



GOVERNMENT
OUTCOMES
LAB



Department
for Culture
Media & Sport

ACHIEVING OUTCOMES:

LIFE CHANCES FUND FINAL REPORT

Data, outcomes achievement
and insights from the Life
Chances Fund projects

FINAL REPORT
February 2026



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Contribution statement

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ABOUT THE GOVERNMENT OUTCOMES LAB

The Government Outcomes Lab (GO Lab) is a global centre of expertise based at the Blavatnik School of Government, University of Oxford. Our mission is to enable governments across the world to foster effective partnerships with the non-profit and private sectors for better outcomes.

We are an international team of multi-disciplinary researchers, data specialists and policy experts. We generate actionable knowledge, offering a comprehensive and evidence-based approach to the study of cross-sector partnerships through the three main strands of our work: research, data and engagement.

You can find out more about our work at golab.bsg.ox.ac.uk.

About the Department for Culture, Media and Sport

The Department for Culture, Media and Sport (DCMS) supports culture, arts, media, sport, tourism and civil society across every part of England – recognising the UK's world-leading position in these areas and the importance of these sectors in contributing so much to our economy, way of life and our reputation around the world. The department champions sport for all at every level, supports our world-leading cultural and creative industries, and enhances the cohesiveness of our communities.

DCMS delivered the [Life Chances Fund \(LCF\)](#) between 2016-2025. The LCF aimed to help those people in society who face the most significant barriers to leading happy and productive lives. The £70m fund contributed to outcome payments for locally commissioned social outcomes contracts which involve socially-minded investors. Projects have helped support tens of thousands of beneficiaries in areas like youth unemployment, mental health and homelessness.

About the National Lottery Community Fund

The National Lottery Community Fund is the largest community funder in the UK. Thanks to National Lottery players, the Fund is able to support communities to come together, be environmentally sustainable, help children and young people thrive and enable people to live healthier lives. Tackling inequality and taking an equity-based approach is at the core of what the Fund does, focusing on where there is greatest need.

For over a decade the Fund has played a major role in the development and delivery of social impact bonds/social outcomes partnerships (SIB/SOP) and has been involved in more than 50 of the UK's SOPs. From the HMP Peterborough SIB in 2010 to the launch of our own Commissioning Better Outcomes programme in 2013 and most recently administering the Life Chances Fund on behalf of the Department for Culture, Media and Sport.

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GLOSSARY

Cap

Social outcomes contracts often use caps to establish a maximum monetary limit on outcome payments. Caps can be designed in several forms. For instance, some social outcomes contracts include caps at the outcome level (ie: in Hounslow, Enhanced Dementia Care Service capped the payment of ‘completion of integrated care plans’ at 300 outcomes. Although they achieved more integrated care plans, they only got paid for 300.) Other contracts include caps at the participant level. In Midlands Regional Pause Hub, the outcome ‘engagement with the Pause programme’ can be achieved up to 10 times by one individual.

Cohort

The targeted population of beneficiaries or service users.

COVID medium-scenario grants

Temporary funding options offered to projects during the COVID-19 pandemic of 2020 including activity payments based on projected medium case performance scenarios. These grants were referred to as ‘COVID grants’.

Commissioning

The cyclical process by which entities assess the needs of people in an area, determine priorities, design and contract appropriate services, and monitor and evaluate their performance. This term is used widely in the UK public sector context, but less so elsewhere. It is sometimes used interchangeably with ‘contracting.’

DCMS Data Portal

A dedicated data portal (created and owned by DCMS) set up for social outcomes partnerships within the Life Chances Fund to capture detailed baseline and performance data for individual Social outcomes partnership projects. The portal supported outcome and payment reporting and grant management by The National Lottery Community Fund, as well as the GO Lab evaluation activity.

Delivery cost

In the end of grant form, projects were required to report the total cost of their projects and the distribution of this cost across investment, delivery, management and evaluation and learning. In delivery cost, projects included the cost of all items related with the implementation of the intervention, such as cost of front-line personnel, special material and licenses to deliver the programme, training costs, etc.

End of grant form

When finishing the award, Life Chances Fund projects were required to complete an end of grant form. In this form, projects compared the initial figures on investment, costs, and outcomes that they shared in the ‘Grant Baseline Block’ with the final figures on outcome achievements and actual costs. This form was stored in the DCMS Data Portal.

Evaluation and learning cost

In the end of grant form, projects were required to report the total cost of their projects and the distribution of this cost across

investment, delivery, management and evaluation and learning.

In evaluation and learning cost, projects included the cost of contracting the services of an external evaluator and any other learning cost associated with internal learning activities.

Grant achievement form

Every quarter, Life Chances Fund projects were required to complete a grant achievement form. In this form, projects reported which outcomes were achieved and which payments were triggered, according to the caps and rules established by the contract. These forms were stored in the DCMS Data Portal. These forms are the basis of the performance analysis of this evaluation report.

Grant baseline form

When starting the award, Life Chances Fund projects were required to complete a grant baseline form. In this form, projects reported a set of initial figures on investment commitment, outcome achievement expectations, outcome funding contribution from each outcome payer, initial expectation around costs and savings for commissioners, among other figures. This form was stored in the DCMS Data Portal.

Intermediary

Social outcomes partnerships are often supported by experts that provide specific advice. These are typically all referred to as “intermediaries” but can encompass at least four quite different roles: consultancy to

develop business cases, social investment fund managers, performance management experts, and special purpose vehicles.

Investment cost

Investment costs refer to the cost of items such as setting up and maintaining a special purpose vehicle, expenses related with setting up the investment, the return to social investors, etc.

Investment fund manager

An organisation responsible for providing the project finance and managing the investment strategy on behalf of the (social) investors.

Investment return

A ratio that measures the profitability of an investment. This is typically the ratio of the income from the investment over the cost of the investment. See page 71 for further details on investment return.

Investor

See Social investor

Life Chances Fund (LCF)

The Life Chances Fund was launched as an £70m outcomes fund in 2016 by UK central government (DCMS), to tackle complex social problems.

Management cost

In the end of grant form, projects were required to report the total cost of their projects and the distribution of this cost across investment, delivery, management and evaluation and learning. In management cost, projects included the cost of items such as cost of coordination and oversight

personnel, cost of performance management systems, financial management systems, cost of resources spent on governance discussions and partnership building, etc.

Outcome (outcome metrics/ outcome payment triggers)

The outcome is what changes for an individual as the result of a service or intervention. For example, improved learning in school, better mental health, sustained employment.

Outcomes-based contract (OBC)

'Outcomes' can feature in a contractual arrangement in a range of ways. Typically, an outcomes-based contract is understood as a contract where payments are made wholly or partly contingent on the achievement of pre-defined and measured outcomes. Also known as an outcomes contract.

Outcomes fund

Outcomes funds pool capital from one or more funders to pay for a set of pre-defined outcomes. Outcome funds allow the commissioning of multiple social outcomes partnerships under one structure. Payments from the outcomes fund only occur if specific criteria agreed ex-ante by the funders are met.

Outcome metric

An outcome metric is the specific way the commissioner chooses to determine whether that outcome can be achieved. Often this encompasses a single dimension of an outcome. For example, the outcome measure for educational

attainment can be a test score; the outcome measure for employment may be a job contract.

Outcome payer

The organisation that pays for the outcomes in an outcomes contract or social outcomes partnership. Outcome payers are often referred to as commissioners or outcome funders.

Outcome payment

Payment by outcome payers for achieving pre-agreed outcomes. Payments may be made to a special purpose vehicle or management entity in a social outcomes partnership or to service providers in other forms of outcomes-based contracts.

Payment trigger

In the Life Chances Fund, projects were required to establish a list of outcomes that they would pursue. Each outcome should be attached to one or more payment triggers. These payment triggers indicate the concrete action or activity that must occur and be evidenced for a project to consider that an outcome has been achieved and should be paid. Payment triggers often include a clear timeframe for the outcome to take place. For the project Future Impact, the outcome 'young person progresses in employment and/or volunteering' is associated to the payment triggers 'individual enters into volunteering', 'individual sustains volunteering for 13 weeks', 'individual sustains volunteering for 26 weeks', among other payment triggers. Practitioners also refer to these payment triggers as outcome metrics.

Rate card

A schedule of payments for specific, pre-agreed outcome measures that a commissioner (outcome payer) is willing to make for each user, cohort or specified improvement that verifiably achieves each outcome.

Service provider

Service providers are responsible for delivering the intervention to participants. A provider can be a private sector organisation, social enterprise, charity, non-governmental organisation, or any other legal form.

Service users

See Cohort.

Social impact bond (SIB)

See Social outcomes partnership

Social outcomes partnership (SOP)

While there is no single, universally agreed definition of social outcomes partnerships (often referred to as social impact bonds, SIBs, or social outcomes contracts, SOC), they are best understood as cross-sector partnerships that bring organisations together in the pursuit of measurable social outcomes.

Typically, Social outcomes partnerships are defined as contractual arrangements that have two key characteristics: (1) payment for social or environmental outcomes achieved (an outcomes contract), (2) up-front repayable finance provided by a third party, the repayment of which is (at least partially) conditional on achieving specified outcomes.

Special purpose vehicle (SPV)

A legal entity (usually a limited company) that is created solely for a financial transaction or to fulfil a specific contractual objective. Special purpose vehicles have sometimes been used in the structuring of social outcomes partnerships.

Target

When awarded funding by the Life Chances Fund, projects had to complete a 'grant baseline form'. In this form, they were asked to report baseline targets for every outcome that they were expected to achieve. These targets indicate the amount of outcomes that a project could potentially achieve in a best-case scenario.

Top-up fund(ing)

An outcomes fund may provide a partial contribution to the payment of outcomes where the remainder of outcomes payments are made by another government department, local government, or public sector commissioner. In the Life Chances Fund the partial contribution from DCMS 'tops up' the locally funded payment for outcomes.

Voluntary, community and social enterprise (VSCE) sector

A 'catch all' term that includes any organisation working with social objectives ranging from small community organisations to large, registered charities operating locally, regionally and nationally.

EXECUTIVE SUMMARY

What is the Life Chances Fund?

The Life Chances Fund was a £70 million programme funded by the Department for Culture, Media and Sport (DCMS), and administered by The National Lottery Community Fund (TNLCF). It was the largest outcomes fund launched to date in the UK. It ran between 2016-2025. The Life Chances Fund was designed to tackle complex social problems across policy areas, including child and family welfare, homelessness, health and wellbeing, employment and training, and more. The Life Chances Fund was delivered through 29 locally-commissioned social outcomes partnerships (also known as social impact bonds). These partnerships used outcomes-based contracts where payments were tied to the achievement of measurable social outcomes.

This report is part of a wider set of evaluations the Government Outcomes Lab undertook for DCMS as their knowledge and learning partner for the Life Chances Fund. More on the [Life Chances Fund](#) and social outcomes partnerships can be found on the [Government Outcomes Lab website](#). This report covers one aspect of the overall [LCF Evaluation Strategy](#).

About this report

This is the final report in the Life Chances Fund evaluation series.

It presents findings on project performance in terms of outcome achievements and payments.

The report focuses on the final outcomes achieved by the 29 Life Chances Fund projects. It aims to answer these questions:

1. To what extent have these 29 social outcomes partnerships achieved their intended outcomes?
2. To what extent have these 29 social outcomes partnerships achieved the intended level of outcome payments?

The Life Chances Fund projects

29 different projects delivered services and received outcome payments:

- **18 projects** completed service delivery and received their final Life Chances Fund outcome payments by September 2024. This report presents their final performance data.
- **11 projects** had also received their last Life Chances Fund payment by September 2024 but received further funding to continue delivering their services with exclusive funding from local commissioners. For these, only interim performance data is included.

When considering averages or comparisons across projects, it is worth noting that the Life Chances Fund projects delivered very different interventions for people with complex needs. This makes them very difficult to compare against each other. In addition, each project has a unique list of outcomes metrics that they are pursuing. Even when projects have been labelled with the same policy theme, they might be pursuing substantially different outcome metrics. Due to these differences, this report calculates the achievement of the primary outcome for each project and compares that achievement against the best-case scenario target set by the project at the beginning of the contract. **For more detail on specific projects, a project fact sheet is available at the start of each project's chapter.**

Key findings

Outcome achievements

- The 18 completed projects achieved an average of 87% of their primary outcome targets. The primary outcome is not necessarily the hardest to achieve nor the outcome worth the highest cost. It is self-selected by each project as the most relevant outcome for their cohort.
- Performance varied widely: some projects exceeded 100% of their primary outcome (eg. Chances); others achieved 20% of expected primary outcomes (eg. Pyramid Project).
- Children's services averaged 62% of primary outcomes (often impacted by COVID-era foster placement challenges).
- Healthy lives projects averaged 70% of primary outcomes, although data is interim data for four ongoing projects.
- Young people and addiction-related projects performed strongly, achieving 97% and 86% of their primary outcomes, respectively.
- Early years and older people's services projects exceeded 100% of primary outcomes.
- It is worth noting that ongoing service delivery may affect final outcomes and payments. Local commissioners may have captured data in different ways to that used in these reports.

