfolio of young people's prevention services whose scale and intensity ranges from universal provision to targeted, specialist interventions for the most vulnerable. We work directly with young people and also support other frontline partner providers and engage in sector research and policy.

Universal prevention – approaches designed to prevent risk for entire populations of young people.



Funded by Public Health England, we worked in partnership with Tameside Metropolitan Borough Council, to lead on the development of a Drug, Alcohol and Tobacco (DAT) Personal, Social and Health Education (PSHE) Programme for all schools across Tameside.

Mapped to the Department of Education PSHE learning outcomes, and in consultation with teachers, our 'My Recovery Tameside' service

developed a programme of 42 individual teacher lesson plans, 26 supporting presentations and a comprehensive teacher training programme, supporting implementation across Key Stages 1-4. Launched in March 2020, it will be introduced in all primary and secondary schools across Tameside from September 2020. Whilst providing universal drug and alcohol prevention, this programme intends to enhance young people's social education, build their life skills and strengthen their resilience to help them make informed lifestyle choices.

"We are delighted to welcome the DAT curriculum in Tameside..... We believe the impact will not only help children and young people with their knowledge to keep safe, but will also ensure all schools have an equal offer."

Population Health Programme Manager – Tameside Metropolitan Borough Council

Selective prevention – strategies targeted at specific sub-groups of young people identified as at 'increased risk'.

1625 Outreach & Education is a unique Change Grow Live service commissioned by Derbyshire's Police and Crime Commissioner and Derbyshire County Council in September 2018. The project aims to target 16-25 year olds at increased risk of harms associated with substance use, targeting four placebased settings: the Night-Time Economy, Festivals & Organised Events, Further & Higher Education and Residential 'Areas of Concern'. Varied engagement methods include street outreach and group workshops as well as the service's custom-made mobile-unit and social media platforms. In the first year, there were 118 requests for targeted service support across the four place-based settings. In response, the service engaged face-to-face with 2,405 young people across Derbyshire, with over 2,000 more via digital platforms.

The service is making a difference. Following attendance at YNOT Festival, with over 35,000 attendees, event organisers reported our interventions resulted in them seeing 'a reduction in major incidents associated with drugs & alcohol'. This impact is also being seen at an individual level. 72% of those engaged reported already using substances recreationally or experimentally. Of these, 96% said that they had increased their knowledge of risks following intervention, with 81% reporting they would 're-think' their future use of illicit substances (abstinence). 100% said that if they choose to continue, they will practice harm reduction and safer using techniques.

Furthermore, given the rich data the service is able to generate, it now plays an integral role in influencing county-wide partnership responses to keep those young people exposed to risk aware, safe and healthy. **Indicated prevention** – approaches to support young people already experiencing problems relating to risk.

We were the lead UK partner in a three year European-wide research project into quality standards for good practice in interventions for vulnerable young people who are both drug experienced and involved in the criminal justice system.

EPPIC (Exchanging Prevention Practices on Polydrug use among youth in criminal justice systems), was led by Middlesex University with representation from six European countries. We supported the launch of the Quality Standards at a European-wide conference, presenting on the implications for implementation across both health and youth justice sectors.

Findings from this research project are now included in both the Journal of Youth Studies and Drugs: Education, Prevention & Policy (2020).

"Change Grow Live has played a key role in the EPPIC project, contributing to the study design, data gathering, and interpretation of the research findings. We hope to continue this strong partnership by investigating the development of the Quality Standards, one of the main outputs from the EPPIC project."

Betsy Thom, Professor of Health Policy, Co-Director - Drug and Alcohol Research Centre

Peer Mentoring

Peer support from other young people is hugely valuable to young people, validating the messages they hear, increasing engagement and improving outcomes. Our young people's peer mentoring programme has supported young people accessing our services to make a huge difference to both to their own lives and to those they go on to support.

Jamie^{*} graduated from our young people's peer mentoring programme in September 2019 after accessing our young people's alcohol service in Kirklees for emotional support relating to parental substance use. He has since made a profound difference to both our service delivery and the lives of other voung people. This has included developing and delivering 'Hidden Harm' group work, supporting one-to-one interventions, chairing the local Youth Voice Network and codelivering interviews for new recruits. He has also worked with us to develop an animated resource, telling his story and messages of hope - this was launched as a PSHE tool for use across all Kirklees Schools in January 2020.

"I realised I was living in an abusive household whilst in year 5. I was constantly worried I would wake up to find (my mum) dead. My Change Grow Live worker helped me realise my mum's drinking was not my fault and I needed to focus on myself. They helped me identify and focus on things I enjoyed. It was a big thing for to me to talk things through with someone in the support sessions. The Peer Mentoring programme has made me realise it's what I want to do as a career. My ambition is to support young people: I've been there, I know what it's like and know the positive impact support can have." Jamie*, Young People's Peer Mentor

A young service user in Kirklees receiving support from Jamie said:

"For me the best part of meeting was talking to a young person in a similar situation. It was the reassurance that there are others similar to you out there – particularly with being close to my age. As great as talking to your friends, family and teachers is, you know that they can never fully understand your issues and worries, so it made me feel a lot more relaxed."

Safeguarding

Safeguarding is Everybody's Business

Safeguarding is everybody's business and we are committed to keeping the people we work with and their families safe and able to live their lives free from harm and abuse.

We put the people we work with at the heart of their safety plan and we listen to them and include their views and wishes in decisions made about their care. Our staff have the time and resources they need to focus on the safety of the people they support.

We have been working hard to foster and develop a learning safeguarding culture with policies and procedures that are easy to follow and written in language that people understand. We are determined to make it easier for our staff to make ethical decisions as close as possible to the people whose lives they affect.

Designated Safeguarding Leads

We continue to invest in the professional development of our staff and now have over 200 skilled Designated Safeguarding Leads (DSLs), across our services who provide consultancy, support and advice to our first line practitioners. DSL's provide invaluable support to our staff and the people we work with and are vital to our safeguarding governance. Our DSLs help staff understand their role and responsibilities in the application of safeguarding legislation including the Care Act and Mental Capacity Act. This enables our practitioners to improve their knowledge and competency, understand their obligations and make evidenced-based ethical decisions around service user safety. They support the organisation to deliver training and have produced a wide range of resources on topics including: county lines; Modern Slavery; 'cuckooing' (where drug dealers take over the home of a vulnerable person in order to use it as a base for county lines drug trafficking); and child sexual abuse.

Position of Trust policy

There is particular concern when abuse is caused by the actions or omissions of someone who is in a position of power or authority; someone who uses their position to the detriment of the health and wellbeing of an individual at risk, who in many cases could be dependent on their care.

We have striven to take an industry-leading stance on abuse of positions of trust: ensuring that we never knowingly put our service users at risk within our organisation and addressing any concerns openly and transparently.

This year, we received positive endorsement of our Positions of Trust policy from the Charities Commission.

Centre for Expertise for Child Sexual Abuse

We have been collaborating on an innovative project with the Centre for Expertise on Child Sexual Abuse (CSA) for two years and are the only non-statutory organisation involved in this ground-breaking work. The project has helped us improve the support we provide to people who have experienced CSA.

We have trained 23 practice leads to champion and promote routine enquiry into the CSA experiences of people who access our services and provide psycho-educative and mythbusting information to survivors. An external evaluation of the impact of the practice leads programme found that survivors want to be asked about whether they experienced CSA and to feel validated. Practice leads have reported an increased understanding, confidence and knowledge of CSA and have been sharing their learning with colleagues.

The practice leads have co-produced resources to support increased understanding of CSA. This work interlinks with other priorities across the organisation to address the impact of adverse childhood experiences and promote trauma informed care, contributing to our whole person approach.

Working with Children and Families

Here are some examples of our innovative work with children and families.

Listening to children

We are improving the wellbeing of children and families affected by substance misuse by listening to the often-overlooked voices and experiences of children.

The M-PACT (Moving Parents and Children Together) programme brings together a small number of families to explore the impact of substance misuse on family life.

The programme helps parents and carers understand how their substance use affects their children and enables children and parents to have open and honest conversations with each other in a safe environment.

Working in this way has made a huge impact on family dynamics and functioning making life so much better for the whole family. Children have been empowered by expressing their feelings and sharing their experiences with other young people. Parents have also found the process has supported their recovery.

Five courses ran in Knowsley, St Helens and Halton over the past year with 86 participants completing the full course.

Each M-PACT programme is delivered under licence from Action on Addiction with at least four facilitators and a minimum of two trained facilitators.

Early help for children and families

We deliver an Early Help intervention service for 0-19 year olds in Walsall supporting families with a wide range of parenting issues.

When families are referred by social workers, teachers and health visitors our family support workers assess their parenting skills, looking at areas such as school attendance, bedtimes, healthy eating, toilet training and so on. We then offer a tailored package of support which includes parenting programmes, health visitor clinics, breastfeeding support, cooking, holiday and breakfast clubs and links with schools or wider support networks.

We also refer people to mental health, domestic violence and substance misuse support services. Where necessary, we may escalate families into the Multi Agency Safeguarding hub for a social care intervention.

We work with a range of partners to coordinate the best package of support to meet people's needs and improve family life.

As a result of coronavirus we have begun to conduct much of this work digitally or by phone and have found that virtual chat has produced better engagement from some families that might otherwise have struggled to attend meetings in person. We work with a range of partners to coordinate the best package of support to meet people's needs and improve family life.



Family Drug and Alcohol Court

We deliver a Family Drug and Alcohol Court service across three local authority areas within the Black Country. A specialist multidisciplinary team of social workers, substance misuse workers, family support practitioners and a psychologist work closely with a Family Court Judge to help parents with complex drug and alcohol needs who are undergoing a Local Authority Care Proceedings process and are in danger of having their children removed.

Typically these parents will have been through the local authority child protection processes and have been unable to make enough positive change to be able to fulfil the needs of their child. The family drug and alcohol court is a problem solving court with a firm focus on working positively with parents to make sustained changes with an ultimate aim of keeping families together.

We address the impact of substance misuse on parenting, delivering a 26-week intensive support package aimed at keeping the family together and supporting parents to achieve abstinence. The family will undertake fortnightly non-lawyer reviews with a Family Court Judge to update on their progress and achievements. At the end of the process we make a court recommendation as to what should happen with the family.

We are recruiting a psychologist to address underlying trauma in adults who use substances. We are also working with female sex workers who have had babies removed at birth to help break this traumatic repetitive cycle.

Due to coronavirus the family drug court service has started virtually.



Quality and Governance

During the year we refreshed our governance policies and launched a new strategy and statement of values. These were the culmination of a year-long process of listening to the voices and experiences of those who use our services and the staff who deliver them.

People who access our services told us what they wanted from us and how we could support them to succeed. Staff told us what they needed to do their jobs well and what hindered them.

Our refocused values - be open, be compassionate, be bold - express our shared collective purpose which is to do the best we can for our service users.

Our new strategy sets out how we will support staff to fulfil their roles and responsibilities with greater autonomy and less bureaucracy.

We are working now to:

- Establish an ethical decision-making framework with decisions made as close to the people they affect as possible.
- Focus our clinical governance processes on the safety and effectiveness of clinical and psychological therapies.
- Review the extent of change taking place across the organisation.
- Assist services to make an assurance judgement on the health of their services.

CASE STUDY:

Ethical decision making

When decisions are aligned to values and based on ethical principles everyone can be confident they are making decisions for the right reasons. We exist to make life better for the people who use our services and this guiding belief in people makes all our actions clear and straightforward.

Our principles of ethical decision making include: taking decisions as close as possible to the people they affect and involving them in those decisions; knowing when we are not the right people to make decisions; seeking expert advice from people who know more than we do; and listening to different perspectives.



A new perspective

We communicated our new strategy and values to staff across the organisation through face-to-face meetings with as many people as possible. We collated and responded to their feedback as we went along and used this to inform subsequent meetings. It took nine months to complete this process but as a result staff had time to really absorb and understand the new strategy and values and embed them in their work.

Staff responded positively to this active learning process which helped them think differently and come up with new perspectives.

"It's all about relationships and talking to each other." Frontline practitioner

The CQC endorsed our governance refresh in the context of a regulatory inspection:

"Staff knew and understood the provider's vision and values and these were embedded in the delivery of care. Staff were proud of the organisation as a place to work and spoke highly of the culture being open and honest. Staff at all levels were actively encouraged to speak up and raise concerns."

An 'Outstanding' achievement

Our services in Halton, Warrington and Wirral were rated 'outstanding' by the CQC this year for being caring, responsive and well-led. Between April 2019 and March 2020, we received 21 comprehensive inspections: 3 Outstanding; 16 Good; and 2 Requires Improvement.

We have changed our relationship with the CQC and sought to take the fear out of inspection, seeing it as an opportunity to celebrate our achievements. We have regular engagement meetings with the CQC which enables us to share areas of good and outstanding practice as well areas for improvement.

Doing things better

We have reviewed many of our policies and processes to reduce bureaucracy across the organisation. We want all administration to benefit the people who use or services and the workforce. We have developed a risk profile to enable us to know whether our interventions are effective.



Research

Research is an integral part of our culture and is how we ensure the best quality evidence is found to inform and shape our practice and demonstrate the effectiveness of our innovations. We support our colleagues across the organisation to evaluate interventions and determine the impact of different approaches to service delivery. During the year we continued our close partnership with the University of Manchester. We work together to design and conduct research projects and their expertise facilitates rapid review of research and data to support decision-making.

Projects undertaken during the year included:

- Evaluation of the nasal naloxone pilot in Manchester, Knowsley and HMP Risley as part of our wider work to reduce drug-related deaths.
- Development of a methodology for data gathering to assess the effectiveness of Medication Assisted Treatment
- Ongoing research into the effectiveness of supervised consumption.
- Evaluation of a suicide prevention toolkit.
- Exploration of substance misuse treatment for people with intellectual disability.

Please visit our website for more information on our research projects.



Service User Involvement

We actively include the people who use our services in the decisions that affect them. This greatly improves their chances of achieving successful outcomes and increases their satisfaction with the services and support they receive.

Lots of different methods are used to gather feedback to make it easy for people to share their views and tell us what matters to them. Service user involvement has been increased and broadened during the year to make feedback more meaningful.

- Regional Directors have now taken responsibility for service user involvement in their regions.
- Regional service user representatives create an active interface with regional and national management.
- Some 500 people took part in consultation events across the regions.

We aim to create safe spaces where individuals can be open and honest with us and share their experiences. Their views help to shape policy and operational practices and improve services. People tell us being able to share their views strengthens their recovery and gives them confidence and a sense of belonging.

Making feedback meaningful

During the year, service users in the East, London and South East (ELSE) region told us about changes that would improve the quality of feedback and participation:

- Closer collaboration between service user representatives and peer mentors.
- Prioritising service user involvement in staff induction.
- Service user involvement champions for each service.
- Support for volunteers to engage service users.

We have pledged to implement these ideas in all our regions.

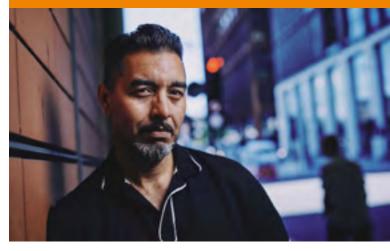
Service user influence

People who use our services have directly influenced many activities during the year, such as:

- The redesign of our Southampton service.
- Delivery of smoking cessation services by Public Health England.
- A pilot study into effective methods to detect gabapentin and pregabalin.

One of our service users said:

"I recently become involved with Change Grow Live and I'm on my way to become a volunteer. In our quest to branch out into the community, I approached my General Practitioner and asked him for a meeting to discuss how we can set up a hub or support group and he has agreed to meet up with us in the east of the city and help us do this. It is empowering to realise that I can make a change to mine and others' recovery journey. People do listen."



A vibrant recovery community in Cambridgeshire

Our Cambridgeshire drug and alcohol service has a thriving and independent recovery community at its heart.

Recovery motivators use the five ways of wellbeing to support people to get involved in life-affirming and fulfilling activities. Weekly service user support groups cover bereavement, women's issues, relapse prevention and mindfulness. A lively service-user led newsletter promotes exercise, sport, gardening, cooking, art and other cultural and creative activities.

The recovery community is driven by the service user council whose energetic approach motivates people to keep busy and get involved in community life. This holistic approach has transformed the service and made a huge impact on people's health and wellbeing.



Responding to coronavirus

Our strengthened service user involvement network has been instrumental in responding to service users' concerns about coronavirus. We have been collating our service users' voices throughout the lockdown and responded to their queries at local and national level.

Service user reps are contacting people directly to ask them about what is happening in their lives and how they are getting on. This has helped us to understand what is going on at street level putting us in a strong position to respond and keep people safe.



Digital Innovation

During the year we worked to improve the way we use technology to improve access and outcomes for those who use our services and support staff to deliver care efficiently and effectively.

Our approach involves in-depth research with the people we support to understand their needs and how they use technology to make sure developments work for them. New products are rigorously tested with their users and continually refined to meet changing needs.

During the year we undertook a significant piece of work to move our systems to the Cloud and equipped staff with smart phones and new devices upgraded to Windows 10 to support us in our aims.

Responding to coronavirus

Our shift to remote working put us in a good position to respond swiftly to the new ways of working demanded by coronavirus. As the pandemic took hold we rapidly moved the bulk of our service delivery onto digital platforms. We needed to ensure continuity of care for service users and support for frontline practitioners to work in new ways safely and effectively.

For example:

• We set up digital groups on Teams, Zoom, WhatsApp and other platforms to communicate digitally with service users who were self-isolating.

- We began conducting remote consultations with clinical staff doing medical assessments and reviews by telephone or video link using Zoom and WhatsApp.
- We moved to national web chat and made generic advice and information for new and existing service users available digitally, including interactive self-assessment quizzes for drugs and alcohol.
- We continued to expand our online referral pilot to 35 of our services.
- We were granted access to the NHS Summary Care Record nationally and accessed the SCR nearly 2,000 times in the first few weeks of use, enabling us to review and prescribe on the same day.

Data and analytics

We introduced a new data presentation and analysis tool, Tableau, to support better decision making and provide evidence for service improvement. This has given us a deeper understanding of the impact of service improvements and new insights and evidence to support different ways of working. The impact has already been significant.

We initially used Tableau to support our datadriven project to improve medication assisted treatment. Tableau enabled us to identify and understand statistical differences between services and regions to identify improvements. We were also able to gain valuable insights and track changes in illicit street opioid use 'on top' across our treatment population. We have found minimal difference between what we learn from the people who use our services about their 'on top' use versus drug testing, which supports our 'believe in people' ethos.

Tableau was also a fundamental part of our response to coronavirus, helping us identify people who were most at risk and providing insight into key mitigations, such as naloxone provision, safe storage, and regular contact with service users.

Other Tableau dashboards have been developed for Hepatitis C and Mortality, with more under development.

Extending Service User Engagement Centres

We now have two fully functioning service user engagement centres. These provide a single point of contact for service users, families, carers and community partners. They support local teams to assess people's needs and provide information, advice and signposting to people who use our services.

Service user centres make it easier for everyone to talk to us, to seek support and to receive a response in a timely manner. Feedback so far shows this central approach has benefits for service users, staff and partners. The centres provide immediate support to people making initial enquiries and free up staff time to deliver care to those in services.

Website rebuild a hit with users

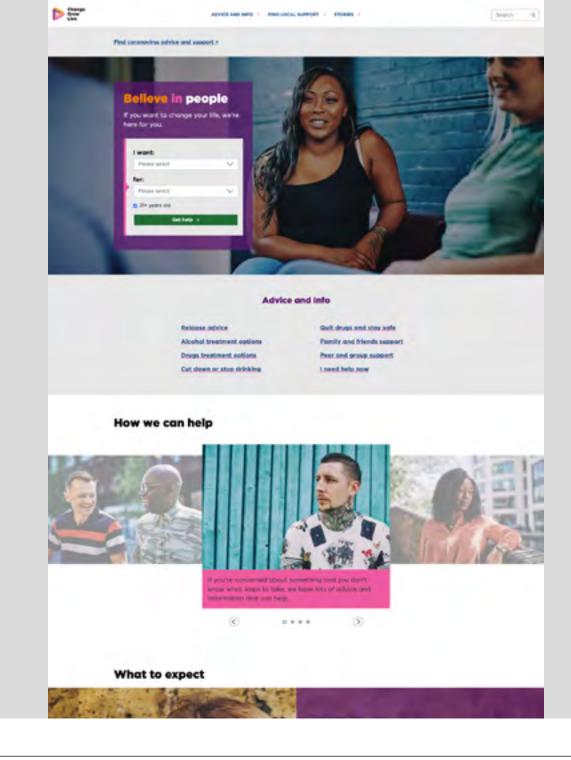
During the year we launched a new website based on extensive research around service users' requirements. Our aim was to help people find information quickly and easily using calm, clear language and imagery to reduce anxiety around seeking help. In addition to information about what we do and how to access support we also presented compelling stories of people's experiences of treatment and recovery.

The new site has been tested extensively with users and we have implemented changes based on their feedback. We also improved site accessibility for people with visual, sensory, cognitive or access needs.

Feedback has been really positive.

"As soon as you click on it it's really easy to find where you want to go."

• In the 3 months following launch, we saw an 88% increase in page views compared to the same period the previous year.



people in line with our revised strategy and

service objectives and challenges and embeds

relaunched values we are reviewing our Values

Based Interviewing model and approach to

values-based interviewing which will also

Response to coronavirus

include new indicators and new questions.

We introduced significant changes to working

practices in response to coronavirus. Many

and assessments and support for the people

staff began working remotely from home

we work with were provided digitally and

with a smart phone and equipment to work remotely. Staff were offered more flexible

hours to cope with the demands of childcare

Regular communications with staff included

lunch meet-up hosted by the Communications

and supporting service users out of hours.

daily meetings and an organisation-wide

Manager to ensure staff were kept informed and involved in decisions.

The Psychology team are working with HR and other colleagues to understand

over the phone. All staff were provided

our 'whole person approach. Due to our

People

In October 2019 we introduced a new online recruitment system to allow applicants and managers to process applications and recruitment on line. We are working through the implementation stage by stage and are due to complete the first part of onboarding in July 2020. This will allow for the full recruitment and offer process to be managed online so that applicants can access all their new starter documents and information online, in one place. The next stage will be to improve the system capabilities and user experience. We will also continue to build our recruitment and induction experience.

how best to support the mental health and wellbeing of staff, particularly considering

employee assistance programme for help and advice, using phone, email and online chat. The during the year were seeking information. Some people we referred for structured counselling and others to external support agencies.

We continue to review the way we support coronavirus, which has fundamentally changed our way of working for now. values. For example by: improving induction; **Online recruiting** building a culture of leadership: reviewing our policies supporting wellbeing; and providing training that is more clearly aligned to local

onboarding processes to enhance the applicant

Employee assistance programme Both employees and volunteers can contact our majority of people who contacted our advice line



Motivational interviewing

The Psychology team are working to enhance our Motivational Interviewing (MI) training and supervision programme to help staff develop the skills to deliver trauma informed care. Staff will be trained in what is known as 'spirit' of MI while others will go on to undertake more extensive MI training to ensure our people have every opportunity to learn how to use listening skills to notice where and how change is possible for our employees and service users.

Counselling training and audit

The Psychology team are working with colleagues from the volunteering and accredited learning team to establish a robust framework for the running of counselling services. This will enable us to conduct a wider evaluation of the impact of counselling on people's mental wellbeing. We have also audited all services with unpaid counsellors/counselling students to understand their various qualifications and agree a minimum set of standards for the safe running of counselling services.

Real Living Wage

In August 2019 we gained our accreditation as a Real Living Wage Employer. We have been paying the Real Living Wage since September 2017. Our accreditation means that we are bound to increase pay in-line with the Living Wage year on year. It also means that we are working towards milestones to ensure all our subcontractors pay the Real Living Wage for anyone working in our services. We have also ensured that where possible our suppliers adopt /encourage the real living wage. As part of our accreditation we were asked to be part of a working group to make Birmingham a Living Wage Place and are currently participating in the development of an action plan to achieve this.

Gender pay gap

Change Grow Live is an organisation that believes in people. We believe that having any gender pay gap is unacceptable. Our median gender pay gap is lower than the national average and has reduced again in 2020. We see this as positive progress.

Our 2019 gender pay gap report saw significant change to the gender diversity of our organisation's senior management team and covered the period when Change Grow Live merged with Sova and Change Grow Live in April 2019.

In 2020 our gender pay gap reduced when looking at both the mean and median percentage difference. It is now 3.3% median (3.6% in 2019) and 8.8% mean (9.4% in 2019), in favour of men.

The average UK median gender pay gap for all employees was 17.3% (House of Commons Briefing Paper – The Gender Pay Gap, 6/3/2020).

Following a review of our remuneration policy we are no longer paying bonuses.

Learning and development

Staff and volunteers access learning and professional development through our learning management system Connect Skills. This offers access to hundreds of open courses on diverse topics and opportunities for blended learning. We improved the Connect Skills interface during the year to make learning easier and more enjoyable.

We are increasingly moving to online training and our trainers are developing their online facilitation skills to enhance this. Our team have supported services to create their own localised e-learning content, which is more responsive to their needs. We are also helping our volunteer and peer mentor coordinators, by offering them dedicated and accessible online 'train the trainer' courses.

The learning and development team have gained a close understanding of what services on the ground need to meet their key challenges and help their teams be the best they can for our service users. In response to their feedback we developed new training packages around basic substance use, steroids and caseload management, incorporating a 'whole person approach' into all our training materials.

Our reporting tools support managers to identify the training and development needs of their staff to make sure they are equipped to provide the best support to the people who use our services.

Building on IIP feedback

In December 2019 we retained our Silver award status with Investors in People (IIP). Their feedback report measured our improvement against their assessment three years ago, giving us a lot of insightful information to build on in the coming year. This included responses from 1,187 staff that completed the IIP survey and over 100 face-to-face and telephone interviews conducted with staff and volunteers by our independent IIP assessors.

People said they liked:

- Our friendly supportive environment.
- Being encouraged to take the lead in delivering services.
- Being encouraged to develop and grow with opportunities for progression.
- Being trusted to make decisions.

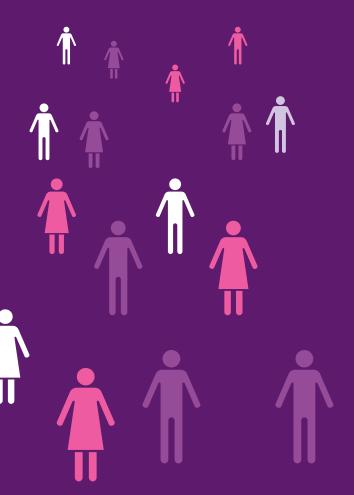
Working for us would be even better if:

- There was more recognition.
- Learning and development better reflected service users' needs.
- Management practice was more consistent.
- Staff had greater involvement in local decision making.
- Performance management supported people to develop and grow.



Learning and development highlights

Support provided to people between April 2019 and March 2020:



• On average about **3,000+** people log into Connect Skills each month.

We currently offer:

- 77 different classroom courses (following an exercise of condensing our classroom catalogue), 179 e-learning modules and 44 videos.
- **789** classroom courses were delivered, with a total of **7,079** attendances.
- 93% of evaluations reflected that courses were of a good to excellent standard and had enhanced the delegates' knowledge and skill.
- **19,444** online modules (each averaging 30 minutes) were successfully completed.
- **6,935+** videos were watched and marked completed.

Apprentices and apprenticeships

- During the year, **101** employees started an apprenticeship levy funded qualification, with **6** employees successfully completing.
- We currently have **120** employees on apprenticeship programmes ranging from level 2 to level 7 qualifications.

We are exploring how we can use our apprenticeship programme for recruitment and the continual development of our staff.

Social Work



The growing role of social work

Social work is a growing and valued profession within Change Grow Live. Social workers collaborate with recovery and clinical staff to provide a whole person, strengthsbased approach that enriches support for people with complex and multiple issues.

Social workers listen to people and families to identify their needs and support them to increase their resilience and skills. They work collaboratively with partner agencies to support people to navigate the systems around them and advocate for people to receive the right support at the right time.

Social workers also provide wide-ranging support, consultation and training to staff throughout the organisation. They help them develop their professional skills and knowledge and gain the confidence to deal with dynamic and challenging situations. Their analytical thinking supports enhanced assessment and planning skills and their legal literacy strengthens accountability.

Social Work student placements and professional development

We provide challenging and rewarding placements for social work students that enhance our services and help develop effective practitioners for the future. We currently have 90 social work students on placements.

Social work students work alongside our staff to develop their practice skills and professional knowledge and confidence. They provide assessments, risk planning and interventions for people who use our services and their families and learn about legislation and multi-agency working. They also learn communication skills, professional behaviour and practice knowledge through reflective practice.

Ten newly qualified social workers are undertaking their Assessed and Supported Year in Employment (ASYE) with us. The 12 month ASYE professional development programme provides a bridge between university and working practice, promoting a learning culture that supports individuals and teams to develop and grow and enhances professional skills, knowledge and confidence.