	No. of projects	Primary outcome achievement		
		Average	Maximum	Minimum
Children's services	5	62%	98%	20%
Drug and alcohol dependency	3	86%	115%	36%
Early years	3	111%	136%	75%
Young people	6	97%	111%	82%
Older People's services	1	Only one project: 207%		
Healthy lives	9	70%	141%	24%
Other cross-cutting themes	2	118%	131%	105%

Funding and investment¹

- Life Chances Fund committed: **£48.63 million** in outcomes funding (after further allocation process in 2020)
- Actual Life Chances Fund spend: **£41.61 million** in outcomes funding (85.6% of funds)
- Social investment received: **£27.36 million** (vs. £29 million originally committed)
- Investment for projects ranged from: **£100,000 - £4,847,427**
- Combined Life Chances Fund and commissioner spend: **£125.85 million** - original committed £162.58 (77% of total committed)

Reach and impact (by Sept 2024)

- **130,345** people were referred to Life Chances Fund projects
- **54,213** (42% of referred users) people engaged
- **48,904** (90% of engaged users) achieved at least one outcome

¹ Additional information on investment return is available in section 3.8. These investment figures were provided by Better Society Capital and it has not been possible to validate investment values with administrative data.

Lessons learnt from a data collection perspective

1. Improved measurement of outcome achievements

To improve the measurement of outcome achievements, future programmes should ensure that data systems capture both outcome metrics and the underlying payment triggers. This means not only recording how many outcomes were achieved (eg. education milestones) but also detailing the specific steps taken (eg. enrolment, achieving different qualification levels etc.). It is equally important to track the number of unique individuals achieving outcomes to distinguish between progress made by a single person versus multiple participants – this could be aided through ensuring consistency between payment triggers that can only be achieved once compared with those that can be achieved multiple times by the same individual. Additionally, systems should support and incentivise the reporting of outcomes achieved beyond contractual caps to enable more accurate assessments of project value and impact.

2. Improved tracking of changes

Increasingly, some social outcome partnerships are being characterised for their relational way of working. In practice, this means that they change and adapt over the course of the programme. This entails agreeing changes in metrics, targets, evidence requirements, payments, etc. In terms of a database, the initial plans of a project are usually stored in a baseline form. Relational projects have the capacity to renegotiate that baseline form many times. In the future, databases should be better at tracking the original commitment, and keeping track of changes separately, so that evaluators can narrate the evolution of the partnership and evaluate which changes generated better results for the partnership, and which changes did not serve the purpose of better social outcomes for the cohort.

3. Better data definitions

Most of the data collection efforts were led by the projects themselves. Each time they completed a baseline form, or submitted a quarterly payment claim, projects were populating the database that underpins this report. TNLCF shared instructions for projects before completing forms for the DCMS Data Portal. However, some projects were not consistent in using these data definitions across the life of the project. Reasons for the inconsistency can include key employees moving onto different roles and new employees making different assumptions, or the data definitions in initial instructions being broad and not providing accurate guidelines on how to calculate complex figures such as investment returns, cost savings or management costs. In the future, data definitions should be clear, exhaustive and should not leave room for ambiguity. Data definitions should be agreed by the delivery partnership (central government, local commissioners and the organisation managing the fund) to make sure that the end result is a database that can answer the initial research questions that guide the learning and evaluation efforts. This means that instructions should be carefully designed and tested by the fund, but also that projects will need to have resources and capabilities for completing complex forms for the Data Portal.

LCF EVALUATION REPORT

INTRODUCTION

The Life Chances Fund

The Life Chances Fund (LCF) was a £70 million fund supporting the growth and development of 29 locally-commissioned social outcomes partnerships (SOPs), also known as social impact bonds (SIBs), in England. These outcomes-based projects were co-commissioned by central government and a range of local public sector organisations.

LCF projects aimed to tackle complex social problems across policy areas like child and family welfare, homelessness, health and wellbeing, employment and training, criminal justice, and education and early years. Following three application rounds, funding was made available for multi-year SOP projects to run within the LCF's nine-year lifespan from July 2016 to March 2025. The first LCF projects began service delivery in 2018, with the bulk of projects launching between 2019 and 2020. LCF Projects were only able to claim payments from the fund for outcomes achieved up to the end of September 2024. Some projects continued to deliver services beyond the lifetime of the LCF.

The Fund had the following objectives²:

- Increasing the number and scale of SOPs in England
- Making it easier and quicker to set up a SOP
- Generating public sector efficiencies by delivering better outcomes and using these successes to understand how and whether cashable savings could be achieved
- Increasing social innovation and building a clear evidence base of 'what works'
- Increasing the amount of capital available to a wider range of voluntary, community and social enterprise (VCSE) sector providers to enable them to compete for public sector contracts
- Providing better evidence of the effectiveness of the SOP mechanism and the savings that are being accrued
- Growing the scale of the social investment market

The LCF was administered by The National Lottery Community Fund (TNLCF, formerly known as the Big Lottery Fund) on behalf of the Department for Culture, Media and Sport.

² Loveless, L. & Lloyd, R. (2021). Process Evaluation for the Life Chances Fund. LCF Consulting Services Ltd. Access it [here](#).

The Life Chances Fund evaluation

The Department for Culture, Media and Sport (DCMS) commissioned the LCF evaluation to understand how SOPs add value when compared with more conventional public service commissioning arrangements³.

The evaluation was structured across three strands:

- **Strand 1 – Fund-level programme evaluation**
Sought to evaluate the whole LCF as a tool for growing the social outcome partnership market. It evaluated the process involved and lessons learnt from fund administration⁴
- **Strand 2 - SOP mechanism evaluation**
Sought to evaluate SOPs as a commissioning tool. It evaluated the impact, process and value for money of selected LCF SOPs and compared the SOP model with alternative commissioning approaches. The ambition was to estimate the contribution that the SOP model has made to the observed impact
- **Strand 3 - SOP project-led evaluation**
Sought to evaluate innovative interventions and specific aspects of the SOP model to inform local implementation⁵

The Government Outcomes Lab (GO Lab) was responsible for the SOP mechanism evaluation (Strand 2). The LCF evaluation and GO Lab's accompanying research on social outcomes partnerships aim to respond to current evidence gaps by focusing specifically on SOPs as a tool for public service delivery and reform rather than centring only on the intervention effect. The ambition is to assess 'the SOP effect' – that is, the influence of this commissioning model on social outcomes.

Previous evaluations of social outcomes partnerships programmes have primarily focused on the implementation or efficacy of specific interventions (ie. the particular service funded by the SOP), often without robust quantitative impact evaluation. Impact evaluations are important to help us understand how SOPs differ from typical government commissioning mechanisms in terms of the social 'impact' they deliver against objectives. As the largest outcome fund in the UK, the LCF provided an opportunity to undertake both process and impact evaluations to help improve future policy and practice.

³ The evaluation strategy for the Life Chances Fund is available [here](#).

⁴ The fund-level evaluation was contracted to ICF. Their process evaluation is available [here](#).

⁵ LCF projects were responsible for commissioning their own project-led evaluations. Where available, these reports have been collated [here](#).

This report

This report follows the Life Chances Fund introductory primary evaluation report⁶, which focused on the LCF projects' application process and early COVID-19 adaptations, and the Life Chances Fund intermediate data release⁷, which presented the analysis from a longitudinal survey of LCF providers, commissioners, social investors and intermediaries. This final report aims to describe the performance of the LCF projects in terms of outcome achievements and payments and is accompanied by a separate analysis of a longitudinal survey to LCF providers and commissioners⁸.

Performance in the context of the Life Chances Fund

Social outcomes partnerships combine three distinct elements: social impact investment from a third-party investor, a performance-based contract with clear outcomes and measures, and a partnership between public and private sectors⁹. The concept of "performance" in these complex partnerships can, therefore, be analysed from a range of perspectives.

This report focuses on the final outcomes achieved by the 29 LCF projects. As the achievement of these outcomes determined the level of payments for these projects, this report aims to answer these research questions:

To what extent have these 29 social outcomes partnerships achieved their intended outcomes?

To what extent have these 29 social outcomes partnerships achieved the intended level of outcome payments¹⁰?

The report is structured as follows. Chapters 1 and 2 provide the necessary background for readers to understand the concept of performance in the context of the LCF and DCMS Data Portal. Chapter 3 offers a fund-level analysis of the performance of the LCF. There are then 29 chapters describing the performance of each individual LCF project, focusing mainly on outcome achievements and outcome payments. These chapters also include information on the investment and costs of these projects. The report ends with a final chapter which provides a summary of our findings, conclusions and questions for further research and analysis.

6 FitzGerald, C., Hameed, T., Rosenbach, F., Macdonald, J. R., Outes Velarde, J. & Dixon, R. (2021). An Introduction to Life Chances Fund projects and their early adaptations to Covid-19: Life Chances Fund Evaluation Interim Report. UK Department for Digital, Culture, Media & Sport. Access it [here](#).

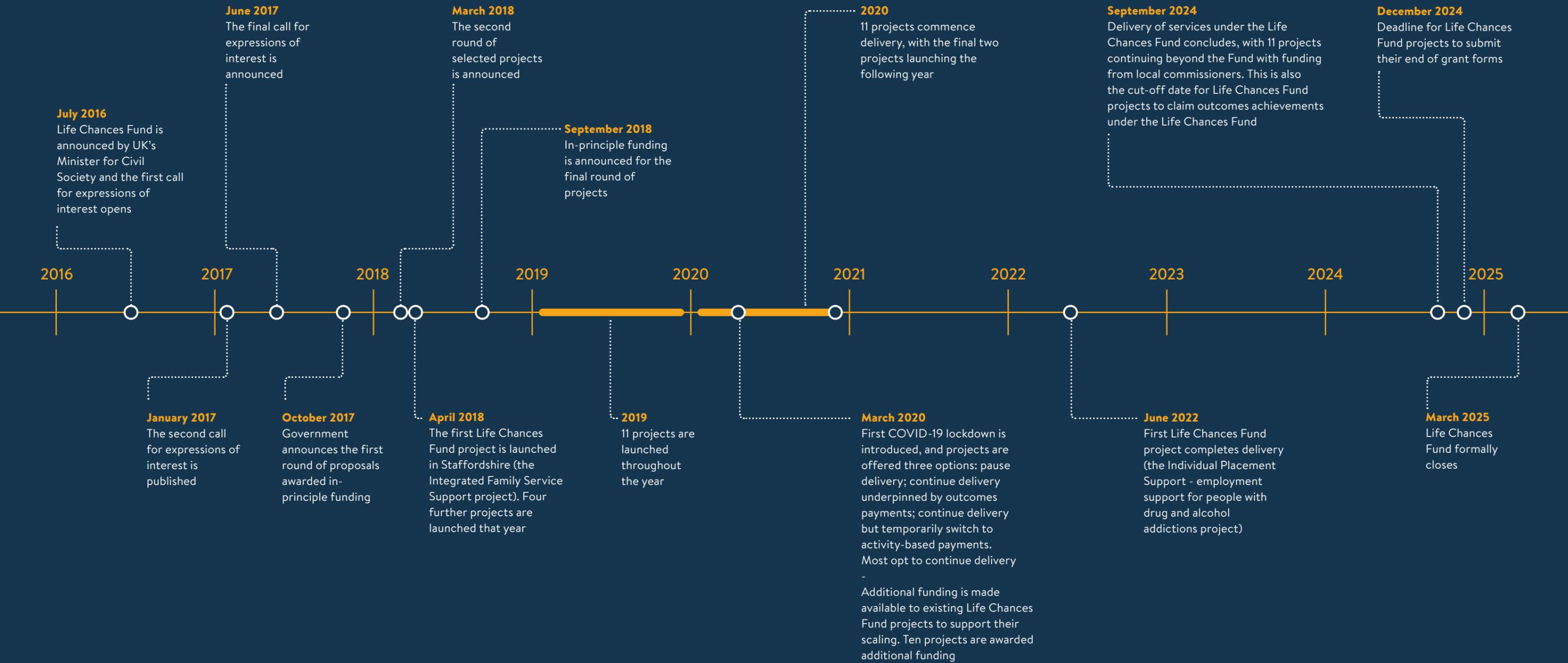
7 Government Outcomes Lab (2023). [Life Chances Fund intermediate evaluation: data release](#). UK Department for Digital, Culture, Media & Sport. Access it [here](#).