Change Grow Live | Annual Report and Accounts 2019-20 | www.changegrowlive.org

Equality, Diversity, Inclusion

As an organisation that works with some of the most vulnerable and stigmatised people in our communities, the actions we take to make our society more equal and inclusive can make a real impact. Our organisational values - to be open, compassionate and bold mean - we are committed to taking these steps ourselves - improving the accessibility of our services, enhancing the culture and recruiting a representative workforce.

Our equality data shows that overall, we have a diverse, representative workforce, and that services are being provided to those from diverse, underrepresented communities. We recognise however, that we can always do more to be more representative of the communities we serve and to provide services that are fully accessible to marginalised and under-represented groups.

During the year we continued to demonstrate our commitment to EDI through the delivery of our three-year strategy, focused on developing accessible inclusive services, an inclusive culture, a diverse and representative workforce and inclusive leadership.

Investors in People Diversity and Inclusion Excellence Award

We won the Investors in People Diversity and Inclusion Excellence award in 2019. This was a fantastic achievement and demonstrates we believe in our people and support them to do their best work. As part of the award submission we talked about our Equality, Diversity and Inclusion Strategy, what we are doing to build a more inclusive organisation and some of our achievements.

"I am thrilled that we have won this award, which is a real example of the new organisational strategy in action showing what can be accomplished by working together. My thanks go to everyone across the organisation who helped us to achieve this recognition from Investors in People." Mark Moody, Chief Executive



2020 Stonewall Workplace Equality Index

For 2020, our Stonewall Workplace Equality Index ranking was 170 out of 502 participating organisations. Whilst this means that Change Grow Live is no longer in the top 100 of the index, Stonewall highlighted that our ranking was still a positive achievement as there were 60 more participating organisations compared to 2019. Throughout the year we continued to support LGBT+ equality inclusion initiatives across the organisation. We provided Change Grow Live branded rainbow lanyards to our staff and volunteers, promoted our services in UK Pride magazine (to encourage LGBT people to apply for our roles), took part in 14 UK Pride events and actively supported LGBT History Month.

Other EDI achievements

- We collated and published more comprehensive equality data to show the breakdown of our workforce by staff role and protected characteristic. We used this data to better understand which groups are underrepresented within particular staff roles, which in turn helped identify the areas where we needed to undertake targeted recruitment.
- We published our gender pay gap information and analysed our ethnicity pay gap.
- We consulted staff with lived experience of health conditions and impairments to improve guidance for managers on how to support the reasonable adjustment needs of staff.
- We began work to improve BAME recruitment, progression and retention.

Volunteers

Volunteering is an integral part of our ethos. The passion, professional and specialist skills of our volunteers contribute an immense amount to the range, reach and quality of our services.

Our diverse volunteering roles include: volunteer advocates; appropriate adults; student counsellors and social workers; and numerous community volunteers, including adult mentors and Independent Visitors for children and young people.

We have a strong track record of enabling people who have been through treatment services to support others as Peer Mentors. We also have a robust system of service user involvement, which sees people currently using our services volunteering to promote the voice of their peers and enable feedback loops.

Volunteering was strengthened during the year with the appointment of a dedicated head who has consulted over 100 volunteers and volunteer coordinators about ways to improve and develop volunteer experiences, opportunities for learning and progression and how to reward and recognise volunteers' contribution.

During the year:

- 1,673 people donated their time to us, meaning around one in every six members of our workforce is a volunteer.
- Together they donated in excess of 356,000 hours.

Many of our volunteers come to us with a desire to grow personally and professionally and we are committed to supporting people on this journey. During the year:

- 270 volunteers went on to gain employment.
- 288 volunteers gained new qualifications, including 79 people awarded through our internal regulated learning centre.
- Five young people from our Kirklees service became the first graduates of our specialist Young Person's Peer Mentor diploma.

During Volunteers Week 2019 we recognised and celebrated our volunteers through local events and a national social media campaign. A volunteer profile we shared received 2,100 'likes' on Facebook. "I know what recovery is like so I want to help other people. When you've experienced recovery yourself, you've got the empathy. I'm not from a textbook - I've been there, I've done that - my obsession with drink ruled my life, so I can relate to what people are going through." Volunteer

"Volunteering with Change Grow Live has given me my confidence and self-esteem back. I feel like I'm getting myself back. I've struggled with alcohol for 10 years and I was in denial about how it was affecting me. Now I feel empowered because I can help people." Volunteer



Financial Review

Change Grow Live reports consolidated income of £219.1 million for 2019-2020 (2018-2019: £212.5 million), an increase of 3%.

Consolidated Net assets and Consolidated Total Funds amount to £33.5 million (March 2019: £28.4 million), including cash balances, which increased to £50.1 million (2018-2019: £43.4 million). Maintaining a healthy balance sheet continues to form a primary objective of the financial management of the Charity.

Sova transferred its charitable activities to Change Grow Live in March 2019, and subsequently settled all liabilities before transferring net assets of £0.4m to Change Grow Live.

Principal funding sources of the group are explained in Note 1 to the financial statements.

Consolidated total resources expended, including direct costs and support costs, increased by 1.4% to £213.2 million (2018-2019: £210.3 million), representing 97.7% of contract income (2018-2019: 99.3%). Following significant cost increases of a prescribed opioid in 2018-2019, a programme commenced to find an alternative for our Service Users, resulting in a reduction of our prescribing costs.

From March 2020 Change Grow Live has been impacted by the Covid-19 pandemic. Our working practices and operations have been amended so that the risk of Coronavirus to both employees and clients is reduced. Despite our amended working practices, we have continued to support our clients and provided additional support and help where needed. Our commissioners and customers have continued to support us throughout this period, and we have been able to manage our additional costs.

The consolidated operating surplus ('Net incoming resources before other recognised gains/losses') on the Statement of Financial Activities is £5.9 million (2018-2019: £2.2 million) representing a 2.7% return on income (2018-2019: 1.1%).

The Trustees have reviewed its financial position and risk management policies together with factors likely to affect future development, including the challenging prevailing market conditions. The financial impact of coronavirus was at the centre of these discussions. The Trustees are in the opinion that this is an appropriate level of surplus and reserves generation and the group has adequate resources to continue in operation for the foreseeable future.

Reserves Policy

The group has accumulated total reserves of £33.5 million (March 2019: £28.4 million) of which £32.1 million (March 2019: £27.9 million) are Unrestricted as a result of generating annual surpluses on its activities, with £1.4 million (March 2019: £0.6 million) being Restricted funds. Within the Unrestricted funds £4.7 million (March 2019: £8.7 million) is designated to represent the net book value of fixed assets, with the balance being Free Reserves £24.2 million which includes a pension deficit of £2.8 million (March 2019: £15.8 million). There are no other designations, restrictions, commitments or fixed asset programmes affecting the reserves.

Reserves are also underpinned by liquid cash balances, which provide essential working capital funding for day-to-day operating costs, supporting the delivery of the Charity's objectives in an efficient and cost-effective way.

Consolidated Free reserves stand at £24.2 million (March 2019: £19.2 million) and are defined as total unrestricted reserves (£32.1 million) less unrestricted fixed assets (£7.9 mmillion) and their related loans (£0.1 million). This level of Free reserves represents 5.9 weeks (2018-2019: 4.7 weeks) of total resources expended.



Whilst the level of Free Reserves is an indicator in the sector, in addition the level of Unrestricted Reserves requirement is reviewed periodically by the Audit and Finance Committee. They assess the level of Unrestricted Reserves required in the event of an orderly wind down, such that liabilities arising in this scenario can be settled and Trustee obligations satisfied. This analysis, and the various detailed assumptions underpinning it. derive a cost of exit of some £15 million (March 2019: £15 million) which is defined as the Minimum Reserves Requirement. This compares to Free Reserves of £27.5 million at March 2020. The total reserves, which are also reflected within the overall cash balances, provide working capital funding in an efficient, cost-effective way to meet the Charity's ongoing liabilities, as well as providing protection against unforeseen expenditure and capacity for costs incurred in furthering the objectives of the Charity.

In considering the level of reserves, the Audit and Finance Committee ensures that the level is appropriate for the continued ability of the Charity to meet its objectives in the current uncertain funding environment. This includes reviewing key factors alongside the budgeting and forecasting process including income and its volatility; expenditure and its flexibility; accessibility of reserves; and sensitivities and risk around the planning assumptions made. This is an organic process and recognises that both strategic and financial planning informs the review of the level of reserves and will change as the environment in which Change Grow Live operates. The Trustees are therefore of the opinion that the level of reserves is acceptable and will also provide sufficient financial mitigation should Change Grow Live encounter adverse conditions in its market. On this basis, the Trustees also consider that Change Grow Live has adequate resources to continue the business for the foreseeable future.





Cash Reserves

Change Grow Live maintains liquid cash balances in order to ensure that on-going cash flow requirements are met. Surplus funds, over and above that requirement, are swept automatically on a daily basis into a flexible interest-bearing deposit account held with our banker, Barclays Bank. These deposited funds are on instant access for working capital purposes. Change Grow Live's credit policy requires that the Charity should meet minimum credit rating requirements to ensure that, as far as possible, the organisation is covering its risk of any capital loss. Income from investments in the year represents interest earned on these cash deposits and reflects the continued low interest rates during the year. The investment returns that are available are exceeded by inflation and hence the capital value has been slightly eroded during the year. The Trustees remain satisfied this is a prudent policy that serves the cash flow requirements of the organisation but have asked senior management to continually assess alternative utilisation of cash reserves.

Going Concern

The Board of Trustees has reviewed Change Grow Live's activities, financial position and risk management policies together with factors likely to affect future development, including the impact of economic uncertainty on contract income and service delivery. The financial impact of coronavirus was central to these assessments. Our trustees have concluded that, following the reconfiguration of service delivery, incorporating social distancing and other safeguarding measures alongside the ongoing monitoring of financial performance and risk management, it is reasonable to expect Change Grow Live to have adequate resources to continue in operation for the foreseeable future. Accordingly, the going concern basis of accounting continues to be adopted in preparing the financial statements.

Our aspirations for 2020-21



Financial measures

Change Grow Live has set a budget for 2020-2021 to include currently held service contracts and a small number of potential contracts. Given the ongoing pandemic there is uncertainty around any potential changes in the scale of the health and social care sector, and our structure continues to be flexible enough to react to any future changes.

Service and organisational development

We will continue to develop safe and effective services in the new socially distanced environment and work to embed our new strategy and values across the organisation. We will also resume aspirations that were put on hold while we responded to the demands of the coronavirus crisis.

Quality and governance

Work will continue on developing our ethical decision-making framework and we will review clinical governance processes to assess the quality of our treatment services.

Clinical services

In 2020 we will evaluate the costeffectiveness of buvidal (a medicine used to treat dependence on opioid drugs such as heroin or morphine), across two sites.

Fingerprint drug testing will be launched in our services following a successful evaluation. This method is less intrusive, and cleaner and more dignified for those using our services and will make testing safer and easier under social distancing rules.

Our naloxone programme will continue to be extended to encompass more partner organisations, including probation, ambulance, police and hospital services.

We will pilot home delivery of Hepatitis C treatment to our bases direct from the wholesaler, thereby improving adherence to treatment regimes for more people.

Research

Forthcoming research projects include: assessing the impact of Time Credits on the take-up of volunteering opportunities in our services; exploring the impact of social work in Nottinghamshire to develop a good practice framework; and researching the impact of coronavirus on the people who use our services.

Digital innovation

We will continue to develop our digital strategy and action plan, which will be aligned to our organisational strategy of doing things better, working together and telling our story. In line with our organisational values, we will: be open (sharing everything we learn with anyone working to support people); compassionate (human-centred and humble: if we discover that our product isn't useful, we'll change it); and bold (experimenting with innovative new solutions). Our approach will be aligned with our serviceuser centred design approach, ensuring we focus on service user needs, and deliver change well. We will take a whole-person approach, designing digital solutions for people, not problems. The coronavirus pandemic has pushed us to move to a mostly digital/telephone service offer. We will ensure we learn from this and retain good practice going forward.

People

We will continue to explore new ways of working introduced as a response to the coronavirus crisis and consider their impact on staff wellbeing.

We are also working to provide a deeper level of personalised support to teams and support services through a locally aligned continuing professional development plan over the coming year.

Our focus for 2020 has also been influenced by the feedback received from our Investors In People review, and includes:

- Continued roll-out of our new strategy / 'Believe in People' programme - raising awareness of our organisational strategy and values and how these can be brought into people's every day experiences.
- Establishing and embedding a formal reward and recognition process supported by more consistent management skills and approaches.

We intend to offer a Social Work Apprenticeship, providing more opportunities for professional growth for current staff as well as attracting new people to the organisation and growing the social work profession.

EDI

Following the killing of George Floyd in Minneapolis on 25 May 2020 and the subsequent Black Lives Matter protests around the world, many organisations in the UK are reviewing their working practices to ensure that they are fair and inclusive for their Black and Asian workforce. Change Grow Live actively supports Black Lives Matters and work is being undertaken to respond to issues highlighted by Black, Asian and White staff and volunteers.

This feedback has helped to inform the content of our Race Equality Action Plan, which includes: publishing ethnicity pay gap data; delivering unconscious bias trainina: establishina national/ regional Black and Asian staff forums; and leadership development/succession pathways to improve the representation of Black and Asian staff within senior leadership roles. As an aspect of the development of our plans, we also acknowledge the action required by our majority people groups in moving our equality agenda forward and the necessity to understand the part that the majority can play in addressing issues. We will also use our platform as a health care provider to work with others to fight racism and intolerance in the health and social care sector and beyond.

Service User Involvement

We are committed to improving the ways we gather service users' views to get a better idea of what people think about what we do. We will be guided by the feedback we receive and are confident that by doing so we can ensure our services continue to meet the emerging needs of those who use them.



Principal Risks and Uncertainties



Change Grow Live continues to operate in an uncertain and challenging service delivery environment. We need to be responsive to changing demands and to fulfil the stringent requirements of our commissioners and regulatory bodies against ongoing reductions in funding. We need to exercise extreme vigilance in the delivery of clinical services and we continuously review our systems and processes against the highest standards to ensure they are safe and effective.

We have a well-developed risk management approach and have invested in industry standard methodologies for identifying and mitigating risk. Our online Datix risk assessment and incident reporting system analyses health and safety and clinical and operational risk across the organisation.

The Board and its committees review the current risk register regularly and ensure all emerging or unforeseen risks are immediately addressed. The Quality and Performance committee conducts an in-depth review of risk registers at its meetings and reports by exception to the full Board. In addition, the Board conducts a bi-annual review of strategic risks affecting the organisation.

Response to coronavirus

Our coronavirus response was managed in line with our clear organisational strategy, values and clarity around decision making. We aimed to run the organisation as effectively as possible balanced against the opportunity to slow the spread of the virus, in support of the wider public health strategy. We developed our overarching business continuity plan to support a congruent response, together with bespoke plans to help all areas of the organisation respond appropriately. Our focus was to ensure continuity of essential delivery, such as priority clinical care:

- We worked to ensure the continued treatment of all people who needed opioid medication-assisted treatment (MAT).
- We liaised closely with Public Health England and other providers to support them in developing a clinical consensus on guidelines.
- We maintained contact with our industry partners to safeguard uninterrupted supply of medications.

Risk table

The following table sets out our principal risks and uncertainties and lists the actions taken to mitigate and manage these risks:

RISK	MITIGATION & MANAGEMENT
Failure to safeguard children and 'at risk' adults	Safeguarding embedded in all governance structures and plans across Change Grow Live with industry leading policies, Change Grow Live safeguarding case management module and appropriate induction and training of staff.
Failure to appropriately train and equip our workforce	A comprehensive workforce learning and development strategy for staff and volunteers in all areas of activity. Significant investment in staff tools and resources including IT and digital.
Failure to prevent 'amenable' deaths	Dedicated mortality reduction programme. Oversight of clinical practice and clinical governance policy from the Quality and Performance Committee and Medicines Management Group. Quarterly analysis of prescribing errors with action plans.
Organisational financial performance	Detailed and ongoing operational and financial monitoring of financial position and project performance. Audit and Finance committee scrutiny, including analysis of the contractual implications of bid opportunities and retention of appropriate levels of reserves.
Organisational contractual performance	Internal contractual, governance and performance management systems, including operational performance dashboards, quality improvement tool and service improvement plans.
Failure to secure new business and diversify into new markets	New business strategy and work plan.
Failure to comply with regulatory frameworks	Clear governance and supervisory structure in all operational and specialist areas with full training for staff.
Failure to protect our reputation	Safe and effective quality assurance framework and crisis communications plan. Oversight from Brand and Business Development Committee.

Structure, Governance and Accountability

Constitution

Change Grow Live is a company limited by guarantee and governed by a Memorandum and Articles of Association that determine its legal framework. Change Grow Live has a Code of Governance that identifies the values and expectations that control the conduct of its affairs.

The financial statements consolidate the results of the Charity and its subsidiary companies including Sova, Change Grow Live Services Ltd and The Secret Space, all wholly owned subsidiaries of Change Grow Live (note 18).

Charity's Objects

The Charity's Objects are detailed in the Memorandum of Association and are:

- to relieve sickness and to advance the education and training in particular of all persons (and members of their families) who:
- have committed, or are likely to commit, a criminal act or acts; or
- have been, or are, or are in danger of becoming substance misusers; or
- have been, or are, or are in danger of becoming addicted to or dependent upon drugs of any description including without limitation on the generality of the foregoing illegal drugs, alcohol, solvents or other addictive substances; or

- have been, or are, or are likely to become victims of domestic abuse; or
- have been, or are, or are likely to become homeless; or suffer mental ill health; or
- have suffered a legal restriction on their liberty in any penal or correctional establishment;
- to promote for the public benefit the prevention of criminal acts and of drug abuse and substance misuse and of homelessness;
- to promote for the public benefit the protection of people and property from criminal acts and the effects of drug abuse and substance misuse;
- to relieve poverty in particular, but not exclusively, through the provision of housing;
- to advance the education of the public by promoting study and research into homelessness and all aspects of and methods of crime prevention and delinquency and the prevention of drug abuse and substance misuse and to disseminate the useful results of such research;
- the promotion of charitable purposes within the member countries of the European Union, for the advancement of education, the protection of health, the relief of poverty, sickness and distress and to reduce substance related harm to the individual and the wider community; and
- to undertake such other activities as are charitable.

The New Charity Governance Code

The trustees are aware of the Charity Governance Code published in 2017 which sets out the principles and recommended practice for good governance within the sector. The Board of Trustees is satisfied that Change Grow Live applies the principles of the code within its current Governance arrangements which are regularly reviewed and updated.

Further details can be found in the Quality and Governance section on page 24.

Board of Trustees (Directors)

Duties and Responsibilities

The trustees (directors) of the Charity, must act in accordance with a set of general duties. These duties are detailed in section 172 of the UK Companies Act 2006 which is summarised below.

A director of a company must act in the way they consider, in good faith, would be most likely to promote the success of the company for the benefits of its members as a whole, and in doing so have regard (amongst other matters) to:

- a. the likely consequences of any decision in the long term
- b. the interests of the company's employees
- c. the need to foster the company's business relationships with suppliers, customers and others

- d. the impact of the company's operations on the community and the environment
- e. desirability of the company maintaining a high reputation for high standards of business conduct

On joining the board of trustees, a new trustee will be briefed on their duties and will be offered formal training from an external advisor. It is important to recognise that in a large charity such as ours, the trustees partly fulfil their duties through a governance framework that delegates day-to-day decision-making to the Executive Leadership team of the charity. Details of this can be found in our Governance Framework on pages 47 to 49.

The trustees consider that they have fulfilled their obligations under section 172. The following summarises how this has been achieved.

Risk Management

We operate in an uncertain and challenging service delivery environment with stringent requirements. It is therefore vital that we effectively identify, evaluate, manage and mitigate the risks we face and we continue to develop our approach to risk management.

For details of our principal risks and uncertainties, and how we manage our risk environment please see pages 43 to 44.

Statement of Engagement With our Employees

People are at the heart of what we do in both terms of our employees and our service users. We believe in people and our culture and values are fundamental to the successful delivery of our services. With this in mind the development and investment in our people is integral in our charity. A sub-committee of the board, the HR Committee, oversees the management and development of our people, including external assessment through Investors In People.

For further details on people please see pages 31 to 37.

Statement of Change Grow Live's Business Relationships with Suppliers and Other Stakeholders

We recognise the importance of engagement with our commissioners, professional bodies and other organisations both within our sector and outside of our sector. We work closely with Public Health England and the NHS on a range of issues and activities and are active members of Collective Voice, the national alliance of drug and alcohol treatment and recovery charities. These relationships have been particularly important during the coronavirus pandemic.

We value all of our suppliers and have multiyear contracts with our key suppliers, adopting a partnership approach where possible.

We utilise framework agreements to enable a wider supply chain and we work with a wide range of Social Enterprise suppliers. Our close working relationships with suppliers has served us particularly well during the pandemic, specifically in the sourcing of personal protective equipment used by our frontline staff.

Community and Environment

Our whole person approach addresses all the factors that impact on individual health and wellbeing and contribute to strong and cohesive communities. We aim to leverage our expertise and enable employees to support the communities around us. This is measured through our Social Value Impact and underpins our service delivery.

In addition, we actively monitor our energy usage and our carbon outputs and seek to use utilise goods and services that reduce carbon outputs.

2019/2020. The disclosure of energy usage is a new requirement and therefore we do not have prior year usage information.

	Year End 31 March 2020
UK Energy use (kWh)	15,756,688
Associated greenhouse gas emissions (Tonnes CO2 equiv (TCO2e))	3,451
Intensity ratio emisions per FTE (TCO2e/FTE)	0.92

Associated greenhouse gas emissions have been calculated using the greenhouse gas emissions protocol method.

Maintaining a Reputation for High Standards of Service Delivery

As an organisation, we operate within an ethical framework, which forms the basis of our decision making and this is formally governed throughout our Governance Framework. Further details on this can be found on pages 47 to 49.

Operating within a regulated sector, we work closely with our regulators endeavouring to ensure that our service delivery is of the highest possible standard.

Governance Framework

Operation of the Board

Trustees are recruited to the Board via a recruitment partner who is usually chosen as part of a competitive tender process to ensure fairness. Recruitment partners use a full and detailed brief to identify potential candidates with the required skills and experience to fulfil our organisational strategy. The full recruitment and selection process includes interviews and project visits.

The skill set of the Board is reviewed on an ongoing basis by the Chair and Vice-Chair and forms part of the standard discussions at the HR Committee. We seek to recruit Board members who share our values and reflect gender and ethnic diversity.

All trustees receive a full induction and participate in on-going training events. Trustees regularly visit projects to review service delivery and the implementation of strategy and policy.

The Board meets at least four times a year and also holds two strategy development days. Trustees do not receive any remuneration but may be reimbursed for general expenses.

Day-to-day management is delegated to an Executive Management team led by the Chief Executive. Responsibility for review of the periodic management accounts and the annual financial statements is delegated to the Audit and Finance Committee. Other specific responsibilities are delegated to four sub-committees which meet regularly to provide in-depth analysis, scrutiny and oversight into the full range of the charity's activities. The sub-committees provide detailed reports and recommendations to the full Board which help fulfil the risk management requirements and due diligence processes of the Board.

Board Sub-Committees

Audit and Finance Committee

The committee advises the Board on matters relating to: financial risk management and internal control; internal and external financial audit; financial management; large capital expenditure, investments, mergers & acquisitions; and IT quality in regard to financial reporting, operations and cyber risk.

Quality and Performance Committee

The committee's purpose is to advise the Board on Change Grow Live's processes for ensuring the safety, effectiveness and quality of all clinical and social care service delivery and promoting continuous improvement through a learning culture. This includes overseeing evidencebased practice and protecting children, young people and adults from abuse and harm.

The committee monitors legal and regulatory compliance and analyses incidents, lessons learnt and subsequent remedial and preventative actions, including the reduction of preventable deaths. The committee also oversees organisational risk identification and management and oversees and signs off research undertaken by Change Grow Live and escalated by the Research Oversight Group.

Brand and Business Development Committee

The Brand and Business Development Committee is charged with ensuring that strategic brand, marketing and business development issues are appropriately identified and managed.

Human Resources Committee

The Human Resources Committee advises the Board on: the annual compensation and pay strategy of the Chief Executive, executive members and staff; the recruitment, induction, and tenure of trustees; strategic and operational HR matters; workforce development; service user involvement; and health and safety.

Remuneration

Remuneration is set within the overall context of the purposes, aims and values of the charity and with recognition of the impact pay levels have on the wider pay policy of Change Grow Live.

Setting remuneration levels is ultimately the responsibility of trustees, this function is delegated to the Human Resources Committee, which reviews the recommendations of the Chief Executive in relation to rewards for senior staff and directly sets Chief Executive pay. Retention, recognition of performance and motivation are among the key considerations and principles used in setting remuneration levels, as are:

- The types of skills, experience and competencies needed to undertake the role.
- The scope, size, complexity, demands and levels of responsibility of the role.
- Changes in the nature, size, complexity, demands and levels of responsibility.
- Individual performance in the role against business plan targets and personal objectives along with Change Grow Live's overall performance.
- Market scanning of other organisations' pay and remuneration policies and levels.
- Change Grow Live's ability to pay.
- The impact of any pay award on the wider organisation and the reputation of the charity.

Senior staff salary and performance reviews are undertaken in March of each year to coincide with the end of the financial year. Other staff pay is reviewed in October of each year. The process of setting executive salaries including the key management personnel as defined in note 4, involves the Chief Executive reviewing individual performance with each member of staff and reporting to the Remuneration and Nominations Committee.

Our commitment is to narrow and ultimately eradicate any gender pay disparity within the organisation. We do not pay contractual bonuses to any staff and are pleased that significant progress has been made over the last three years to reduce pay discrepancies at both median and mean rates.

Public Benefit

The Charities Act 2011 requires all charities to explicitly consider how their charitable aims are carried out for the public benefit. The Board of Trustees must:

- ensure they carry out the aims of Change Grow Live for the public benefit;
- have regard to the Charity Commission's guidance on public benefit; and
- report on Change Grow Live's public benefit in the Trustees' Annual Report.

The Board of Trustees has considered these requirements alongside Change Grow Live's aims and activities, all of which are detailed in this report. The Board is satisfied that Change Grow Live has charitable aims that are carried out for the public benefit, in particular:

- the benefits to individuals, families and communities (and hence the public) are clear and in line with Change Grow Live's aims;
- the beneficiaries are entirely appropriate to the aims;
- there is no unreasonable restriction to accessing Change Grow Live's services, either by poverty, any requirement to pay fees, any geographic restriction or the provision of services only for certain sections of the public; and
- there is no private benefit.

In arriving at this conclusion, the Board of Trustees also had regard to the Charity Commission's guidance on public benefit.

Fundraising

The charity had no fundraising activities requiring disclosure under S162A of the Charities Act 2011.

Modern Slavery Act 2015

Change Grow Live is committed to meeting the requirements of the Modern Slavery Act. Our Equality, Diversity and Inclusion policy sets out our processes for ensuring that modern slavery, in any form, does not go undetected in either our recruitment process or our business and supply chain. Our commitment to equality and human rights extends beyond compliance with legislation and we invest in ethical practice at every level of our activity.

Other Change Grow Live policies and procedures that relate to the protection of victims of slavery and human trafficking are the Safeguarding Adults Policy, the Safeguarding Adults Toolkit, and the Child Sexual Exploitation Guidelines.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Change Grow Live for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires trustees to prepare financial statements for each financial year which give a true and fair view of the state of the affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the group will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the group and enable them to ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006. They are also responsible for safeguarding the assets of the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- there is no relevant audit information of which the charitable group's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The trustees are responsible for the maintenance and integrity of the corporate and financial

information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

This report including the strategic report on pages 5 to 42 was approved by

Mike Pringle, Chair 15 September 2020

Management and Governance

Trustees and Directors

Mike Pringle CBE – Chairman Andreas Raffel – Vice Chairman Sheena Asthana Rachel Atkinson Wilf Bardsley – resigned 12 June 2019 Nick Burstin Jean Daintith

Craig Denholm - appointed

John Harris

24 March 2020

Rahul Jaitly – appointed 24 March 2020

Stu McMinnies

Gillian Parker QPM – retired 24 September 2019

Caroline Shuldham – appointed 24 March 2020

Board Sub-Committees

Audit and Finance Committee

Stu McMinnies (Chair) Jean Daintith Mike Pringle Andreas Raffel Phil Abram (co-opted member)

Quality and Performance Committee (formerly Integrated Governance Committee)

Jean Daintith (Chair) Sheena Asthana Wilf Bardsley John Harris Stu McMinnies Mike Pringle Caroline Shuldham

Human Resources Committee (formerly Remuneration and Nominations Committee) Andreas Raffel (Chair) John Harris Rahul Jaitly Stu McMinnies Gillian Parker Mike Pringle Paul Barry (Co-opted member)

Brand and Business Development Committee

Nick Burstin (Chair) Sheena Asthana Rachel Atkinson Craig Denholm John Harris Rahul Jaitly Mike Pringle

Executive Management Team

Mark Moody, Chief Executive and Company Secretary Dr Prun Bijral, Executive Medical Director and Responsible Officer Kevin Crowley, Executive Director Mike Pattinson, Executive Director (leaving 31 July 2020) Andrew Mondon, Chief Finance Officer Nic Adamson, Executive Director Bernie Casey, Executive Director

Vicki Markiewicz, Executive Director Sue Shaw, Executive Director

Auditors

Crowe U.K. LLP St Bride's House 10 Salisbury Square London EC4Y 8EH

Bankers

Barclays Bank plc 2nd Floor, 90-92 High Street Crawley, West Sussex, RH10 1BP

Legal Advisors

DMH Stallard Gainsborough House Pegler Way Crawley West Sussex RH11 7FZ

Charity Number

England and Wales 1079327 Scotland SC039861

Company Number

England and Wales 03861209

Registered and Principal Office

3rd Floor, Tower Point 44 North Road Brighton BN11YR

Independent Auditor's Report

To the Members and Trustees of Change Grow Live

Opinion

We have audited the financial statements of Change Grow Live for the year ended 31 March 2020 which comprise the Consolidated Statement of Financial Activities, Consolidated and Charity Balance Sheets, consolidated Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and the charitable company's affairs as at 31 March 2020 and of the group's incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and Regulations 6 and 8 of the Charities Accounts (Scotland) Regulations 2006 (amended).