8 De Gruyter, E., Rosenbach, F., Chauhan, M. & Carter, E. (2025). Life Chance Fund final evaluation: data release. Government Outcomes Lab, Blavatnik School of Government, University of Oxford. Access it [here](#).

9 Heinrich, C. J., & Kabourek, S. E. (2019). Pay-for-success development in the United States: feasible or failing to launch? *Public Administration Review*, 79(6), 867-879.

10 This research question originally aimed to also analyse investment returns. Due to data limitations and despite attempts to correct these, this analysis was not possible.

TIMELINE



1

HOW TO READ THE LIFE CHANCES FUND PROJECTS' PERFORMANCE CHAPTERS

The LCF supported the delivery of 29 projects. Most projects (18) have completed service delivery and received their final outcome payment by September 2024. For these complete projects, this report shows final performance data. Some projects (11) received their final outcome payment from the LCF by September 2024 but still deliver services and/or expect outcome payments from their local commissioners, which will occur after September 2024. For this second group of projects, this report only shows interim data on performance up to September 2024¹¹.

Project summary

Each performance chapter begins with a fact sheet detailing the basic characteristics of the project, and how they performed compared to initial projections for the projects' primary outcome. This includes a brief description of the intervention; the delivery dates; location of the service; the organisations involved and their roles; the target population; the size of the cohort; the committed investment; the maximum potential outcome payments; the total outcome payments achieved by the project; and the achievement against the initial projections for the primary outcome. Each project had to identify a primary outcome from the list of outcomes that they contracted for. The primary outcome represents a relevant outcome for the project, but it is not necessarily the most long-term outcome, or the most difficult to achieve. **We have aimed to source all this information from the official DCMS Data Portal; when it was not possible, we have resorted to the end of grant forms self-reported by projects.**

¹¹ Please see the complete list of Life Chances Fund projects in Table 1, Chapter 3, Section 3.1 of this report.

Example project fact sheet

DFN-MOVE FORWARD



Project delivery dates:

September 2018 – May 2024



Location:

London, West Midlands and Kent



Planned size of cohort:

358
service users

Actual size of cohort:

283
service users



Planned investment:

£450,000

Actual investment:

£400,000



Summary:

DFN-MoveForward (DFN) supported young people aged 14-25 with mild to moderate learning disabilities, such as cognitive impairment and communication and interaction difficulties. The programme offered a framework of one-to-one coaching and action planning and included access to relevant careers information, advice, and guidance, as well as exposure to the world of work through insight days and work shadowing, etc.



Involved organisations:

- Commissioners: DFN Foundation and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: ThinkForward



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£1,683,620

Total outcome payments under the LCF (from the LCF and commissioners):

£1,644,120



Primary outcome:

Young people become work-ready through participation in 4 or more workplace activities.

- Planned achievement: 262 young people becoming work ready
- Actual achievement: 248 young people became work ready

OUTCOME METRICS

The first table of each chapter includes a description of the outcome metric structure for that project. In the LCF, every project was required to create a list of the outcomes that they would achieve. Each outcome was then linked to one or more payment triggers. Payment triggers specify the concrete action or activity that needs to be evidenced in order to verify that an outcome has been achieved. Payment triggers also include a price that is paid each time an individual ‘triggers’ that payment, and a target that indicates how many individuals could potentially trigger that payment, assuming a best-case scenario for the project.

The outcome metric table highlights the primary outcome for each project.

Example Outcome metrics for Chances

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: improved engagement and attitude to physical activity and sport. (Primary outcome)	PT1: staff assessment of the programme ‘engagement’ level – between 12 and 24 weeks after enrolment.	£80
	PT2: midpoint questionnaire (on perceptions of physical literacy) completed and assessed as being ‘involved’ – between 12 to 24 weeks.	£150
	PT3: endpoint questionnaire (on perceptions of physical literacy) completed – between 36 to 52 weeks after enrolment.	£200

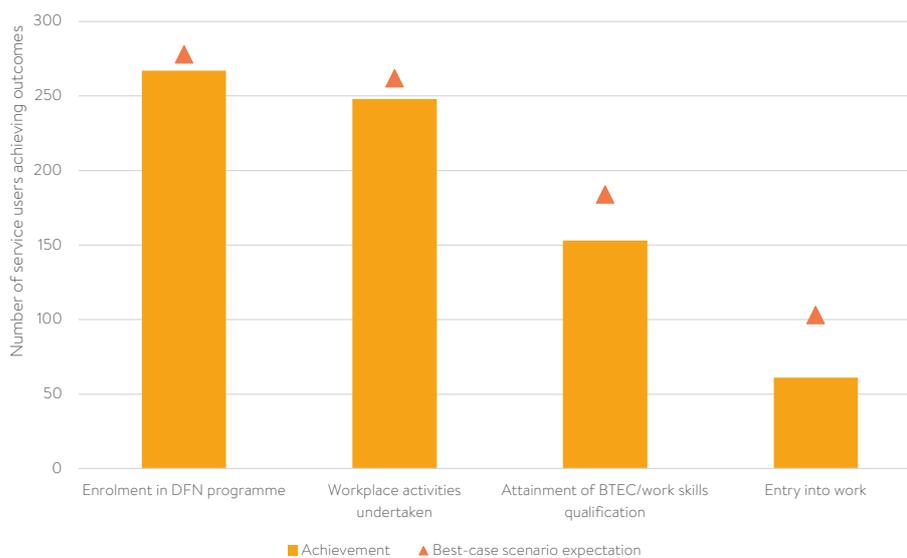
Due to the collaborative and adaptative nature of SOPs, many of these outcomes, payment triggers, prices and targets have changed over the life of the project. The outcome metrics table shows the latest outcome metric structure according to the DCMS Data Portal. We also include a description of any changes that the project went through.

Outcome achievements and results

The first two figures of every chapter show a visualisation of outcome achievements for each project. Each LCF project has a unique and complex outcome metric structure. For most projects, granular data is presented at the payment trigger level; where this is not possible, data is presented at the outcome metric level.

These two figures offer final data on achievements for projects that have completed service delivery by September 2024. For projects that continue after September 2024, these two figures offer interim data up to September 2024. Some projects have self-reported interim targets for September 2024 and we have used these targets to describe performance when they were available. When continuing projects have not shared interim targets, we have used the targets for the entire project that were reported in the DCMS Data Portal.

The first figure shows the number of outcomes that were achieved by the project over the duration of their award with the LCF. It is possible that some projects achieved more outcomes or managed to evidence some outcomes after the end of their contract with the LCF. **These performance chapters only include data for outcomes that were achieved and evidenced during the LCF funding period, which was finalised for all 29 projects by the end of September 2024. The DCMS Data Portal outcomes data is backed by official payment records, invoices and evidence provided by lead applicants.** LCF projects had the opportunity of reporting outcome achievements including all outcomes in the end of grant form, which most projects completed between October 2024 and February 2025. The end of grant form includes self-reported data on achievements provided by projects, which may not coincide with the data on the DCMS Data Portal for several reasons. These figures are available in the appendix of this report, where readers will also find the reasons behind the discrepancies.



Example Outcomes achieved by DFN Move Forward (2018-2023)

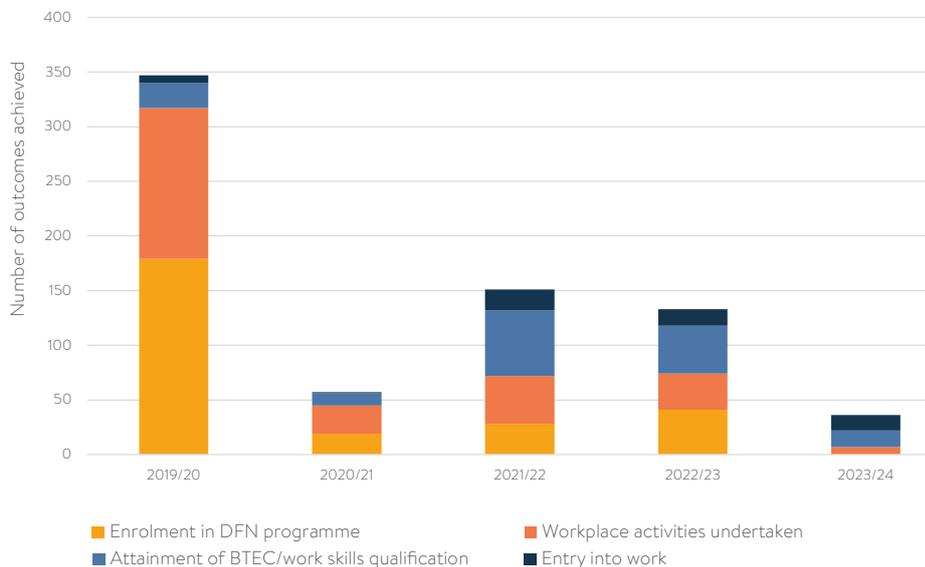
The first figure of every chapter also compares outcome achievements against best-case scenario expectations or targets. At the beginning of the LCF, projects were asked to specify a target for each payment trigger that they were proposing. **These targets were designed in different ways. For some projects, these were ‘performance targets’ and the service providers aimed at achieving those expectations by the end of the project. Some other projects viewed targets as ‘caps’, which meant that the target was the maximum amount of funding that the outcome payers were able to pay for those outcomes.** It is possible that projects had a different set of performance targets that were not necessarily recorded in the DCMS Data Portal. All targets reported in this evaluation are taken from the grant baseline forms of each project.

In the DCMS Data Portal, the targets or best-case scenario expectations are linked to the payment triggers, not the outcome metrics. For projects that did not have robust payment trigger data, we have built the first figure using outcomes metric data and have not included any targets.

The second figure in each chapter shows the distribution of the project’s outcome achievements by fiscal year. At the beginning of the LCF, projects could wait between 3 to 6 months to send a payment claim through the DCMS Data Portal. In 2020, the LCF required that all projects claimed for outcome payments on a quarterly basis. In each payment claim, projects included the amount of outcomes and the amount of payments that they were requesting. They also included the period of time in which those outcomes were achieved. For example, a payment claim could request a payment for outcomes achieved between April 2024 and June 2024. In the exceptional cases where payment claims were submitted in between fiscal years, the second figure allocates outcomes to fiscal years according to the final date in the claim period (ie. for outcomes achieved between February 2020 and May 2020, we would consider outcomes to belong to fiscal year 2020/21). These date issues were common at the beginning of the LCF, before claims were standardised to quarters.

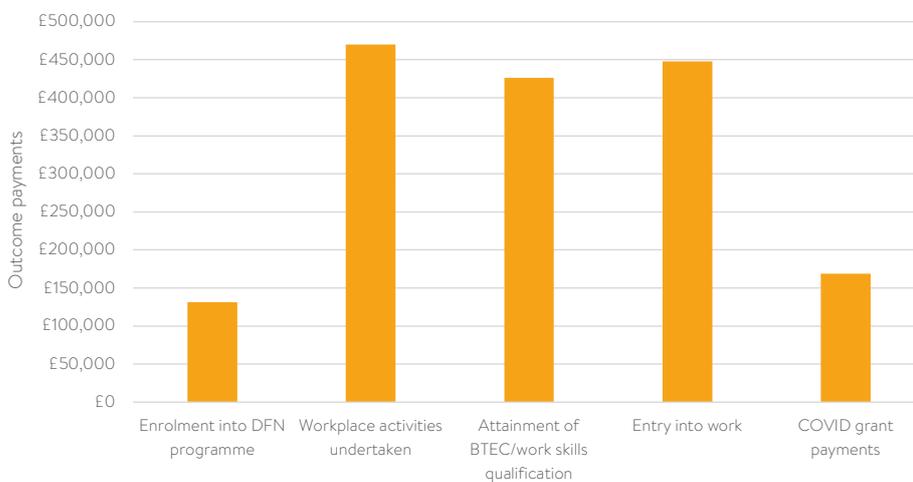
For some projects, there may be minor differences in reported outcome achievement and cohort numbers between the fund chapter and the project chapters. This is because the fund chapter primarily draws on data from end-of-grant reports, while the project chapters use data from the DCMS Data Platform. Although this may appear to indicate an inconsistency, the variation reflects the use of two distinct data sources completed by different stakeholders.