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's or the charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion based on the work undertaken in the course of our audit

- the information given in the trustees' report, which includes the directors' report and the strategic report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the trustees' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In light of the knowledge and understanding of the group and the charitable company and their environment obtained in the course of the audit, we have not identified material misstatements in the [strategic report or the] directors' report included within the trustees' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 require us to report to you if, in our opinion:

- adequate and proper accounting records have not been kept; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group's or the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with the Acts and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of part 16 of the Companies Act 2006, and to the charitable company's trustees, as a body, in accordance with Regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members and trustees those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company, the charitable company's members as a body and the charitable company's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

N. Haihemi

Naziar Hashemi | Senior Statutory Auditor For and on behalf of Crowe U.K. LLP, Statutory Auditor, London

Date: 25 September 2020

Consolidated Statement of Financial Activities

(Incorporating the Income and Expenditure Account) For the year ended 31 March 2020

	Notes	Unrestricted Funds £'000	Restricted Funds £'000	Group Total Funds 2020 £'000	Unrestricted Funds £'000	Restricted Funds £'000	Group Prior Year Funds 2019 £'000
Income and endowments from:							
Donations and legacies	1	45	-	45	61	-	61
Investments	1	269	-	269	139	-	139
Charitable activities:							
Health and social care services		216,742	2,064	218,806	211,279	590	211,869
Other income	1/6	-	-	-	504	-	504
Total		217,056	2,064	219,120	211,983	590	212,573
Expenditure on:							
Charitable activities:							
Health and social care services	3	211,955	1,275	213,230	209,707	625	210,332
Total	3	211,955	1,275	213,230	209,707	625	210,332
Net income/(expenditure)	2	5,101	789	5,890	2,276	(35)	2,241
Transfers between funds	12/13	-	-	-	(3)	3	-
Net incoming resources before other recognised gains/(losses)		5,101	789	5,890	2,273	(32)	2,241
Other recognised gains/(losses)							
Actuarial (losses) on Social Housing pension schemes	17	(690)	-	(690)	(874)	-	(874)
Actuarial (losses) on defined benefit pension schemes	17	(177)	-	(177)	(162)	-	(162)
Net movements in funds		4,234	789	5,023	1,237	(32)	1,205
Reconciliation of funds							
Total funds brought forward		27,868	563	28,431	26,631	595	27,226
Total funds carried forward		32,102	1,352	33,454	27,868	563	28,431

The Charity reports Total income and endowments of £218,913K (2019: £209,192K) and Net income of £5,905K (2019: £2,276K).

The Group has no recognised gains or losses for the year other than as detailed above.

The net movements in the Group's funds for the year arise from the Group's continuing operations.

The Accounting Policies on pages 56 to 58 and the Notes on pages 59 to 84 form part of these accounts.

Balance Sheet As at 31 March 2020

		Gro	oup	Cha	Charity	
	Notes	2020 £'000	2019 £'000	2020 £'000	2019 £'000	
Fixed assets						
Intangible assets	5	-	-	-	-	
Tangible assets	6	8,558	8,719	8,558	8,719	
		8,558	8,719	8,558	8,719	
Current assets						
Debtors	7	25,160	31,899	32,383	34,422	
Cash at bank and in hand		50,060	43,412	36,889	34,015	
		75,220	75,311	69,272	68,437	
Creditors: amounts falling due within one year	8	(41,578)	(46,319)	(36,022)	(39,851)	
Net current assets		33,642	£28,992	33,250	28,586	
Creditors: amounts falling due after more than one year	9	(84)	(84)	(84)	(84)	
Provisions for liabilities and charges	10	(5,826)	(5,526)	(5,826)	(5,526)	
Provisions for defined pension obligations	10	(2,836)	(3,670)	(2,836)	(3,670)	
Net assets		33,454	28,431	33,062	28,025	
Funds						
Unrestricted	12	32,102	27,868	31,710	27,462	
Restricted	13	1,352	563	1,352	563	
		33,454	28,431	33,062	28,025	

A separate Statement of Financial Activities is not presented for the Charity itself as it has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006. Approved by the Board of Directors and Trustees on 15 September 2020 and signed on its behalf by:

Bar M. M. Monsido

Hullon

Stuart McMinnies | Trustee

Professor Mike Pringle CBE | Chair

The Accounting Policies on pages 56 to 58 and the Notes on pages 59 to 84 form part of these accounts. Company Registration Number: 03861209 (England and Wales)

Consolidated Statement of Cash Flows

As at 31 March 2020

	Notes	Group 2020 £'000	Group 2019 £'000
Cash flows from operating activities :			
Net cash provided by operating activities	16	6,822	8,125
Cash flows from investing activities:			
Dividends, interest and rents from investments		269	139
Finance charges on defined benefit pension scheme deficit payment plan		(443)	-
Proceeds from the sale of property	6	-	504
Purchase of tangible fixed assets	6	-	(7)
Net cash used by investing activities		(174)	636
Net cash used by financing activities			
Change in cash and cash equivalents in the year		6,648	8,761
Cash and cash equivalents at the beginning of the year		43,412	34,651
Cash and cash equivalents at the end of the year		50,060	43,412

Reconciliation of net cash flow to movement in net debt	Group 2020 £'000	Group 2019 £'000
Increase in cash in the year	6,648	8,761
Decrease in net debt	-	-
Cash and cash equivalents at the beginning of the year	43,412	34,651
Cash and cash equivalents at the end of the year	50,060	43,412

Analysis of changes in net debt	At 1st April 2019 £'000	Cash Flow £'000	At 31st March 2020 £'000
Cash at bank and in hand	43,412	6,648	50,060
Bank and other loans	(84)	-	(84)
Total	43,328	6,648	49,976

The Accounting Policies on pages 56 to 58 and the Notes on pages 59 to 84 form part of these accounts.

Accounting policies

General Information

Change Grow Live is a private company limited by guarantee and incorporated in England. The registered office address is 3rd Floor, Tower Point, 44 North Road, Brighton BN1 1YR. The company registration number is 03861209 (England and Wales).

Basis of preparation

The financial statements of the Charity, which is a public benefit entity under FRS 102, have been prepared under the historical cost convention, as modified by the revaluation of certain fixed assets, in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Charities SORP (FRS 102)) and the Companies Act 2006.

Basis of consolidation

These financial statements consolidate the results of the Charity and its subsidiary companies including Sova, Change Grow Live Services Ltd and The Secret Space Ltd, all wholly owned subsidiaries of Change Grow Live (note 18). The Recover Team Ltd was consolidated up to the date of its disposal on 8 November 2018. A separate Statement of Financial Activities is not presented for the Charity itself as it has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006. Sova, Change Grow Live Services Ltd and The Secret Space Ltd are included within the group financial statements on a line by line basis with intercompany transactions eliminated on consolidation.

The principal policies of the Group are as follows:

a. Going concern

The Board of Trustees has reviewed Change Grow Live's activities, financial position and risk management policies together with factors likely to affect future development, including the impact of economic uncertainty on contract income and service delivery. The financial impact of coronavirus was central to these assessments. Our trustees have concluded that, following the reconfiguration of service delivery, incorporating social distancing and other safeguarding measures alongside the ongoing monitoring of financial performance and risk management, it is reasonable to expect Change Grow Live to have adequate resources to continue in operation for the foreseeable future. Accordingly, the going concern basis of accounting continues to be adopted in preparing the financial statements.

b. Income

Incoming resources from charitable activities includes contract and grant income, rents receivable and other sundry receipts.

"Contract income is recognised in line with the delivery of the service and is accrued or deferred where required when cash is received in advance or arrears of service provision.

Where income is related to performance and specific deliverables, income is recognised as the Charity earns the right to consideration by its performance, including contracts which contain payment by results requirements.

Grant, donation, legacy and other income is recognised when the charity becomes entitled to the funds, receipt is probable and amounts can be measured reliably.

Where conditions exist which restrict the use of income to a particular purpose, income is recorded in an appropriate restricted fund."

c. Project accounting/allocation

Income and direct costs relating to charitable activities are allocated wholly to the charitable activity category of 'Health and social care services'.

Support costs are apportioned to charitable activities based on the direct costs of those activities.

d. Classification of expenditure

Direct costs represent all costs which relate directly to charitable activities and governance costs. Support costs are those incurred to support charitable activities and governance.

Expenditure has been classified in accordance with the Charities SORP (FRS 102).

e. Project start-up costs

Project start-up costs are treated as revenue expenditure in the period that a contract commences and matched with associated contract start-up income. In all other cases, project start-up costs are treated as revenue expenditure when incurred.

f. Intangible fixed assets

Intangible assets are recognised at cost and are subsequently measured at cost less accumulated amortisation and accumulated impairment losses. Amortisation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

IT software costs

20%/33.3% per annum on a straight line basis, on original cost.

g. Tangible fixed assets

Freehold property

In accordance with FRS 102 freehold land is not being depreciated. Depreciation is charged on freehold buildings over a period of 50 years on a straight line basis. The trustees consider the market value of the properties on an annual basis, together with reviewing them for impairment in accordance with FRS 102. Freehold land and buildings are initially recognised at cost but are subject to periodic revaluation by the trustees.

Capitalisation of other assets

Leasehold improvements, computers and other equipment purchased for specific projects are treated as revenue expenditure at the date the cost is incurred. Other assets with a value greater than £2,000 are capitalised under the historic cost basis and depreciated to write off the cost of the assets over estimated useful lives. Tangible fixed assets are recognised at cost and are subsequently measured at cost less accumulated depreciation. The annual depreciation rates and methods used are as follows:

Leasehold property

Leasehold improvements - over the lease term, on original cost.

IT hardware

20%/33.3% per annum on a straight line basis, on original cost.

Furniture and equipment

15% per annum on a straight line basis, on original cost.

h. Fixed asset investments

Fixed asset investments represent cash balances which are not required to meet the day to day working capital requirements of the Group and Charity and are included on the balance sheet at their amortised cost.

i. Dilapidation provision

Provision is made for the legal obligation in property leases to reinstate the premises to the condition they were at the date the lease was signed and an estimate is made of the cost of that reinstatement.

j. Financial instruments

Basic financial assets

Basic financial assets, which include trade and other receivables and cash and bank balances, are initially measured at transaction price including transaction costs and are subsequently carried at amortised cost.

Basic financial liabilities

Basic financial liabilities, including trade and other payables, bank loans, loans from fellow group companies that are classified as debt, are initially recognised at transaction price. Debt instruments are subsequently carried at amortised cost. using the effective interest rate method. Trade payables are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers. Accounts payable are classified as current liabilities if payment is due within one year or less. If not, they are presented as non-current liabilities. Trade payables are recognised initially at transaction price and subsequently measured at amortised cost using the effective interest method.

k. Funds

Restricted funds

Restricted funds are those whose application is limited to those causes specified by the donor. Any deficit incurred on any individual restricted fund is written off to the 'Unrestricted fund' in the financial year in which the deficit occurs.

Unrestricted funds

For control and audit purposes funds received for each project are accounted for individually with the relevant incoming resources and expenditure allocated accordingly. Expenditure for projects includes both direct costs attributable to the project and appropriate recharges for support costs.

I. Leasing commitments

Rentals payable under operating leases are charged against income on a straight line basis over the lease term.

Lease incentives are spread over the lease term.

m. Pension scheme arrangements

The Charity operates both defined benefit and defined contribution pension schemes for its employees. All defined benefit schemes are closed to new entrants.

The assets of any defined benefit and defined contribution pension schemes are held separately from those of the Charity.

Pension costs charged in the Statement of Financial Activities represent the contributions payable by the Group for the year together with any material provision to record the Group's liability in relation to a defined benefit pension scheme. Where the charity participates in a multi-employer defined benefit scheme it is not always possible to identify on a reasonable and consistent basis the Charity's share of underlying assets and liabilities as the assets are comingled for investment purposes and the benefits are paid out of the Plan's total assets. Accordingly, due to the nature of such schemes, the accounting charge for the period under FRS 102 represents the employer contribution payable. The liability to make payments to fund any deficit relating to past service in such plans is recognised where the Charity has entered into an agreement to make those payments. Pension costs for defined contribution schemes are charged to the Statement of Financial Activities for the period in which they are payable.

n. Judgements and key sources of estimation uncertainty

In the application of the Charity's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods. In particular, judgements are made in the following areas:

- Depreciation and amortisation rates are over the estimated useful economic life of the assets;
- Dilapidation provisions are an estimate of the cost to reinstate premises in line with lease obligations;

- Freehold properties are held at valuation and continue to be maintained to a high standard. Trustees are satisfied that there are no indications of impairment and the current valuations remains appropriate. Whilst the impact of the ongoing pandemic has created an increased level of uncertainty around the UK property market, Trustees are satisfied that the valuation of property remains materially correct.
- Pension assumptions for defined benefit pension schemes include, amongst others, estimates for longevity, discount rates and inflation.

o. Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks and other short-term liquid investments with maturities of three months or less.

For the year ended 31 March 2020

1. Incoming resources

	Group 2020 £'000	Group 2019 £'000
Donations and legacies		
Donations	45	61
	Group 2020 £'000	Group 2019 £'000
Investment income		
Interest on UK cash deposits	269	139

Incoming resources from charitable activities

Incoming resources from charitable activities includes contract income from statutory sources and other sundry receipts. Grant income recorded during the year is disclosed within Note 13, 'Restricted funds'.