Example Number of outcomes achieved by DFN Move Forward by fiscal year (2019/20-2023/24)



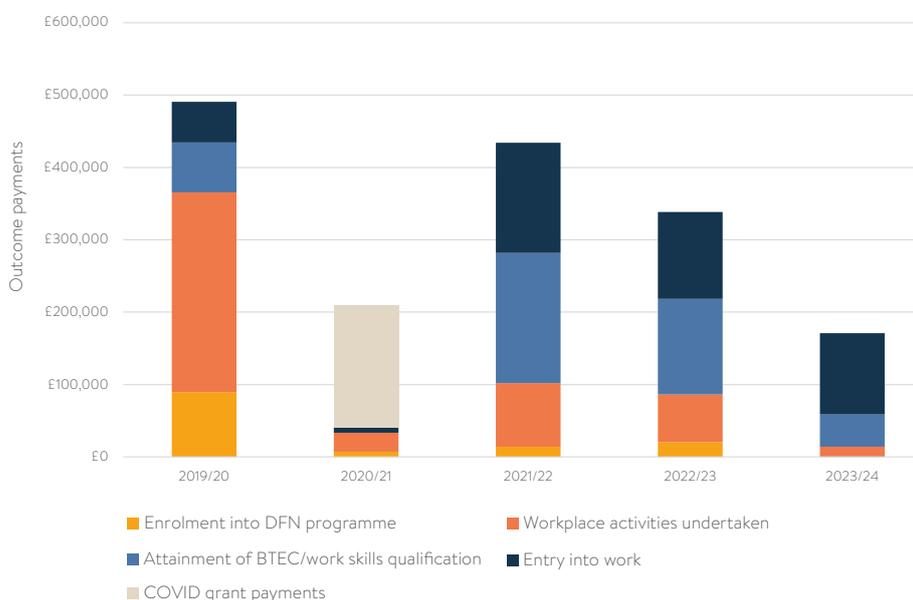
Outcome payments and project's costs

The third figure for every chapter shows the amount of outcome payments that were paid for each outcome metric or payment trigger. Some of the LCF projects that were delivering services during the COVID-19 pandemic switched to a grant-based payment mechanism. Here, the LCF and local commissioners agreed to pay a grant, based on the medium-case scenario plans, for the duration of the pandemic, for the quarters of October-December 2020 and January-March 2021. Payments for COVID grants are counted as a separate type of payment. Projects under a COVID grant agreement still reported outcome achievements, which are accounted for in the first two figures.



Example Outcome payments

The fourth figure presents the distribution of outcome payments by fiscal year. The stacked bars represent different outcomes or payment triggers showing how much funding was paid for each outcome metric or payment trigger in each fiscal year of the programme.



Example Cost of outcomes by year

Each chapter has 2 tables on investment and cost data. These tables include planned and actual investment commitments; maximum potential outcome payments; and planned and actual total cost of the project. In addition, a different table disaggregates the total cost of the project in investment, management, delivery and evaluation and learning costs.

- In investment cost, projects were expected to include the cost of items such as setting up and maintaining a Special Purpose Vehicle (SPV), expenses related with setting up the investment, the investment return to social investors, etc.
- In management cost, projects were expected to include the cost of items such as cost of coordination and oversight personnel, cost of performance management systems, financial management systems, cost of resources spent on governance discussions and partnership building, etc.
- In evaluation and learning cost, projects were expected to include the cost of contracting the services of an external evaluator and any other learning cost associated with internal learning activities.
- In delivery cost, projects were expected to include the cost of all items related with the implementation of the intervention, such as cost of front-line personnel, special material and licenses to deliver the programme, training costs, etc.

Although TNLCF shared some guidelines with data definitions on how to calculate these costs, it is possible that projects calculated costs with different methodologies. **It remains valuable to compare planned and actual costs for each project or for projects managed by the same team, but it would not be possible to compare across projects. The figures related to costs were self-reported by the projects in their end of grant form, which are stored in the DCMS Data Portal, but were not triangulated.**

2

DATA AND METHODOLOGY

The description of the LCF projects performance is based on documentary analysis. The evaluation team had access to all data stored in the DCMS Data Portal, which includes the three main documents described in the section below: grant baseline forms, quarterly payment claims and end of grant form.

The Life Chances Fund data reporting processes

The LCF required that all projects report data at several stages of their duration. To collect data in a standardised format, the LCF set up a grant management system that would serve as a management and data collection tool at the same time. We refer to this system as the DCMS Data Portal.

Grant baseline forms

Every project that was successful after the full application stage, was required to complete a 'grant baseline form'. The baseline form requested data on the expected size of the cohort, list of outcome metrics and payment triggers, baseline targets for every payment trigger, name and contribution from all other local commissioners, planned project costs and cost savings for commissioners, planned investment commitment and planned investment return.

Every time a project renegotiates a target, the inclusion or exclusion of an outcome metric, or the inclusion or exclusion of new commissioners in the contract, the baseline form is updated to reflect these changes.

Grant achievement forms or quarterly payment claims

Once the baseline form is approved on the DCMS Data Portal, the system enables the lead applicant from the project to claim for outcome payments. Every quarter, projects were required to complete a payment form where they would list all the outcomes that were achieved during the past quarter, how many individuals achieved those outcomes, and the payments that they claimed for those outcomes. TNLCF staff would review that payment claim to make sure that projects were claiming payments for the right outcomes at the right price, considering contractual caps and other arrangements between commissioners. If the payment claim was according to the contractual expectations, the TNLCF staff would approve the claim and trigger a payment. If there was missing data, or something was not correct, the TNLCF staff would reject the claim and ask the lead applicant to create a new payment claim.

The data on performance for the project chapters, be it outcome achievements or payments, was extracted from these quarterly payment claims. Quarterly payment claims were initiated by projects themselves and thoroughly checked by TNLCF staff. Due to this verification process, we elected to use data from these quarterly reporting as our main data sources. We added a footnote whenever we noted a discrepancy larger than 5% between these figures and those self-reported in the end of grant form.

End of grant forms

When projects reached the end of their contract with the LCF, TNLCF requested them to complete an 'end of grant form'. The end of grant form was subdivided in two different parts. The first part was a financial reconciliation between the figures reported in the baseline form and the actual figures for the project. The end of grant form requested projects report on the same data items as the baseline form, but the expectation was for projects to share actual or achieved values (actual size of the cohort, latest list of outcome metrics and payment triggers, latest targets for every payment trigger, name and actual contributions from all other local commissioners, actual project costs and cost savings for commissioners, actual investment commitment and actual investment return). The second part requested the lead applicant to answer a set of open-ended questions around the impact of their projects (not just the outcome achievements, but broader impact in the community and local delivery system), the challenges and opportunities that they faced when working under a SOP, and the plans for the future of the service.

The end of grant form was designed for complete projects to share their final data and views on the experience of working with SOPs. However, the DCMS Data Portal faced a challenge when a third of these projects were recommissioned to keep delivering services after the LCF, with exclusive funding from local commissioners. In practice, this meant that the end of grant form was completed by projects that did not finish service delivery, and hence did not have final data to share. Ongoing projects shared some interim performance data and interim targets up to September 2024.

All comparisons between baseline and end line values use data from these end of grant forms. **It is worth noting that the quarterly payment claims described above were controlled by TNLCF staff and included a wealth of supporting evidence to justify those claims (invoices, performance reports, evidence from local commissioners, etc). The end of grant form is self-reported by project stakeholders. For the end of grant forms, projects were not required to provide evidence of costs, costs savings or investment figures.** As these documents have different levels of data quality, the evaluation has used quarterly payment claims data when possible.

3

THE LIFE CHANCES FUND PERFORMANCE

This chapter summarises key statistics and performance data across all 29 Life Chances Fund projects. It aims to answer the following questions:

1. To what extent have these 29 social outcomes partnerships achieved their intended outcomes?
2. To what extent have these 29 social outcomes partnerships achieved the intended level of outcome payments?

The chapter is organised as follows: section 3.1 presents an overall introduction to the LCF projects. Section 3.2 offers a description of the outcomes funding committed and spent by the Life Chances Fund. Section 3.3 describes the spend profile of the LCF. Section 3.4 describes the LCF projects' referrals and engagement rates. Section 3.5 describes performance in terms of outcomes achievements. Section 3.6 presents projects' performance in terms of outcomes payments from both the LCF and local commissioners.

3.1 The Life Chances Fund projects

The Life Chances Fund projects delivered different interventions for people with complex needs, which makes them very difficult to compare against each other. Each project had a unique list of outcome metrics which they pursued. Even when projects were labelled with the same policy theme, they were often pursuing substantially different outcome metrics and worked with substantially different cohorts. Table 1 presents a list of the 29 LCF projects with data on their delivery dates, planned investment, planned maximum potential outcome payment, type of intervention and primary outcome to be achieved. Projects are clustered by their policy themes.

Table 1 Basic characteristics of Life Chances Fund projects

LCF theme	Name of project	Location	Year delivery start and end	Planned size of cohort	Description of intervention	Planned social investment (upfront capital)	Maximum potential outcome payment (LCF and local commissioners)	Complete/ Continuing after September 2024
Children's services	Fostering Better Outcomes	Cheshire West and Chester	2018-2024	30 service users ^{12,13}	Fostering Better Outcomes aimed to reduce the number of children in residential placements by 'stepping down' to specialist foster care, thereby offering an intensive, therapeutic and family-based support package.	£300,000	£1,028,926	Complete
	Stronger Families Suffolk	Suffolk	2019-2026	542 service users	Stronger Families Suffolk is a whole family-based intervention using Functional Family Therapy. It sought to improve communication and supportiveness between parents or guardians and young people, while decreasing hostility.	£1,400,000	£6,925,607	Continuing after September 2024
	Stronger Families Norfolk	Norfolk	2019-2028	436 families	The project delivers a service based on Family Functional Therapy. It seeks to improve communication and supportiveness between parents or guardians and young people, while decreasing hostility.	£2,100,000	£9,576,245	Continuing after September 2024
	The Pyramid Project	Telford and Wrekin, Warwickshire, Sandwell, Stoke on Trent, Surrey, Worcestershire, Wolverhampton, Staffordshire, and Dudley	2020-2024	92 service users	The aim was to work with independent foster care providers to recruit specific resilient carers for children in residential care with high levels of complex needs. The service included bespoke wrap around support alongside the delivery of therapeutic services to enhance the stability of placements.	£925,562	£11,341,260	Complete
	DN2 Children's Services Social Impact Bond	Nottinghamshire and Derbyshire	2020-2027	304 service users	DN2 offers intensive support to children and young people (aged 10-17) at risk of care entry or who recently entered care. The goal is to help them remain with their families when it is safe to do so.	£884,831	£9,123,323	Continuing after September 2024

¹² For research and data analysis purposes we have opted to use the term 'service user' to refer specifically to those individuals who formally received a support service, or in other words, were engaged with, through a Life Chances Fund project. We did so to ensure consistency with previous related publications and for clarity as to the 'unit of analysis' when discussing results across multiple projects. We recognise that different organisations and communities may prefer alternative terms, each of which carries its own connotations and significance. The choice of terminology can reflect important values and relationships, and the use of 'service users' here is not intended to diminish that diversity or overlook the sensitivities some may associate with the term.

¹³ In the end of grant form, Fostering Better Outcomes reported aiming for a smaller cohort of 12 service users

LCF theme	Name of project	Location	Year delivery start and end	Planned size of cohort	Description of intervention	Planned social investment (upfront capital)	Maximum potential outcome payment (LCF and local commissioners)	Complete/ Continuing after September 2024
Drug and alcohol dependency	Integrated Family Service Support	Staffordshire	2018-2027	2,006 service users	IFSS works with families who have children and young people identified as being in need or who are under child protection plans, particularly in cases where parental drug and alcohol use may indicate a potential risk.	£475,000	£5,331,000	Continuing after September 2024
	Cornwall Frequent Attenders	Cornwall	2018-2023	705 service users	The project works with residents of Cornwall aged 18 and older who are experiencing issues related to substance misuse and have had eight or more visits to Accident and Emergency or two or more hospital admissions within a year. The intervention included regular key worker outreach, home visits, drop-in sessions, crisis management to address immediate problems, and other therapeutic techniques.	£407,000	£2,226,336	Complete
	IPS Employment Support For People With Drug And Alcohol Addictions	West London Boroughs	2019-2022	2,074 service users	Individual Placement Support Service helps adults (16-70 years old) with drug and alcohol addictions, who are out of work, to gain and retain competitive employment.	£400,000	£2,375,150	Complete
Early years	Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	Plymouth	2019-2024	56 service users	Pause works with women of childbearing age who have experienced (or are at high risk of experiencing) a cycle of recurrent care proceedings leading to removal of their children into local authority care. Pause is an intensive, relationship-based support programme.	£1,100,000	£1,623,872	Complete
	ParentChild+	Royal Borough of Kensington and Chelsea and City of Westminster	2019-2023	198 service users	ParentChild+ aimed to narrow the gap in school readiness between vulnerable children and their peers. The service targeted families with a child aged 2-3 who do not meet age related goals on speech and language, and social-personal skills assessed during the national 2-year-old checks.	£100,000	£1,107,287	Continuing after September 2024
	West London Zone (AllChild), Placed-Based Support For Children And Young People: Scale-Up	London Boroughs (Brent, Westminster, Kensington and Chelsea, and Hammersmith and Fulham)	2019-2024	2,420 service users	All children who participated in this project faced various challenges, including economic disadvantage, emotional wellbeing, proficiency in English and Math, school attendance and interpersonal relationships. The intervention was structured around each child's Individual Support Plan, which had four key components: informal engagement, formal engagement, developmental support, and specialised support from delivery partners.	£1,400,000	£16,244,960	Complete

LCF theme	Name of project	Location	Year delivery start and end	Planned size of cohort	Description of intervention	Planned social investment (upfront capital)	Maximum potential outcome payment (LCF and local commissioners)	Complete/ Continuing after September 2024
Young people	FutureImpact	Nottingham	2018-2023	1,180 service users	FutureImpact coaches worked with young people with special educational needs and disabilities to overcome problematic behaviours, build capacity, resilience and confidence, and sustain their progress.	£498,000	£3,288,900	Complete
	DFN-MoveForward UK	London, West Midlands and Kent	2018-2024	358 service users	DFN-MoveForward supported young people aged 14-25 with mild to moderate learning disabilities, such as cognitive impairment and communication and interaction difficulties. The programme offered a framework of one-to-one coaching and action planning.	£450,000	£1,683,620	Complete
	Big Picture Learning In Doncaster	Doncaster	2019-2024	541 service users	Big Picture Learning works with young people in small advisory groups, as an alternative provision to learning centres and Pupil Referral Units. The target population is children and young people aged 11-16 who are disengaged from education and showing early signs of crisis.	£750,000	£6,194,792	Complete
	The Skill Mill	Birmingham, Croydon, Durham, Leeds, Nottingham, Rochdale, Surrey, and West Sussex	2020-2024	252 service users	Skill Mill service centres around the provision of employment. High risk ex-offenders aged 16-18 are offered paid employment four days a week and are encouraged to acquire a Level 2 qualification.	£1,100,000	£3,241,776	Complete
	Chances	22 different locations across England	2020-2024	6,720 service users	The aim of Chances was to use sport and physical activity to provide new opportunities and alternative life pathways for children and young people in disadvantaged areas whilst improving their health and wellbeing.	£1,245,000	£4,104,000	Complete
	Gloucestershire Positive Behaviour Support	Gloucestershire	2020-2029	14 service users ¹⁴	Gloucestershire Positive Behaviour Support's target cohort is young people with a learning disability and/or autism and displaying challenging behaviour, who are at risk of going into residential care. The service delivers practical solutions to improve the individual's quality of life, reducing the need for residential placements, with a focus on them remaining at home or other supported homes.	£501,000	£1,774,925	Continuing after September 2024
Older people's services	Enhanced Dementia Care Service	London Borough of Hounslow	2021-2024	300 service users	Enhanced Dementia Care Service offered coordinated and integrated services using evidence-based care pathways, case management and personalised care planning. The aim of the service was to anticipate and avoid deterioration of conditions and support reduction in hospital admissions for people affected with dementia with a high rate of admissions.	£345,000	£810,000	Complete

14 In the end of grant form, Gloucestershire Positive Behaviour Support reported aiming for a smaller cohort of 10 service users

LCF theme	Name of project	Location	Year delivery start and end	Planned size of cohort	Description of intervention	Planned social investment (upfront capital)	Maximum potential outcome payment (LCF and local commissioners)	Complete/ Continuing after September 2024
Healthy lives	MHEP Haringey And Barnet	Haringey and Barnet	2019-2023	985 service users	Individual Placement Support aimed at getting people with enduring and severe mental health issues back or into paid employment.	£227,000	£1,421,234	Complete
	Promoting Independence	Sheffield	2019-2026	105 service users	Individual support to assist adults with mental health issues to live independently in the community.	£725,000	£2,744,750	Continuing after September 2024
	Midlands Regional Pause Hub	Derbyshire, Northamptonshire, Worcestershire and Plymouth	2020-2026	166 service users	The service aims to help women who have experienced or are at risk of experiencing at least two episodes of care proceedings leading to the removal of one or more of their children into care. Pause seeks to address the cycle of repeated removals by intervening at a time when women are not caring for children.	£2,150,000	£5,643,426	Continuing after September 2024
	MHEP Enfield	Enfield	2020-2024	674 service users	Individual Placement Support aimed at getting people with enduring and severe mental health issues into paid employment.	£126,000	£620,689	Complete
	MHEP Tower Hamlets – Severe Mental Illness	Tower Hamlets	2020-2024	3,644 service users	Individual Placement Support aimed at getting people with enduring and severe mental health issues back or into paid employment.	£300,000	£2,068,270	Complete
	MHEP Shropshire	Shropshire	2020-2024	582 service users	Individual Placement Support aimed at getting people with mental health issues back or into competitive employment.	£204,000	£1,034,487	Complete
	MHEP Tower Hamlets – Learning Disabilities	Tower Hamlets	2020-2023	411 service users	Delivering services using Individual Placement and Support (IPS) principles to clients with learning disabilities in Tower Hamlets.	£328,000	£1,307,059	Complete
	A Norfolk Carers SIB	Norfolk	2020-2026	8,419 service users ¹⁵	The Norfolk Carers Partnership supports adult unpaid carers and transitioning carers (aged 16 to 24) to improve their wellbeing and enable them to sustain their caring role.	£2,500,000	£11,872,775	Continuing after September 2024
	Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	Northamptonshire	2021-2027	5,832 service users	Social prescribing focuses on prevention of ill health and the promotion of positive health and wellbeing through community-based services. This programme works to create sustained lifestyle changes and improved self-care for people living with long-term health conditions in Northamptonshire. The service specifically targets people with long-term health conditions.	£1,350,000	£8,455,774	Continuing after September 2024

15 In the baseline form, the project reported aiming for a cohort of 16,000 people

LCF theme	Name of project	Location	Year delivery start and end	Planned size of cohort	Description of intervention	Planned social investment (upfront capital)	Maximum potential outcome payment (LCF and local commissioners)	Complete/ Continuing after September 2024
Other cross-cutting themes	Kirklees Better Outcomes Partnership	Kirklees	2019-2024	6,300 service users	The project addressed issues including drug and alcohol dependency, older age, homelessness and disability, and other factors that can contribute towards a person's ability to successfully live independently. The service targeted people over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	£4,535,645	£22,297,917	Complete
	Single Homelessness Prevention Service	London Boroughs (Brent, Ealing, Enfield, Hackney, Islington, and Waltham Forest) and Norfolk	2019-2028	18,518 service users	The service targets single people who are homeless or at risk of becoming homeless. A support worker model helps people secure new accommodation or to sustain existing tenancies.	£2,521,000	£17,113,000	Continuing after September 2024

Map 1 Distribution of projects' delivery locations in the UK



Note: This map shows the distribution of service delivery locations of LCF projects in England. Each pin corresponds to a delivery location. One project can deliver a service in more than one location, so one project could account for two or more pins in the map above.

As described in Table 1, the LCF supported 29 projects tackling complex social issues across the following policy themes: healthy lives (9 projects), young people (6 projects), children's services (5 projects), early years interventions (3 projects), drug and alcohol dependency (3 projects), older people's services (1 project), and 'other cross-cutting' projects (2 projects). These projects worked with different cohorts and pursued different outcome metrics, so it is not possible to establish any direct comparisons between them. In Appendix 2, we present outcome achievements for projects that are working towards overarching outcomes (eg. outcomes around employment, homelessness, or children in care) to facilitate the analysis of the fund, but we have not aggregated them to avoid the conflation of non-identical elements.

The LCF projects can be subdivided in two groups: complete and ongoing projects. Complete projects refer to the projects that have finished service delivery and received their last outcome payment up to the end of September 2024. Ongoing projects refer to those projects which have agreed an extension beyond September 2024 with exclusive funding from local commissioners. In many cases, these extensions had been agreed from the start of the project. Table 1 shows that 18 projects are complete and 11 projects are still ongoing. Describing the performance for ongoing projects presents challenges, as some ongoing projects have reported targets and payment plans for the entire life of their service, as opposed to only the period when they were supported by the LCF. Given these complexities, the following subsections will present findings separately for the groups of complete and ongoing projects. The following subsections describe the special treatment for ongoing projects (eg. comparing them against interim targets, instead of the final targets reported in the DCMS Data Portal when possible).

Our comparison of user engagement, outcomes achievement, and payments against targets, is limited as target setting is highly dependent on stakeholders' predictive powers and how they approached these targets. For instance, some projects updated their targets more than others, facilitating more realistic targets to be set as project delivery progressed. Whereas other projects may not have prioritised target setting due to time constraints or may have chosen to set particularly high expectations in order to ensure enough resources were available for potential project successes. **Resultingly, comparing performance against targets should not be used as relative, objective measures of impact, but instead they give an insight into how each project functioned.**

In sum, the subsections on LCF performance will disaggregate the analysis by policy theme (when appropriate) and stage of project (complete/ongoing). Target achievement should be viewed as a subjective measure of performance.

3.2 The Life Chances Fund outcomes funding

Table 2 shows the list of projects that were awarded a contract and the initial LCF award amount¹⁶. These amounts changed during the life of these contracts. Some projects received further allocations and increased the size of their cohorts and programmes, while other projects decreased their award and delivered smaller interventions. The project performance chapters provide details on the changes and adaptations to each project.

In order to account for the entire amount of funding commitment by the LCF, Table 2 includes the two projects (Adults With Complex Needs and Opening Doors) that were awarded contracts but withdrew shortly after.

¹⁶ These amounts do not include outcomes funding from local commissioners.

Table 2 Life Chances Fund projects initial awards and final awards grouped by policy themes

LCF theme	Name of project	LCF original award	Completed LCF contract	Received LCF further allocation?	LCF award after further allocation ¹⁷	Complete/continuing after September 2024
Children's services	Fostering Better Outcomes	£939,000	Yes	No		Complete
	Stronger Families Suffolk	£422,400	Yes	Yes	£771,689 ¹⁸	Continuing after September 2024
	Stronger Families Norfolk	£1,238,512	Yes	Yes	£1,617,248	Continuing after September 2024
	Pyramid Project	£2,388,592	Yes	No		Complete
	DN2 Children's Services Social Impact Bond	£2,995,411	Yes	No		Continuing after September 2024
Drug and alcohol dependency	Integrated Family Service Support	£1,890,000	Yes	Yes	£2,132,400	Continuing after September 2024
	Cornwall Frequent Attenders	£779,216	Yes	No		Complete
	IPS Employment Support For People With Drug And Alcohol Addictions	£1,075,000	Yes	No		Complete
Early years	Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	£536,810	Yes	Yes	£649,559	Complete
	ParentChild+	£252,900	Yes	Yes	£332,187	Continuing after September 2024
	West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	£4,248,082	Yes	Yes	£4,612,082	Complete
Young people	FutureImpact	£891,660	Yes	Yes	£1,151,115	Complete
	DFN-MoveForward UK	£683,620	Yes	Yes	£837,088 ¹⁹	Complete
	Big Picture Learning in Doncaster	£1,795,810	Yes	No		Complete
	The Skill Mill	£1,255,311	Yes	Yes	£1,418,976	Complete
	Chances	£1,224,000	Yes	No		Complete
	Gloucestershire Positive Behaviour Support	£338,000	Yes	No		Continuing after September 2024

¹⁷ The LCF funding allocation was renegotiated for some projects after the further allocation process. A description of these changes can be found in the project chapters.

¹⁸ In April 2023, the award was reduced to £632,793, then in April 2024, the award was increased to £658,112.