	Group 2020 £'000	Group 2019 £'000
Other income		
Proceeds from sale of Alleyne House, Winchester	-	504

2. Net income

	Group 2020 £'000	Group 2019 £'000
Net incoming resources is stated after charging:		
Auditor's remuneration:		
-Audit services	62	66
-Non-audit services	8	24
Operating lease rentals:		
-Plant and machinery	739	599
-Land and buildings	5,566	5,433
Depreciation and amortisation	161	1,439

Audit services fees, inclusive of VAT, are paid to Crowe U.K. LLP. Non-audit services of £8K includes £7K for professional fees and £1K for VAT advice (2019: Non-audit services of £24K includes £21K for internal audit work and £3K for VAT advice).

For the year ended 31 March 2020

3. Expenditure on Charitable activities

	Direct costs £'000	Support costs £'000	Group 2020 Total £'000	Direct costs £'000	Support costs £'000	Group 2019 Total £'000
Charitable activities:						
Health and social care services	194,056	19,174	213,230	192,091	18,241	210,332
Total	194,056	19,174	213,230	192,091	18,241	210,332

Total Support costs include Governance costs of £126K (2019: £86K).

	HR and Training £'000	Business Support and IT £'000	Finance and Legal Services £'000	Central Administration and Communications £'000	Group 2020 Total £'000
Support costs allocated to Charitable activities:					
Health and social care services	2,152	8,292	2,748	5,983	19,175
Total	2,152	8,292	2,748	5,983	19,175

	HR and Training £'000	Business Support and IT £'000	Finance and Legal Services £'000	Central Administration and Communications £'000	Group 2019 Total £'000
Support costs allocated to Charitable activities:					
Health and social care services	2,045	8,676	2,080	5,440	18,241
Total	2,045	8,676	2,080	5,440	18,241

Support costs have been allocated to Charitable activities based on the direct costs of those activities.

For the year ended 31 March 2020

4. Staff costs, trustee remuneration and expenses, and the cost of key management personnel

	Group 2020 £'000	Group 2019 £'000
Wages and salary costs	105,081	100,849
Social security costs	10,629	10,146
Redundancy costs	785	1,438
Training costs	807	750
Recruitment and general payroll costs	964	914
Pension costs for defined contribution pension schemes	3,016	2,511
Pension costs for defined benefit pension schemes	612	3,646
Agency and third party organisations	18,364	17,439
Total	140,258	137,693

Redundancy costs above relate to the costs of restructuring services at or around the commencement of services, or in response to changes in the funding and financial position on contracts. Total redundancy costs paid in 2020 were £1,254K (2019:£1,304K). £11K remained unpaid at 31 March 2020 (2019: £135K)

Trustee remuneration and expenses are disclosed in Note 21.

The number of higher paid employees who received total remuneration in the following bands were as follows:

	Group 2020 Number	Group 2019 Number
£60,000 to £69,999	22	17
£70,000 to £79,999	11	11
£80,000 to £89,999	20	11
£90,000 to £99,999	13	12
£100,000 to £109,999	4	3
£110,000 to £119,999	4	3
£120,000 to £129,999	4	5
£130,000 to £139,999	3	3
£140,000 to £149,999	7	-
£150,000 to £159,999	1	1
£190,000 to £199,999	1	1
£210,000 to £219,999	1	-

The key management personnel of the Group comprises 9 (2019: 9) employees: the Chief Executive, six Executive Directors, the Chief Finance Officer and the Executive Medical Director. The total employee remuneration, benefits and contractual payments, inclusive of pension contributions and social security costs paid by the Charity, of the key management personnel were £1,665,668 (2019: £1,471,618).

74 (2019: 55) of the higher paid employees were accruing pension benefits under a defined contribution scheme and 17 (2019: 10) under defined benefit schemes.

Contributions of £3,013,643 (2019: £2,511,039) were paid into a defined contribution scheme. The other employees were members of the SHPS, NHS, LGPS or Civil Service defined benefit schemes (see note 17) into which contributions of £2,102,905 (2019: $\pm 2,125,132$) were paid during the year. Employers' pension contributions outstanding at the year end amounted to £416,925 (2019: $\pm 395,346$).

For the year ended 31 March 2020

4. Staff costs, trustee remuneration and expenses, and the cost of key management personnel (cont.)

	Group 2020 Number	Group 2019 Number
Employee numbers:		
Average number of employees	3,741	3,712
Average number of full time equivalents	3,427	3,331
Average number of full time equivalents split between:		
Direct project staff	3,137	3,040
Operational support staff	43	61
Central support staff	247	230
Total	3,427	3,331

5. Intangible Fixed Assets - Group and Charity

	IT Software costs £'000
Cost/valuation	
At 1st April 2019	1,870
Additions	-
Disposals	(1,870)
At 31st March 2020	-
Amortisation	
At 1st April 2019	(1,870)
Charge for the year	-
Disposals	1,870
At 31st March 2020	-
Net Book Value	
At 31st March 2020	-
At 31st March 2019	-

For the year ended 31 March 2020

6. Tangible Fixed Assets - Group

	Freehold property £'000	Leasehold property £'000	IT Hardware £'000	Furniture and equipment £'000	Total £'000
Cost/valuation					
At 1st April 2019	8,965	183	3,828	124	13,100
Additions	-	-	-	-	-
Disposals	-	-	(3,828)	(124)	(3,952)
At 31st March 2020	8,965	183	-	-	9,148
Depreciation					
At 1st April 2019	(252)	(183)	(3,822)	(124)	(4,381)
Charge for the year	(155)	-	(6)	-	(161)
Disposals	-	-	3,828	124	3,952
At 31st March 2020	(407)	(183)	-	-	(590)
Net Book Value					
At 31st March 2020	8,558	-	-	-	8,558
At 31st March 2019	8,713	-	6	-	8,719

For the year ended 31 March 2020

6. Tangible Fixed Assets - Charity

	Freehold property £'000	Leasehold property £'000	IT Hardware £'000	Furniture and equipment £'000	Total £'000
Cost/valuation					
At 1st April 2019	8,965	183	3,828	124	13,100
Additions	-	-	-	-	-
Disposals	-	-	(3,828)	(124)	(3,952)
At 31st March 2020	8,965	183	-	-	9,148
Depreciation					
At 1st April 2019	(252)	(183)	(3,822)	(124)	(4,381)
Charge for the year	(155)	-	(6)	-	(161)
Disposals	-	-	3,828	124	3,952
At 31st March 2020	(407)	(183)	-	-	(590)
Net Book Value					
At 31st March 2020	8,558	-	-	-	8,558
At 31st March 2019	8,713	-	6	-	8,719

The total cost and valuation of freehold property at 31 March 2020 was £9.0 million and consists of nine properties. The property in King's Cross Road, King's Cross, London was informally valued to current market value during 2017-2018 by a firm of professional surveyors. Depreciation is charged on freehold buildings on a straight line basis over a period of 50 years. However, all nine properties have been further reviewed for impairment by the trustees in accordance with FRS 102, the results of which indicated that no further impairment was necessary from the carrying value at the year end.

The original cost of the freehold properties was £4.9 million.

For the year ended 31 March 2020

7. Debtors

	Group		Cha	rity
	2020 £'000	2019 £'000		2019 £'000
Income receivable	21,485	29,153	8,855	13,866
Other debtors	683	343	325	343
Intercompany	-	-	20,221	17,822
Prepayments	2,992	2,403	2,982	2,391
Total	25,160	31,899	32,283	34,422

Included within 'Income receivable' is an amount of £0.1 million (2019: £0.2 million) relating to amounts invoiced in respect of the 2020-2021 financial year. An equivalent amount is included within 'Deferred income' in note 8.

8. Creditors: amounts falling due within one year

	Group		Charity	
	2020 £'000	2019 £'000	2020 £'000	2019 £'000
Trade creditors	5,842	4,036	4,577	4,036
Deferred income	4,059	10,787	2,990	5,022
Social security and other taxes	6,263	4,572	3,581	3,898
Accruals	20,916	23,082	20,893	23,053
Other creditors	4,498	3,842	3,981	3,842
Total	41,578	46,319	36,022	39,851

Movements in deferred income

	At 1 April 2019 £'000	Released £'000	Deferred £'000	At 31 March 2020 £'000
Group	10,787	(8,007)	1,279	4,059
Charity	5,022	(2,242)	210	2,990

Contract income and grants are accounted for on an accruals basis in the period in which the performance criteria are met. Income is deferred due to the timing of receipts for contract income and grants.

For the year ended 31 March 2020

9. Creditors: amounts falling due after more than one year

	Gro	oup	Cha	rity
	2020 £'000	2019 £'000	2020 £'000	2019 £'000
Bank and other loans	84	84	84	84

The loan from Brighton and Hove City Council is only repayable if the property is sold and is non-interest bearing. It is secured on the freehold property in St Andrew's Road, Portslade, East Sussex.

Change Grow Live has provided Barclays Bank with a Debenture, dated 4 September 2013, in support of its Bond, Guarantee and Indemnity (BGI) facilities and a charge over its freehold property at 140 - 142 King's Cross Road, London. In respect of the Debenture, a formula has been agreed whereby 'Good UK Debtors under 90 days' have to provide a minimum of two times cover against BGI exposure at any time. As at 31 March 2020, Change Grow Live had £1.9 million of BGI exposure (2019: £1.9 million) which was more than covered by 'Good UK Debtors under 90 days' which amounted to £30.6 million (2019: £24.7 million).

10. Provisions for liabilities and charges -Group and Charity

	Pension provisions £'000	Dilapidation provision £'000	Total £'000
At 1st April 2019	3,670	5,526	9,196
Amounts provided in the year	(834)	484	(350)
Utilised during the year	-	(184)	(184)
At 31st March 2020	2,836	5,826	8,662

11. Limited liability

The liability of each member of the charity is limited to £1.

For the year ended 31 March 2020

12. Unrestricted funds - Group

	Total funds brought forward at 1st April 2019 £'000	Net incoming resources £'000	Gross transfers between funds £'000	Other recognised (losses) £'000	Total funds carried forward at 31st March 2020 £'000
Unrestricted funds	19,488	3,561	3,968	-	27,017
Pension reserve	(3,670)	1,701	-	(867)	(2,836)
Free reserves	15,818	5,262	3,968	(867)	24,181
Revaluation reserve	3,415	(69)	-	-	3,346
Fixed assets net of related loans	8,635	(92)	(3,968)	-	4,575
Total unrestricted funds	27,868	5,101	-	(867)	32,102

Unrestricted funds - Charity

	Total funds brought forward at 1st April 2019 £'000	Net incoming resources £'000	Gross transfers between funds £'000	Other recognised (losses) £'000	Total funds carried forward at 31st March 2020 £'000
Unrestricted funds	19,082	3,576	3,968	-	26,626
Pension reserve	(3,670)	1,701	-	(867)	(2,836)
Free reserves	15,412	5,277	3,968	(867)	23,790
Revaluation reserve	3,415	(69)		-	3,346
Fixed assets net of related loans	8,635	(92)	(3,968)	-	4,575
Total unrestricted funds	27,462	5,116	-	(867)	31,711

For the year ended 31 March 2020

12. Unrestricted funds - Group (cont.)

	Total funds brought forward at 1st April 2018 £'000	Net incoming resources £'000	Gross transfers between funds £'000	Other recognised (losses) £'000	Total funds carried forward at 31st March 2019 £'000
Unrestricted funds	14,673	4,742	73	-	19,488
Pension reserve	(1,606)	(1,028)	-	(1,036)	(3,670)
Free reserves	13,067	3,714	73	(1,036)	15,818
Revaluation reserve	3,486	(71)	-	-	3,415
Fixed assets net of related loans	10,078	(1,367)	(76)	-	8,635
Total unrestricted funds	26,631	2,276	(3)	(1,036)	27,868

Unrestricted funds - Charity

	Total funds brought forward at 1st April 2018 £'000	Net incoming resources £'000	Gross transfers between funds £'000	Other recognised (losses) £'000	Total funds carried forward at 31st March 2019 £'000
Unrestricted funds	14,251	4,770	61	-	19,082
Pension reserve	(1,606)	(1,028)	-	(1,036)	(3,670)
Free reserves	12,645	3,742	61	(1,036)	15,412
Revaluation reserve	3,486	(71)	-		3,415
Fixed assets net of related loans	10,059	(1,360)	(64)	-	8,635
Total unrestricted funds	26,190	2,311	(3)	(1,036)	27,462

The Revaluation reserve relates to freehold properties (Note 6).

For the year ended 31 March 2020

13. Restricted funds

	Total funds brought forward at 1st April 2019 £'000	Incoming resources £'000	Resources expended £'000	Net incoming resources £'000	Gross transfers between funds £'000	Total funds carried forward at 31st March 2020 £'000
Health and social care services - Capital funds						
a. Brighton & Hove PCT	300	-	-	-	-	300
b. Brighton & Hove PCT	253	-	-	-	-	253
Capital Funds	553	-	-	-	-	553
Health and social care services - Revenue funds						
c. PHE Capital funding - Blackburn with Darwen	10	221	47	174	-	184
d. PHE Capital funding - East Lancashire	-	47	36	12	-	12
e. PHE Capital funding - Central & North Lancashire	-	210	-	210	-	210
f. PHE Capital Grant - Stockton	-	24	-	24	-	24
g. PHE Capital funding - West Sussex	-	182	182	-	-	-
h. PHE Capital funding - Birmingham	-	750	750	-	-	-
i. Big Lottery - Hertfordshire	-	70	66	4	-	4
j. Big Lottery - Staffordshire	-	139	132	7	-	7
k. Big Lottery - Merseyside	-	31	31	-	-	-
I. Big Lottery - Hertfordshire	-	4	4	-	-	-
m. Big Lottery - Newcastle	-	27	27	-	-	-
n. Sova funds	-	358	-	358	-	358
Revenue Funds	10	2,064	1,275	789	-	799
Restricted Funds - Group and Charity	563	2,064	1,275	789	-	1,352

For the year ended 31 March 2020

13. Restricted funds (cont.)

a. Brighton & Hove Primary Care Trust

Funding towards the purchase of a freehold property in Hove, East Sussex in 2010-11.

b. Brighton & Hove Primary Care Trust

Funding towards the purchase of a freehold property in Eastbourne, East Sussex in 2014-15.

c. PHE Capital funding - Blackburn with Darwen

Funding for a womens' centre property refurbishment and a drugs meter at the Blackburn with Darwen project.

d. PHE Capital funding - East Lancashire

Social Enterprise Scheme for refurbishment and re-sale of furniture.

e. PHE Capital funding - Central & North Lancashire

To help create a well-led skilled and valued adult social care workforce.

f. PHE Capital Grant - Stockton

Funding of a recovery gym in Middlesbrough.

g. PHE Capital funding - West Sussex

Funding for therapy service for children of alcohol dependant parents.

h. PHE Capital funding – Birmingham

Funding to transfer to new premises which includes refurbishing the new premises.

i. Big Lottery - Hertfordshire

Funding to improve systems and services to meet the needs of families where a parent is dependent on alcohol.

j. Big Lottery - Staffordshire

Incoming resources represents PHE grant funding to support for children growing up in households with an adult dependent on alcohol.

k. Big Lottery - Merseyside Circles

Building safer communities through local volunteers to work with sex offenders to minimise alienation and support reintegration to prevent sexual reoffending.