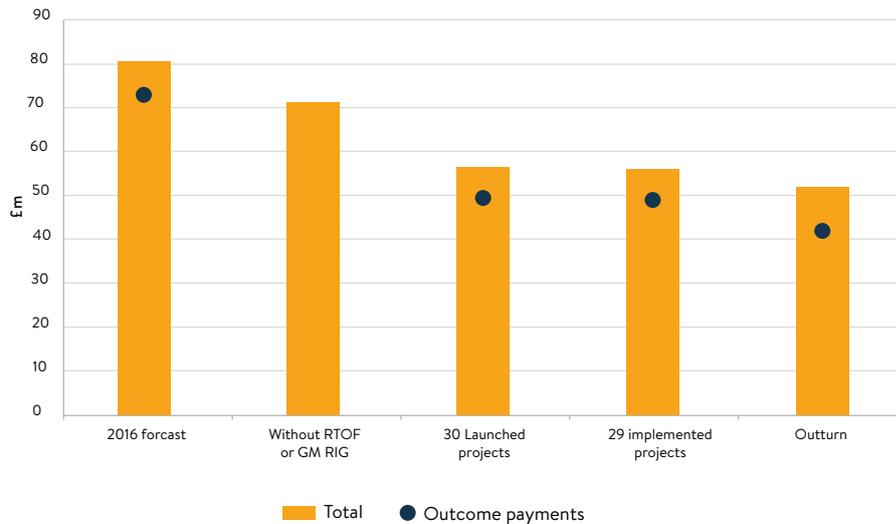
¹⁹ DNF Move Forward revised its maximum potential outcome payment to £683,620 at a later stage.

LCF theme	Name of project	LCF original award	Completed LCF contract	Received LCF further allocation?	LCF award after further allocation	Complete/continuing after September 2024
Older people's services	Enhanced Dementia Care Service	£420,000	Yes	No		Complete
Healthy lives	MHEP Haringey And Barnet	£596,918	Yes	No		Complete
	Promoting Independence	£750,000	Yes	No		Continuing after September 2024
	Midlands Regional Pause Hub	£1,997,446	Yes	No		Continuing after September 2024
	MHEP Enfield	£260,690	Yes	No		Complete
	MHEP Tower Hamlets – Severe Mental Illness	£868,966	Yes	No		Complete
	MHEP Shropshire	£434,484	Yes	No		Complete
	MHEP Tower Hamlets – Learning Disabilities	£589,673	Yes	No		Complete
	A Norfolk Carers SIB	£4,082,470	Yes	No		Continuing after September 2024
	Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	£2,769,521	Yes	No		Continuing after September 2024
	Adults With Complex Needs - Sheffield	£1,461,000	No (early withdrawal)	No		Complete
Opening doors – Bexley Council	£374,000	No (early withdrawal)	No		Complete	
Other cross-cutting themes	Kirklees Better Outcomes Partnership	£6,600,000	Yes	No		Complete
	Single Homelessness Prevention Service	£3,991,000	Yes	Yes	£4,201,000	Continuing after September 2024

3.3 Spend profile of the Life Chances Fund

The LCF’s spending profile evolved over the course of the fund, falling from an initial 2016 commitment of £80m (of which £73m committed to outcome payments)²⁰, to final outturn spend of £52m (of which £42m was outcome payments, see Chart 1).

Chart 1 Evolution of total Life Chances Fund spend



Approximately £9m of LCF funding was reallocated to the Greater Manchester Reform Investment Fund (RIF) and the Refugee Transition Outcomes Fund (RTOF), bringing total potential LCF spend down from £80m to £71m (see Chart 1). The RIF was agreed with Government as part of the fourth devolution agreement for Greater Manchester. The original ambition for the RIF was to create a vehicle through which different Government funding streams could be brought together into a single Greater Manchester pot to be invested alongside other local funding in driving system wide reform. This included a £5m allocation from the LCF. The RTOF was a fund of up to £13.99 million that sought to improve employment, housing, and wider integration outcomes for approximately 1,800 newly recognised refugees. The funding for the RTOF programme came from two sources: up to £10 million from the HM Treasury’s Shared Outcomes Fund, which funded pilot projects to test innovative ways of working across the public sector, and the remaining funding of up to £3.99 million came from the LCF.

The LCF initially committed £48.15m in outcomes funding for 31 projects. This commitment was the result of three rounds of funding allocation between 2016 and 2018. This reduced by £1.8m following the early withdrawals of two projects (see table 2), bringing total commitment prior to any further allocations to £46.32m. In 2020, the LCF offered projects an opportunity to request further allocations and scale their existing interventions. As shown in Table 2, 10 projects received further allocations, amounting to just over £2.31m bringing the total forecast outcomes spend up to £48.63m. The LCF expected these further allocations to work with the same cohort criteria, outcomes and payment structure as the core LCF project²¹. As of September 2024, the LCF has spent £41.61m in outcomes payments.

²⁰ “£80 million boost for Life Chances Fund to transform lives” Cabinet Office Press Release (July 2016)

²¹ The LCF shared guidance with projects to apply for further allocations. Access it [here](#).

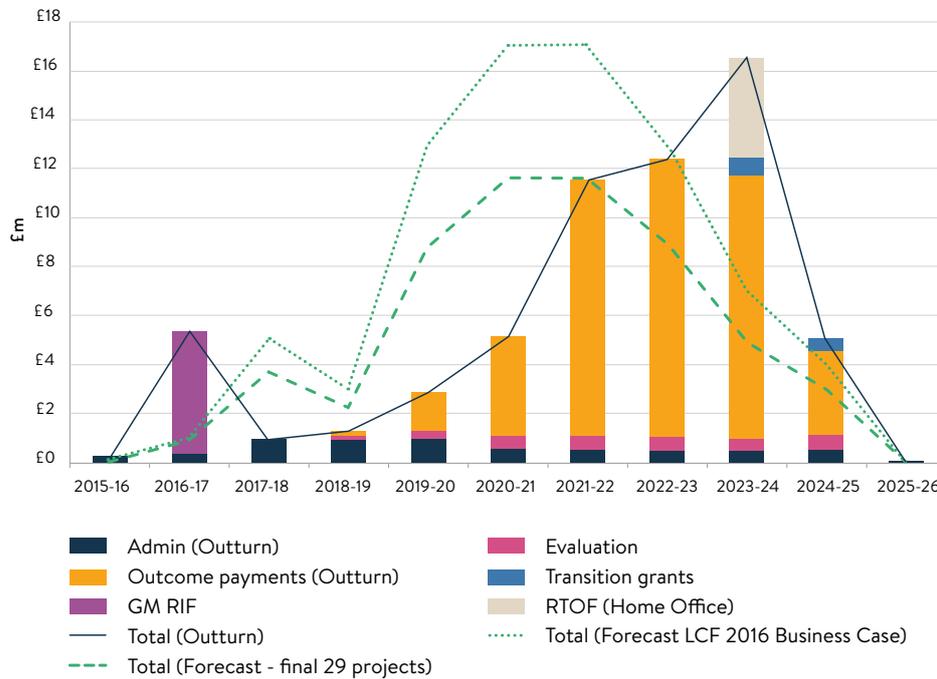


Chart 2 Life Chances Fund Outturn (Jan 2025) and forecast spend

Note: COVID-19 pandemic resulted in lower spend on outcomes than expected in 2020-21 for the LCF

3.4 The Life Chances Fund referral and engagement conversion rates

In the context of the Life Chances Fund, ‘referrals’ is used to describe potential service users who are referred to a particular service, usually by a local authority. ‘Engagements’ is used to describe service users who have been referred to the service, met the eligibility criteria, and decided to actively participate in the programme. According to self-reported end of grant forms, by September 2024, 130,345 people were referred to the LCF projects, 54,213 people engaged, and 48,904 people achieved at least one project outcome. In other words, 42% of people referred to a project went on to engage in that project, and 90% of engaged service users went on to achieve one or more outcome. We note that the same service user could be referred or engaged multiple times over the life of the project.

In addition to submitting quarterly payment claims, projects were required to self-report the target number of referrals that they expected for a particular quarter, the actual number of referrals that they received, and the final number of service users who engaged with the service in that quarter. Some projects had a conversion rate of more than 100% from actual referrals into engaged service users. This is due to projects engaging with service users from sources other than the ‘official’ referral channels. Official referral channels often include local commissioners and other locally based organisations that committed to refer eligible service users for the project.

Table 3 presents an average rate of conversion between the target referral into actual referrals, and actual referrals into engaged service users for each LCF project. These summary figures were calculated by averaging the self-reported quarterly figures for each project.

Table 3 Average conversion rates for Life Chances Fund projects – target referrals into actual referrals received by projects and referrals into engaged service users

LCF theme	Name of project	Project referrals (as % of referral target)	Engaged service users (as % of project referrals)
Children's services	Fostering Better Outcomes	87%	53%
	Stronger Families Suffolk	98%	86%
	Stronger Families Norfolk	104%	79%
	Pyramid Project	38%	14%
	DN2 Children's Services Social Impact Bond	118%	97%
Drug and alcohol dependency	Integrated Family Service Support (IFSS)	104%	100%
	Cornwall Frequent Attenders	87%	100%
	IPS employment support for people with drug and alcohol addictions	120%	65%
Early years	Reducing the prevalence of mothers experiencing recurrent care proceedings (Pause)	Data not available	Data not available
	ParentChild+	214%	69%
	West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	98%	60%
Young people	FutureImpact	145%	93%
	DFN-MoveForward UK	56%	87%
	Big Picture Learning in Doncaster	96%	88%
	The Skill Mill	85%	100%
	Chances	99%	100%
	Gloucestershire Positive Behaviour Support	92%	94%

LCF theme	Name of project	Project referrals (as % of referral target)	Engaged service users (as % of project referrals)
Older people's services	Enhanced Dementia Care Service	143%	86%
Healthy lives	MHEP Haringey And Barnet	91%	68%
	Promoting Independence	88%	95%
	Midlands Regional Pause Hub	165%	104%
	MHEP Enfield	79%	71%
	MHEP Tower Hamlets – Severe Mental Illness	60%	55%
	MHEP Shropshire	129%	66%
	MHEP Tower Hamlets – Learning Disabilities	23%	113%
	A Norfolk Carers SIB	166%	59%
	Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	83%	82%
Other cross-cutting themes	Kirklees Better Outcomes Partnership	226%	56%
	Single Homelessness Prevention Service	94%	88%

In general terms, LCF projects have been successful in receiving referrals from their local commissioners and engaging with service users. Two projects have struggled with achieving the target number of referrals that they initially planned. The Mental Health and Employment Partnership Tower Hamlets for people with learning disabilities only achieved an average of 23% of target referrals, and the Pyramid Project achieved an average of 38%. Detailed explanations provided by projects around these issues are presented in the projects' performance chapters but generally they are related to projects assuming that local commissioners or other local partners would provide more referrals than they actually did, and difficulties engaging with service users in-person during the COVID-19 pandemic.

Twelve projects achieved an average of 100% of expected referrals or higher. Projects had initial expectations for referral numbers, but projects could receive more referrals than anticipated, from the expected referral sources and other sources too. These projects have received more referrals than initially planned, which was not necessarily advantageous for those projects. As noted above, the LCF projects tend to have well-defined cohorts and eligibility criteria, which means that not everyone who is referred to the service can use it. Service users need to demonstrate that they comply with the eligibility requirements before engaging with the service. The time and resources spent on triaging service users could be onerous for projects.

Only one project achieved an average of 50% or lower for the conversion rate of referrals into engaged service users. The Pyramid Project had an average conversion rate of 14%. More details on the development of this SOP can be found in the project's chapter, but the main explanation for the lack of engagement related to difficulties receiving the right referrals, and the lack of appropriate foster placements available to be offered to the cohort.

There are no substantial differences in conversion rates across policy themes.

3.5 The Life Chances Fund projects and outcome achievements

In the baseline form, every project was required to specify the list of outcome metrics and identify which of those metrics would be the "primary outcome". The selection of the primary outcome was left to the project stakeholders, and they could choose the metric that was most relevant to them. They did not always select the most long-term, or the most difficult to achieve metric. To describe the performance of projects, we calculate the percentage of achievement of the primary outcome against the best-case scenario expectation set in the baseline form. Over the course of the LCF, some projects updated their baseline estimate due to changes in circumstances. These were agreed case-by-case and following a due process. In these cases, we report the revised figures. **Table 4 uses data self-reported by projects in their end of grant forms**²². It was not possible to use data from the DCMS Data Portal for all projects, as there were gaps and different levels of granularity for projects' achievements.

Once the primary outcome was identified, we looked at the payment triggers and targets linked to that primary outcome. For projects with one payment trigger per primary outcome, we calculated the percentage of achievement for that single payment trigger. For projects where the primary outcome is linked to several payment triggers, we have calculated an average of the achievements for those payment triggers.

²² In some cases, data from the end of grant forms differed from the data on the DCMS Data Portal. For instance, several projects did not report on the Portal the outcomes achievements for which they could not claim a payment as they had reached a cap. The end of grant form included those.