I. Big Lottery - Hertfordshire

Helping people gain employment and skills mentoring support.

m. Big Lottery – Newcastle

Raising awareness across Newcastle of the dangers of cocaine and crack cocaine use.

n. Sova funds

Funding towards working with military veterans to achieve and reaching continued health based in Rotherham.

For the year ended 31 March 2020

13. Restricted funds (cont.)

	Total funds brought forward at 1st April 2018 £'000	Incoming resources £'000	Resources expended £'000	Net incoming resources £'000	Gross transfers between funds £'000	Total funds carried forward at 31st March 2019 £'000
Health and social care services - Capital funds						
a. Brighton & Hove PCT	300	-	-	-	-	300
b. Brighton & Hove PCT	253	-	-	-	-	253
Capital Funds	553	-	-	-	-	553
Health and social care services - Revenue funds						
c. PHE Capital funding - Blackburn with Darwen	42	-	32	(32)	-	10
d. PHE Capital funding - Stockton	-	10	10	-	-	-
e. Skills for Care - Hull	-	2	2	-	-	-
f. Big Lottery Recovery Gym - Middlesbrough	-	1	1	-	-	-
 PHE Capital funding - West Sussex Children of Alcohol Dependent Parents 	-	25	25	-	-	-
h. PHE Innovation Fund - St Helens	-	23	23	-	-	-
i. Ministry of Defence - Rotherham	-	65	65	-	-	-
j. PHE Innovation Fund - Knowsley	-	32	32	-	-	-
k. PCC Grant - Warwickshire	-	132	135	(3)	3	-
I. Circles UK	-	9	9	-	-	-
m. Hertfordshire County Council/Big Lottery - Strive	-	10	10	-	-	-
n. Hertfordshire County Council/Big Lottery - Youth	-	1	1	-	-	-
o. Ixion/Big Lottery	-	9	9	-	-	-
Revenue Funds	42	319	354	(35)	3	10
Restricted funds - Charity	595	319	354	(35)	3	563
Sova Restricted funds	-	271	271	-	-	-
Restricted Funds - Group	595	590	625	(35)	3	563

For the year ended 31 March 2020

13. Restricted funds (cont.)

a. Brighton & Hove Primary Care Trust

Funding towards the purchase of a freehold property in Hove, East Sussex in 2010-11.

b. Brighton & Hove Primary Care Trust

Funding towards the purchase of a freehold property in Eastbourne, East Sussex in 2014-15.

c. PHE Capital funding - Blackburn with Darwen

Funding for a womens' centre property refurbishment and a drugs meter at the Blackburn with Darwen project.

d. PHE Capital funding - Stockton

Social Enterprise Scheme for refurbishment and re-sale of furniture.

e. Skills for Care - Hull

To help create a well-led skilled and valued adult social care workforce.

f. Big Lottery Recovery Gym - Middlesbrough

Funding of a recovery gym in Middlesbrough.

g. PHE Capital funding - West Sussex Children of Alcohol Dependent Parents

Funding to improve systems and services to meet the needs of families where a parent is dependent on alcohol.

h. PHE Innovation Fund - St Helens

Incoming resources represents PHE grant funding to support for children growing up in households with an adult dependent on alcohol.

i. Ministry of Defence - Rotherham

Funding towards working with military veterans to achieve and reaching continued health based in Rotherham.

j. PHE Innovation Fund - Knowsley

Incoming resources represents PHE grant funding to support children growing up in households with an adult dependent on alcohol.

k. PCC Grant - Warwickshire

Funding for the Criminal Justice Team working within Warwickshire as part of the Integrated Offender Recovery Programme

I. Circles UK

Funding towards the provision of mentoring support for ex offenders of a serious crime to reintegrate back into society.

m. Hertfordshire County Council/ Big Lottery - Strive

Funding towards tackling poverty and promoting social inclusion.

n. Hertfordshire County Council/ Big Lottery - Youth

Funding towards tackling poverty and promoting social inclusion.

o. Ixion/Big Lottery

Funding towards tackling poverty and promoting social inclusion.

For the year ended 31 March 2020

14. Analysis of Group net assets between funds

	Intangible		Creditors: amounts falling due	Provisions	
	and			for liabilities	
	tangible	Net current	than one	and	Total
	fixed assets £'000	assets £'000	year £'000	charges £'000	2020 £'000
Unrestricted funds	8,005	32,843	(84)	(8,662)	32,102
Restricted funds	553	799	-	-	1,352
Total	8,558	33,642	(84)	(8,662)	33,454

	Intangible and tangible fixed assets £'000	Net current assets £'000	Creditors: amounts falling due after more than one year £'000	Provisions for liabilities and charges £'000	Total 2019 £'000
Unrestricted funds	8,166	28,981	(84)	(9,196)	27,868
Restricted funds	553	10	-	-	563
Total	8,718	28,991	(84)	(9,196)	28,431

15. Commitments due under operating leases

	Land and	buildings	Ot	ner
	Group 2020 £'000	Group 2019 £'000	Group 2020 £'000	Group 2019 £'000
Gross obligations repayable on leases:				
expiring within one year	3,423	3,762	698	701
expiring between two and five years	5,945	3,633	755	1,285
expiring in more than five years	3,786	130	-	-
Total	13,154	7,525	1,453	1,986

16. Reconciliation of net income to net cash inflow from operating activities:

	Group 2020 £'000	Group 2019 £'000
Net income for the year	5,890	2,241
Actuarial and pension (losses)	(867)	(1,036)
Dividends, interest and rents from investments	(269)	(139)
Finance charges on defined benefit pension scheme deficit payment plan	443	-
Amortisation charges	-	548
Depreciation charges	161	891
Profit/(loss) on fixed asset disposal	-	(493)
Decrease/(increase) in debtors	6,739	(2,701)
(Decrease)/increase in creditors	(4,741)	6,214
(Decrease)/Increase in provisions	(534)	2,600
Net cash provided by operating activities	6,822	8,125

For the year ended 31 March 2020

17. Pension schemes

Introduction

Note 17 provides details of a number of defined benefit pension schemes which Change Grow Live participates in as an employer. With the exception of the Social Housing Pension Scheme, Change Grow Live has obtained formal membership of these NHS, Local Government Pension Schemes (LGPS) and the Civil Service Pension Scheme as a result of being commissioned to deliver services which required members of these schemes to transfer in to Change Grow Live. All the defined benefit pension schemes are closed to new members.

Social Housing Pension Scheme (SHPS)

Change Grow Live participated in the Social Housing Pension Scheme (SHPS), a multiemployer scheme which provides benefits to some 500 non-associated employers. The scheme is a defined benefit scheme in the UK. Within the scheme, Change Grow Live operated a final salary benefit structure with a 1/60th accrual rate for its members. The scheme is closed to new members and it was closed to future accrual as at 1 April 2017 and the three active members at that time were transferred into the SHPS defined contribution scheme. For Financial Years ending on or after 31 March 2019 the way in which an employer's Defined Benefit pension obligation in SHPS is stated in its company accounts has changed. Previously there has been insufficient information available for an employer in SHPS to account for its obligations on a Defined Benefit basis (i.e. stating assets and obligations). As a result, and as required by FRS 102, employers have been accounting for the obligation by stating the present value of agreed future deficit repayment contributions. For Financial Years ending on or after 31 March 2019, sufficient information is available for an employer in SHPS to account for its obligations on a Defined Benefit basis.

Accordingly the change from the present value of agreed future deficit repayment contributions to the FRS102 accounting disclosures are detailed on the following page in respect of the SHPS scheme:

For the year ended 31 March 2020

17. Pension schemes (cont.)

Provisions in relation to the present value of agreed future deficit repayment contributions	2020 £'000	2019 £'000
Balance Sheet at 31st March 2020		
Market value of assets	4,519	4,474
Liabilities	(5,089)	(5,983)
Deficit	(570)	(1,509)
Changes in the present value of the defined benefit obligation are as follows:	£'000	£'000
Opening defined benefit obligation	(5,983)	(5,604)
Interest cost	(137)	(142)
Actuarial gain/(loss)	922	(314)
Benefits paid	113	81
Participant contributions	-	-
Current service cost	(4)	(4)
Defined benefit obligation at the year end	(5,089)	(5,983)
Changes in the fair value of the scheme assets are as follows:	£'000	£'000
Fair value of scheme assets on commencement of FRS102 reporting	4,474	4,334
Interest income on plan assets	104	111
Return on scheme assets greater/(less) than discount rate	-	4
Actuarial (loss)	(103)	-
Employer and participant contributions	157	106
Benefits paid	(113)	(81)
Fair value of scheme assets at the year end	4,519	4,474
The amounts included within the Statement of Financial Activities are as follows:	£'000	£'000
Net interest on net defined benefit liability	33	31
Current service cost	4	4
Total amount charged within net income/(expenditure)	37	35
Release of present value of agreed future deficit repayment contributions provision on change to FRS102 accounting	-	(706)
Net defined benefit liability on commencement of FRS102 reporting	1,509	1,270
Actuarial (gain)/loss	(819)	314
Return on scheme assets (less) than discount rate	-	(4)
Remeasurement effects recognised in overall funds movement	690	874
Total amount charged to the Statement of Financial Activities	727	909

For the year ended 31 March 2020

17. Pension schemes (cont.)

	Assets at 31st March 2020		Assets at 31 2019	
Additional disclosure items:	£'000	%	£'000	%
Equities	1,717	38.0%	1,870	41.8%
Other Bonds	258	5.7%	209	4.7%
Property	514	11.4%	402	9.0%
Cash/Liquid	19	0.4%	9	0.2%
Other	2,011	44.5%	1,984	44.3%
Total	4,519	100.0%	4,474	100.0%

Actuarial assumptions: Financial	Beginning of year	End of year
Rate of RPI inflation	3.3%	2.6%
Rate of CPI inflation	2.3%	1.6%
Rate of increase in salaries	3.3%	2.6%
Rate of increase in pensions	2.4%	2.4%
Discount rate	2.6%	2.4%

The leaving employer's share of the buy-out debt is the proportion of the Scheme's liability attributable to employment with the leaving employer compared to the total amount of the Scheme's liabilities (relating to employment with all the currently participating employers). The leaving employer's debt therefore includes a share of any 'orphan' liabilities in respect of previously participating employers. The amount of the debt therefore depends on many factors including total Scheme liabilities, Scheme investment performance, the liabilities in respect of current and former employees of the employer, financial conditions at the time of the cessation event and the insurance buy-out market. The amounts of debt can therefore be volatile over time. Change Grow Live has been notified by The Pensions Trust of the estimated employer debt on withdrawal from the Scheme, based on the financial position of the Scheme as at 30th September 2017. At this date the estimated employer debt for Change Grow Live was £5.4 million. Change Grow Live has taken steps to mitigate this employer debt and has a SHPS defined contribution scheme alongside the defined benefit scheme. Ongoing membership of this defined contribution scheme will mean that Change Grow Live would not be in a cessation position and the employer debt would not therefore fall due.

For the year ended 31 March 2020

17. Pension schemes (cont.)

NHS Pension Scheme for England and Wales

Change Grow Live has separate Directions Body status in 60 areas with NHS Pensions during the year to 31st March 2020 (2019:42).

Past and present employees are covered by the provisions of the two NHS Pension Schemes. Details of the benefits payable and rules of the Schemes can be found on the NHS Pensions website at www.nhsbsa.nhs.uk/pensions. Both are unfunded defined benefit schemes that cover NHS employers, GP practices and other bodies, allowed under the direction of the Secretary of State for Health in England and Wales. They are not designed to be run in a way that would enable NHS bodies to identify their share of the underlying scheme assets and liabilities. Therefore, each scheme is accounted for as if it were a defined contribution scheme: the cost to the NHS body of participating in each scheme is taken as equal to the contributions payable to that scheme for the accounting period. The total employer contributions payable in 2019-2020 were £1,925,892 (2018-2019: £1,947,202). At 31st March 2020 there were 419 (2019: 466) active members in the scheme employed by Change Grow Live.

A valuation of the Scheme liability is carried out annually by the Scheme actuary as at the balance sheet date. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and is accepted as providing suitably robust figures for financial reporting purposes. The valuation of the scheme liability as at 31st March 2018 is based on the valuation data as at 31st March 2017, updated to 31st March 2018 with summary global member and accounting data. The latest assessment of the liabilities of the Scheme is contained in the Scheme Actuary report, which forms part of the annual NHS Pension Scheme Accounts, published annually and can be viewed on the NHS Pensions website.

In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the FReM requires that the period between formal valuations shall be four years, with approximate assessments in intervening years. An outline of these follows:

a. Accounting valuation

A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and is accepted as providing suitably robust figures for financial reporting purposes. The valuation of the scheme liability as at 31 March 2019, is based on valuation data as 31 March 2018, updated to 31 March 2019 with summary global member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations, and the discount rate prescribed by HM Treasury have also been used.

The latest assessment of the liabilities of the scheme is contained in the report of the scheme actuary, which forms part of the annual NHS Pension Scheme Accounts. These accounts can be viewed on the NHS Pensions website and are published annually. Copies can also be obtained from The Stationery Office.

b. Full actuarial (funding) valuation

The purpose of this valuation is to assess the level of liability in respect of the benefits due under the schemes (taking into account recent demographic experience), and to recommend contribution rates payable by employees and employers.

The latest actuarial valuation undertaken for the NHS Pension Scheme was completed as at 31 March 2016. The results of this valuation set the employer contribution rate payable from April 2020. The Department of Health and Social Care have recently laid Scheme Regulations confirming that the employer contribution rate will increase to 20.6% of pensionable pay from this date. Change Grow Live has confirmation that the employer contribution will remain at 14.38% and that central payment will be made by NHS England and the Department of Health and Social Care for the respective proportions of the outstanding 6.22%.