Figure 1 Referral rates as a proportion of initial projections by project, based on projects' self-reported quarterly data on referrals and engagements

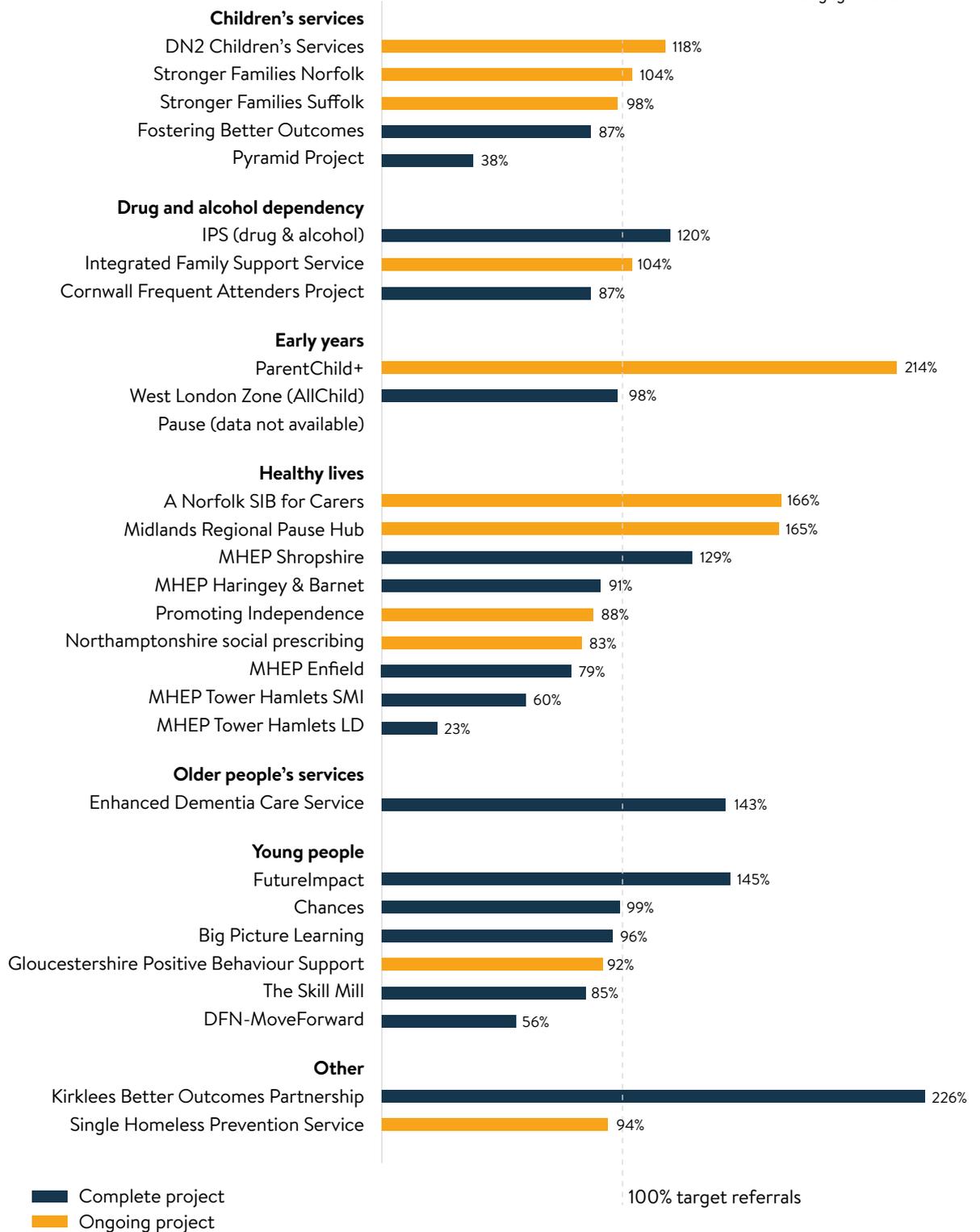


Table 4 The Life Chances Fund projects and their primary outcome achievements – according to their end of grant forms

LCF theme	Name of project	Primary outcome	Baseline target (for primary outcome, for entire lifetime of project) ²³	Achievement up to September 2024	Percentage of primary outcome achievement (against baseline target)	Complete/continuing after September 2024
Children's services	Fostering Better Outcomes	Supporting children and young people in foster care, as an alternative to residential care.	30 children and young people expected to not be in residential care for 1 month. 24 children and young people expected to not be in residential care for 12 months. 22 children and young people expected to not be in residential care for 24 months.	9 children and young people not in residential care for 1 month. 5 children and young people not in residential care for 12 months. 3 children and young people not in residential care for 24 months.	22%	Complete
	Stronger Families Suffolk	To avoid the need for sustained care through the delivery of an evidenced-based therapeutic intervention.	282 children to achieve this outcome. ²⁴	276 children achieved this outcome.	98%	Continuing after September 2024
	Stronger Families Norfolk	Prevention of families from breaking down and young people/ children from entering care.	166,748 days of care saved.	145,852 days of care saved.	87%	Continuing after September 2024
	Pyramid Project	Young person moves from residential to foster placement.	79 young people moving from residential to foster placement.	16 young people moved to foster placement.	20%	Complete
	DN2 Children's Services Social Impact Bond	Child/young person steps down from residential care into a familial type of environment.	85 service users expected to achieve this outcome.	70 service use achieved this outcome.	82%	Continuing after September 2024
Drug and alcohol dependency	Integrated Family Service Support (IFSS)	To reduce the number of children with Child Protection Plans (CPP) escalating to become looked after children (LAC).	553 families engaging on the CPP. 553 children and young people avoid escalation from CPP to LAC. 455 families completing the CPP programme.	553 families engaged on the CPP programme. 795 children and young people avoided escalation from CPP to LAC. 466 families completing the CPP programme.	115%	Continuing after September 2024
	Cornwall Frequent Attenders	Reduce the avoidable use of A&E by drug and alcohol 'frequent attenders'.	380 service users achieving a 60% reduction in A&E attendance - achieved after 6, 9 and 12 months. 233 service users achieving a sustained reduction of use of A&E services after 18 months.	362 service users achieved a 60% reduction in A&E attendance - after 6, 9 and 12 months. 271 service users achieved sustained reduction of use of A&E services after 18 months.	106%	Complete
	IPS Employment Support For People With Drug And Alcohol Addictions	Job start.	766 service users starting a new job.	276 service users started a new job.	36%	Complete

23 All baseline targets in Table 4 refer to targets for the entire life of the service. Readers can see the duration of services in Table 1 of this chapter.

24 This primary outcome encapsulates 2 payment triggers which specify that the user avoids care, one for 1 and a half years and the other for 2 years.

LCF theme	Name of project	Primary outcome	Baseline target (for primary outcome, for entire lifetime of project) ¹⁸	Achievement up to September 2024	Percentage of primary outcome achievement (against baseline target)	Complete/continuing after September 2024
Early years	Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	Women are supported to take a 'pause' from pregnancy to enable them to focus on their own needs and take control of their lives.	40 women to be supported.	49 women were supported.	123%	Complete
	ParentChild+	To narrow the school readiness gap by improving early speech and language, and personal-social-emotional skills.	Speech and language skills improvement at ASQ level for 94 children (original cohort). Socio-personal skills improvement at ASQ level for 94 children (original cohort). Speech and language skills improvement at EYFS for 77 children (original cohort). Socio-personal skills improvement at EYFS for 77 children (original cohort).	87 children (original cohort) achieved speech and language skills improvement at ASQ level. 84 children (original cohort) achieved socio-personal skills at ASQ level. 28 children (original cohort) achieved speech and language skills at EYFS level. 34 children (original cohort) achieved socio-personal skills at EYFS level.	75%	Continuing after September 2024
	West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	Child achieves at least one outcome on the AllChild rate card to set a foundation for successful development into adulthood.	1,487 children to achieve at least one outcome from the AllChild rate card.	2,024 children achieved at least one outcome from the AllChild rate card.	136%	Complete
Young people	FutureImpact	Young person demonstrates increased resilience, social inclusion and capacity for independent living, ability and knowledge to support career planning and further education/training (wellbeing assessment completed).	2,487 wellbeing outcomes (one person could achieve several wellbeing outcomes).	2,796 wellbeing outcomes achieved ²⁵ .	111%	Complete
	DFN-MoveForward UK	Young people with mild to moderate learning disabilities will enter and sustain paid employment.	78 young people entering and sustaining employment.	64 young people entered and sustained employment.	82%	Complete
	Big Picture Learning In Doncaster	Personal Learning Plan (PLP) established for students in KS3 and KS4.	465 PLP for KS3. 65 PLP for KS4.	372 PLP for KS3. 77 PLP for KS4.	99%	Complete
	The Skill Mill	No reoffending for 12 months.	230 young ex-offenders do not reoffend for 12 months ²⁶ .	203 young ex-offenders did not reoffend for 12 months.	88%	Complete

²⁵ In the DCMS Data Portal, the project FutureImpact had an achievement of 2,167 wellbeing outcomes. The achievement of 2,796 wellbeing outcomes was reported in the end of grant form. More information about the projects' data on the DCMS Data Portal can be found in the project chapter

²⁶ The achievement of 203 young ex-offenders not reoffending for 12 months is based on the end of grant form. Further details on the performance of The Skill Mill can be found on the project chapter.

LCF theme	Name of project	Primary outcome	Baseline target (for primary outcome, for entire lifetime of project) ¹⁸	Achievement up to September 2024	Percentage of primary outcome achievement (against baseline target)	Complete/continuing after September 2024
Young people continued	Chances	Improved engagement and attitude to physical activity and sport.	11,040 outcomes around improved engagement and attitude to physical activity and sport (one person could achieve several outcomes).	11,046 outcomes around improved engagement and attitude to physical activity and sport.	100%	Complete
	Gloucestershire Positive Behaviour Support	Avoidance of full-time residential care for the young people accessing the Positive Behaviour Support (PBS) Service.	To support 14 children avoiding full-time residential care ²⁷ .	14 children supported in avoiding full-time residential care.	100%	Continuing after September 2024
Older people's services	Enhanced Dementia Care Service	Reduction in avoidable hospital admissions.	300 reductions of avoidable hospital admissions.	620 reductions of avoidable hospital admissions.	207%	Complete
Healthy lives	MHEP Haringey And Barnet	Job start.	379 job starts.	218 job starts.	58%	Complete
	Promoting Independence	Adults with mental health issues move from 24/7 provision into their own tenancy and sustain this move.	74 people moving into their own tenancy. 61 people to sustain tenancy for 6 months. 55 people to sustain tenancy for 12 months. 47 people to sustain tenancy for 18 months.	73 people moved into their own tenancy. 60 people sustained tenancy for 6 months. 51 people sustained tenancy for 12 months. 34 people sustained tenancy for 18 months.	90%	Continuing after September 2024
	Midlands Regional Pause Hub	Women are supported to focus on themselves, increase their wellbeing, employability, sense of self and engage with other services whilst taking a 'pause' from pregnancy.	121 women engage with the Pause programme and 108 women successfully complete the Pause programme.	175 women engage with the Pause programme and 149 women successfully complete the Pause programme.	141%	Continuing after September 2024
	MHEP Enfield	Job start.	181 job starts.	88 job starts.	49%	Complete
	MHEP Tower Hamlets – Severe Mental Illness	Job start.	718 job starts.	359 job starts.	50%	Complete
	MHEP Shropshire	Job start.	197 job starts.	170 job starts.	86%	Complete
	MHEP Tower Hamlets – Learning Disabilities	Job start.	182 job starts.	135 job starts.	65%	Complete

²⁷ This primary outcome includes the payment triggers of: Young person stays out of residential care for 3 months (target and achievement of 14 users), 6 months (target and achievement of 14 users), 12 months (target and achievement of 13 users), 15 months (target and achievement of 12 users), 18 months (target and achievement of 12 users), 21 months (target and achievement of 12 users), 24 months (target and achievement of 12 users), 27 months (target and achievement of 12 users), 30 months (target and achievement of 11 users), 33 months (target and achievement of 11 users), 36 months (target and achievement of 11 users), 39 months (target and achievement of 11 users), and 42 months (target and achievement of 11 users).