For the year ended 31 March 2020

17. Pension schemes (cont.)

The Civil Service Pension Scheme

Change Grow Live is admitted into the Civil Service Pension Scheme following the transfer in of two members of staff on 1 June 2017. At 31 March 2020 Change Grow Live had 0 members in the scheme. The total employer contributions payable in 2019-2020 were £4,192 (2018-2019: £3,378).

Past and present employees are covered by the provisions of the Civil Service Pension Scheme arrangements. Details of the benefits payable and rules of the Scheme can be found at www.civilservicepensionscheme.org.uk.

The Scheme is an unfunded, defined benefit, contributory, public service occupational pension scheme. The cash required to meet the payment of pension benefits is paid from public funds provided by Parliament. Members contribute on a 'pay-as-you-go' basis, with these contributions (along with those made by employers) being credited to the Exchequer under arrangements governed by the Superannuation Act 1972 and Public Service Pensions Act 2013.

Unlike many other schemes, the employer/ employee split is not fixed. However, a cost-capping mechanism is in place to prevent the employer cost becoming disproportionate to the employee cost. In order that the defined benefit obligations recognised in the financial statements do not differ materially from those that would be determined at the reporting date by a formal actuarial valuation, the FReM requires that the period between formal valuations shall be four years, with approximate assessments in intervening years. An outline of these follows:

a. Accounting valuation

A valuation of scheme liability is carried out annually by the scheme actuary (currently the Government Actuary's Department) as at the end of the reporting period. This utilises an actuarial assessment for the previous accounting period in conjunction with updated membership and financial data for the current reporting period, and is accepted as providing suitably robust figures for financial reporting purposes. The valuation of the scheme liability as at 31 March 2019, is based on valuation data as 31 March 2018, updated to 31 March 2019 with summary alobal member and accounting data. In undertaking this actuarial assessment, the methodology prescribed in IAS 19, relevant FReM interpretations, and the discount rate prescribed by HM Treasury have also been used.

The latest assessment of the liabilities of the scheme is contained in the report of the scheme actuary, which forms part of the annual Civil Superannuation accounts. These accounts can be viewed on the Civil Service Pensions website and are published annually. Copies can also be obtained from The Stationery Office.

b. Full actuarial (funding) valuation

The purpose of this valuation is to assess the level of liability in respect of the benefits due under the schemes (taking into account recent demographic experience), and to recommend contribution rates payable by employees and employers.

The last published actuarial valuation undertaken for the Civil Service Pension Scheme was completed for the year ending 31 March 2016, and implemented increased employer contributions from April 2020.

The Scheme Regulations allow for the level of contribution rates to be changed by the Secretary of State for the Cabinet Office, with the consent of HM Treasury, and consideration of the advice of the Scheme Actuary and employee and employer representatives as deemed appropriate.

For the year ended 31 March 2020

17. Pension schemes (cont.)

Local Government Pension Schemes

In the process of taking over certain contracts, Change Grow Live gains admission body status into Local Government Pension Schemes which are multi-employer defined benefit schemes. During the year Change Grow Live had admission body status with the London Borough of Newham Pension Fund, the Nottinghamshire County Council Pension Fund, the West Midlands Pension Fund, the Northamptonshire Pension Fund, the London Borough of Lewisham Pension Scheme, the West Sussex Pension Fund, the Norfolk Pension Fund and the Merseyside Pension Fund. All of these schemes are closed to new entrants from Change Grow Live.

The admitted body status agreement for Change Grow Live's membership of the Northamptonshire Pension Fund includes a 'risk share' arrangement. This means that Change Grow Live will not be liable for any cessation liability on termination of the admission body agreement and is therefore only liable for regular employer contributions into the schemes. On that basis, these schemes have been treated as if they were defined contribution schemes and the accounting charge is taken as being equal to the contributions payable in the accounting period. There were one members in these schemes as at 31st March 2020 (2019 - two members). The total contributions paid by Change Grow Live into this scheme during the year was £8,803 (2019: £8,073).

Accordingly, the FRS 102 disclosures below relate to the London Borough of Newham Pension Fund, the Nottinghamshire County Council Pension Fund, the West Midlands Pension Fund, the London Borough of Lewisham, the West Sussex Pension Fund, the Norfolk Pension Fund and the Merseyeside Pension Fund and all six schemes are disclosed together as required by FRS 102.

Balance Sheet at 31st March 2020	2020 £'000	2019 £'000
Market value of assets	4,892	4,816
Liabilities	(6,416)	(6,047)
Deficit	(1,524)	(1,231)
Split between the schemes:	£'000	£'000
The London Borough of Newham Pension Fund	(109)	(160)
The Nottinghamshire County Council Pension Scheme	(385)	(559)
The West Midlands Pension Fund - Birmingham contract	(312)	(5)
The London Borough of Lewisham Pension Fund	(51)	(93)
The West Sussex Pension Fund	(180)	(32)
Merseyside Pension Fund	(91)	(83)
Norfolk	(75)	-
The West Midlands Pension Fund - Walsall contract	(321)	(299)
	(1,524)	(1,231)
Changes in the present value of the defined benefit obligation are as follows:	£'000	£'000
Opening defined benefit obligation	(6,047)	(4,325)
Defined benefit obligation on admission to scheme	(472)	(1,186)
Interest cost	(149)	(144)
Actuarial gain/(loss)	499	(65)
Benefits paid	107	7
Participant contributions	(49)	(50)
Past service cost	-	
Current service cost	(305)	(284)
Defined benefit obligation at the year end	(6,416)	(6,047)

£'000

£'000

For the year ended 31 March 2020

17. Pension schemes (cont.)

Changes in the fair value of the scheme assets are as follows:

Opening fair value of scheme assets	4,816	3,425
Fair value of scheme assets on admission to the scheme	368	846
Interest income on plan assets	127	114
Return on scheme assets greater/(less) than discount rate	(320)	234
Actuarial gain/(loss)	(252)	9
Employer and participant contributions	260	195
Benefits paid	(107)	(7)
Fair value of scheme assets at the year end	4,892	4,816
The amounts included within the Statement of Financial Activities are as follows:	£'000	£'000
Net interest on net defined benefit liability	22	30
Current service cost	305	284
Total amount charged within net income/(expenditure)	327	314
Net defined benefit liability b/fwd on admission to the schemes	104	340
Actuarial (gain)/loss	(247)	56
Return on scheme assets greater/(less) than discount rate	320	(234)
Remeasurement effects recognised in overall funds movement	177	162
Total amount charged to the Statement of Financial Activities	504	476

	Assets at 31st March 2020		Assets at 31 201	
Additional disclosure items:	£'000	%	£'000	%
Equities	2,759	56.4%	2,790	57.5%
Government Bonds	554	11.3%	283	5.8%
Other Bonds	353	7.2%	378	7.8%
Property	480	9.8%	481	9.9%
Cash/Liquid	155	3.2%	243	5.0%
Other	591	12.1%	678	14.0%
Total	4,892	100.0%	4,853	100.0%

Actuarial assumptions: Financial	Beginning of year	End of year
Rate of RPI inflation	3.3%	3.4%
Rate of CPI inflation	2.3%	2.4%
Rate of increase in salaries	3.0%/3.1%/3.8%	3.9%
Rate of increase in pensions	2.3%/2.4%	2.4%
Discount rate	2.6%/2.7%	2.4%

For the year ended 31 March 2020

18. Subsidiary companies

Sova (Company number 3645143 (England and Wales), Charity number 1073877)

Sova has been a wholly owned subsidiary of Change Grow Live since 26th November 2012. Change Grow Live is the sole corporate member of Sova, and its Trustee Board is the same as the Board of Change Grow Live. On 1 April 2019 Change Grow Live acquired for nil consideration the trade and assets of Sova which ceased to trade from that date. The assets and liabilities transferred on the date of acquisition were:

	£'000
Fixed assets	8
Current assets	389
Current liabilities	(523)
	(126)

The income and expenditure of Sova for the period to 31 March 2020 and its balance sheet as at 31 March 2020, are summarised below:

	2020 £'000
Income	-
Expenditure	358
Net incoming resources	358

	31 March 2020 £'000
Gross assets	-
Total liabilities	-
Net assets	-

The net assets were transferred to Change Grow Live 1st April 2019. No trading for Sova for the year to 31st March 2020.

Change Grow Live Services Ltd (Company number 6228752 (England and Wales))

Change Grow Live Services Ltd undertakes contracts delivering a broad range of health and social care services and commenced trading on 1 October 2017. The company outsources this work to Change Grow Live, its parent company, at a value equal to income receivable under the terms of the service contract less a fee in line with the service agreement between the two organisations.

	2020 £'000	2019 £'000
Income	124,119	66,977
Expenditure	(124,119)	(66,977)
Net incoming resources	-	-
	2020 £'000	2019 £'000
Gross assets	25,754	23,963
Total liabilities	(25,754)	(23,963)
Net assets	-	_

The results of Change Grow Live Services Ltd for the years to 31st March 2020 and 2019 are consolidated in these financial statements.

For the year ended 31 March 2020

Social Enterprises - The Secret Space Ltd

The Secret Space Ltd is limited by guarantee and is entitled to exemption from audit under section 479A of the Companies Act 2006 for the year ended 31st March 2019. No member of this company has required the company to obtain an audit of the financial statements for the year ended 31st March 2020 under Section 476 of the Companies Act 2006.

The results of The Secret Space Ltd for the year to 31st March 2020 and 2019 are consolidated in these financial statements.

The income and expenditure of each company and their balance sheets at 31 March are summarised below:

Dormant subsidiary companies

Change Grow Live also has the following wholly owned subsidiary companies, none of which have traded during the year, nor since incorporation:

CRI Enterprises Group Limited - company number 8719857, limited by guarantee, Nil net assets/liabilities.

Crime Reduction Initiatives Limited - company number 9832039, limited by guarantee, Nil net assets/liabilities.

These dormant subsidiary companies are registered in England and Wales and are consolidated within these accounts. There were no transactions with Change Grow Live during the year.

	2020 £'000	2019 £'000
Income	207	228
Expenditure	(222)	(225)
Net incoming resources	(15)	3

	2020 £'000	
Gross assets	57	80
Total liabilities	(24)	(32)
Net assets	33	48

The companies claiming exemption from audit under section 479A of the Companies Act 2006 are:

	Company number (England and Wales)	Charity number
The Secret Space Ltd	9161978	1167219

For the year ended 31 March 2020

19. Investments

On 3rd November 2014 Change Grow Live acquired a 5% interest in The Reducing Reoffending Partnership Limited at a cost of £5.

20. Capital commitments - Group and Charity

There are no capital commitments at the year end.

21. Trustee and related party transactions

There are no other related party transactions outside of those with group companies already disclosed above.

During the year, no Trustee received any remuneration (2018-19: £nil). Six trustees (2018-19: Six trustees) received general travel expenses totalling £5,097 (2018-19: £5,635).

During the year, Change Grow Live continued its insurance policy to indemnify the charity trustees or other officers against all risks except for dishonesty, fraud or deliberate breach of trust. The insurance cost £3,080 (2018-19: £3,080).

During the year £124.1 million (2018-19: £66.8 million) was receivable from Change Grow Live Services Ltd. At the year end £20.2 million (2018-19: £17.6 million) was due from Change Grow Live Services Ltd.

During the year Sova Ltd transferred the remaining funds to Change Grow Live of £0.4 million.

22. Post Balance Sheet Events

Since the year end Change Grow Live has been affected by the coronavirus pandemic. Our working practices and operations have been amended so that the risk of coronavirus to both employees and clients are reduced. Despite our amended working practices we have continued to support our clients and provided additional support and help where needed. Our commissioners and customers have continued to support us throughout this period and we have seen little detrimental financial effect.

Revised forecasts have been prepared which cover the period to March 2022. These include consideration of the key risks arising from the current crisis alongside the charity's planned response and Trustees review of signification assumptions. The Trustees consideration of this impact is discussed further in the Trustees' Annual Report and accounting policy on going concern.

On the 29th July 2020 Change Grow Live acquired Bounceback Foundation. Bounceback is a charity and social enterprise that focuses on training and employment of people in and out of prison.

For the year ended 31 March 2020

23. Ten year summary

The table below discloses Change Grow Live and the Group's financial performance over the last ten years, and includes details of annual growth rates and return on 'Incoming resources'.

	Group 2019/20 £'000	Group 2018/19 £'000	Group 2017/18 £'000	Group 2016/17 £'000	Group 2015/16 £'000	Group (Restated) 2014/15 £'000	Group 2013/14 £'000	Group 2012/13 £'000	Charity 2011/12 £'000	Charity 2010/11 £'000
Incoming resources	219,120	212,574	195,546	155,970	158,326	141,520	116,815	99,817	80,815	69,010
Growth %	3%	9%	25%	-1%	12%	21%	17%	24%	17%	20%
Resources expended	(213,230)	(210,332)	(192,976)	(152,433)	(156,310)	(139,242)	(114,723)	(97,595)	(79,030)	(67,399)
Net incoming resources	5,890	2,241	2,570	3,537	2,016	2,278	2,092	2,222	1,785	1,611
%	2.7%	1.1%	1.3%	2.3%	1.3%	1.6%	1.8%	2.2%	2.2%	2.3%
Expenditure on raising funds	-	-	-	-	-	(407)	(331)	-	-	-
Other recognised (losses)/gains	(867)	(1,036)	127	(244)	2,324	277	281	(50)	(887)	73
Net movements in funds	5,023	1,205	2,697	3,293	4,340	2,148	2,042	2,172	898	1,684
%	2.4%	0.6%	1.4%	2.1%	2.7%	1.5%	1.7%	2.2%	1.1%	2.4%
Total funds carried forward	33,454	28,431	27,226	24,529	21,236	16,896	16,881	14,839	12,667	11,769

Notes

% above is in relation to 'Incoming resources'.

Expenditure on raising funds relates to the costs incurred in bidding for the Ministry of Justice 'Transforming Rehabilitation' competition.

Total funds carried forward were restated in 2014/15 due to the effects of the implementation of FRS 102.



About Change Grow Live

We help people to change the direction of their lives, grow as individuals, and live life to its full potential.

The people who use our services have been affected by a range of social issues and challenges. These include substance misuse and addiction, homelessness, poverty, unemployment, domestic abuse, and mental health issues.

Find out more

www.changegrowlive.org

- E: queries@cgl.org.uk
- (f) @changegrowlive
- 🕑 @changegrowlive



Change Grow Live Registered Office: 3rd Floor, Tower Point, 44 North Road, Brighton BNI 1YR. Registered Charity Number 1079327 (England and Wales) and SC039861 (Scotland). Company Registration Number 3861209 (England and Wales).