LCF theme	Name of project	Primary outcome	Baseline target (for primary outcome, for entire lifetime of project) ¹⁸	Achievement up to September 2024	Percentage of primary outcome achievement (against baseline target)	Complete/continuing after September 2024
Healthy lives	A Norfolk Carers SIB	Sustainment of the caring role at 6 and 12 months since care support was agreed.	1,797 outcomes at 6 months and 1,284 at 12 months.	1,257 outcomes at 6 months and 779 at 12 months.	65%	Continuing after September 2024
	Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	Wellbeing improvement, measured by changes in the Well-being Star survey and Warwick-Edinburgh Mental Wellbeing Scale measurement tools.	3,696 service users to show improvements after 6 months and 3,328 service users to show improvements after 12 months.	1,084 service users showed improvements after 6 months and 546 service users showed improvements after 12 months.	24%	Continuing after September 2024
Other cross-cutting themes	Kirklees Better Outcomes Partnership	Entry into, completion and sustainment of employment, education, training and/or volunteering.	1,386 service users expected to achieve at least one of the outcomes under employment, education, training and/or volunteering.	1,817 service users expected to achieve at least one of the outcomes under employment, education, training and/or volunteering.	131%	Complete
	Single Homeless Prevention Service	Successful completion of a Personal Housing Plan (PHP) for homeless people, or at risk of homelessness.	11,497 service users to complete a PHP.	12,117 service users to complete a PHP	105%	Continuing after September 2024

On average, the LCF projects have achieved 88% of their primary outcome, based on the granular end of grant data. The 18 complete projects have an average primary outcome achievement of 87%. This average summarises a diverse range of individual project performances and different types of primary outcome metrics. For instance, the Pyramid Project achieved 20% of their primary outcome, while other projects, such as Chances, FutureImpact or Kirklees Better Outcomes Partnership achieved 100% or more. These averages should be interpreted with caution, as projects set benchmarks for themselves with different levels of difficulty. While some projects selected metrics around engagement of completion of initial plans, other projects selected long-term metrics as primary outcomes. More granular data on the performance of projects for other metrics (not just the primary outcome) can be found in the projects' performance chapters (chapters 4 to 32).

The 11 ongoing projects present an average primary outcome achievement of 89%. These projects have been compared against their baseline target for the entire service, to give readers an understanding of where projects were in their delivery journey by September 2024²⁸. The ongoing projects summary figure also summarises the performance of projects at very different stages of implementation. For instance, Social Prescribing in Northamptonshire has achieved a 24% of their primary outcome

²⁸ The project's performance chapter present interim targets for September 2024 for ongoing project, so readers will compare the performance against baseline targets and interim targets.

but they still deliver a service up to 2026. Midlands Regional Pause Hub continues until 2026 and has already overachieved their targets at 141%²⁹. Each project delivers a different intervention with distinct achievement and payment cycles, so all data for ongoing projects should be understood as interim data that may be updated in the coming years.

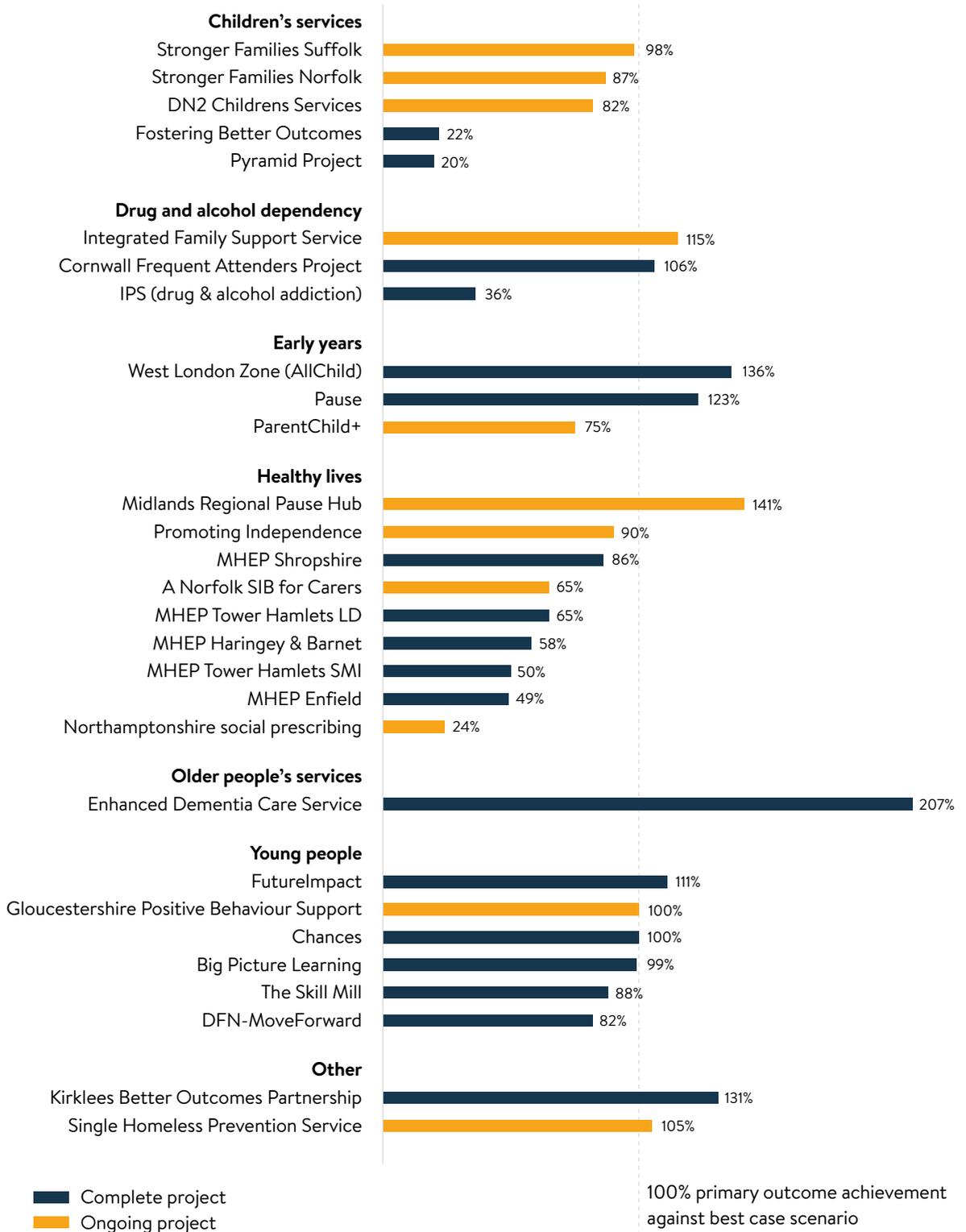
As noted above, it is not possible to directly compare outcome achievements between projects as they work with very different cohorts and outcome metrics. The following table presents an average of the achievements by policy themes, together with the number of projects falling under each policy theme.

Table 4.1 Primary outcome achievement by policy themes

Policy theme	Average	Min value for the group	Max value for the group	Number of projects	Average for complete projects
Children's services	62%	20%	98%	5 (2 complete, 3 ongoing)	21%
Drug and alcohol dependency	86%	36%	115%	3 (2 complete, 1 ongoing)	71%
Early years	111%	75%	136%	3 (2 complete, 1 ongoing)	129%
Young people	97%	82%	111%	6 (5 complete, 1 ongoing)	96%
Older people	207%	207%	207%	1 (1 complete)	207%
Healthy lives	70%	24%	141%	9 (5 complete, 4 ongoing)	62%
Other cross-cutting themes	118%	105%	131%	2 (1 complete, 1 ongoing)	131%

²⁹ Some of the ongoing projects started with the commitment of the local commissioner to sustain the service for longer than the LCF period, and some others were recommissioned or extended during the life of their contract with the LCF. The first group reported targets for the entire project that were agreed with the local commissioner from the beginning. The second group had to update their baseline form with new data after the extension. These updates presented different levels of granularity and in some cases, these updates were not recorded at all.

Figure 2 Primary outcomes achieved as a proportion of best-case scenario by project



Children's services

The children's services projects are the cluster with the lowest average outcome achievements (62%). This average summarises a diverse group of performances, with the Pyramid Project achieving 20% of their primary outcome and Stronger Families Suffolk achieving 98%. There is one key difference between the two Stronger Families projects (achieving 98% and 87% in Suffolk and Norfolk respectively), and the three other projects. Stronger Families is a model where the intervention aims to prevent family breakdown and avoid children going into the care system. Meanwhile, Fostering Better Outcomes and the Pyramid Project worked with cohorts of children in care or in the edge of care. These proved to be complex cohorts not just because of their vulnerability, but because of the structural problems around the lack of sufficient foster placements in England. DN2 Children's Services worked with four different cohorts of children, and they have also found that the most difficult to work with was the cohort of children in residential care who were looking for foster placements, as it was very challenging to find appropriate placements for them. The children's services projects addressing prevention were more successful than the ones working with children already in care. This is not necessarily a reflection of the performance of the partnership or the effectiveness of a certain intervention, but an indication of a structural problem around the lack of sufficient foster placements.

Healthy lives projects

The healthy lives group contains the highest number of projects. This group encompasses 5 complete Mental Health and Employment Partnership (MHEP) projects and 4 ongoing projects. The MHEP projects delivered an intervention based on IPS³⁰ (the same methodology as the project IPS Employment Support For People With Drug And Alcohol Addictions) and represent a diverse range of performance. For instance, the MHEP service in Shropshire achieved more than 86% (170 people) of its primary outcome baseline target (of 197 people), while the same service in Enfield achieved 49% (88 people, compared to target of 181). MHEP Tower Hamlets Learning Disabilities was the first time that an IPS service was provided for a cohort with learning disabilities. The project did not achieve its baseline targets, but generated substantial lessons about the feasibility of delivering this intervention for people with learning disabilities. MHEP Tower Hamlets Learning Disabilities, therefore, achieved its broader goal of understanding whether IPS is a viable methodology for this group³¹.

The rest of the healthy lives projects are continuing after 2024. For instance, Midlands Regional Pause Hub, Social Prescribing In Northamptonshire and Promoting Independence will deliver a service until 2026. A Norfolk SIB for Carers was contracted until 2025. All data for these projects should be understood as interim. Apart from Midlands Regional Pause Hub, which has already achieved more than 100% of initial targets, the other three projects have lower achievements against their targets, but this is due to the comparison against baseline targets for the entire life of the project.

As almost half of the healthy lives projects are still ongoing, it is not possible to offer a fair description of their achievements. The group of complete projects, all MHEP SOPs, had mixed performances when focusing on their primary outcome and comparing it against baseline targets. We note that the MHEP SOPs did not update their target from the original baseline set at the launch of the projects. These targets were ambitious and significantly higher than the caps set by commissioners. Projects may not have had sufficient incentives to dedicate their limited time to update targets that did not have financial implications. Even though the actual achievements were much lower than

³⁰ Individual Placement and Support (IPS) is an employment support approach that was originally developed for people experiencing mental health and addiction issues.

³¹ More details on the development of the MHEP social outcomes partnerships can be found in the in-depth MHEP evaluation reports published by the GO Lab. Access them [here](#).

targets, they are considered good performances when compared to other IPS services and the expectation of NHS England for IPS³². An in-depth analysis of the MHEP projects, performance and learnings can be found in the final report for the MHEP partnership.

Drug and alcohol dependency projects

The drug and alcohol dependency projects have an average achievement of 86%. Again, this group encompasses diverse performances. IPS Employment achieved 36% (276 people) of their primary outcome target (of 766 people), while Integrated Family Service Support achieved more than 100%. Integrated Family Service Support was designed to address the issue of children whose parents have issues with alcohol or substance misuse becoming looked after children, with part of its success due to delivering an intervention based on prevention rather than working with children already in care.

Cornwall Frequent Attenders and the IPS Service, meanwhile, had a more direct focus on cohorts with drug and alcohol addictions. Cornwall Frequent Attenders has been very successful in reducing the number of unnecessary visits to A&E services by people with alcohol addiction (106% achievement). IPS employment support for people with drug and alcohol problems has achieved 36% of their primary outcome target, but this figure can be framed as a success too. This is because 32% of the project's engaged service users went on to start a job, which is in line with what is considered a successful result in IPS literature³³. In this context, all alcohol and drug dependency projects could be considered as well performing interventions.

Young people's projects

The young people cluster encompasses 6 projects with an average achievement of 97%. Only one of these projects continues after 2024: Gloucestershire Positive Behaviour Support was contracted until 2029. Gloucestershire Positive Behaviour Support could have also been included under the theme of children's services projects, as this intervention supports young people displaying challenging behaviours, at risk of going into residential care.

The rest of the projects address different issues that affect young people, such as youth offending, those not in education, employment or training (NEET), learning disabilities and students with special needs. Many of these projects aim to place young people into employment or help them get ready for a job search. FutureImpact has helped 547 young people to go into full-time work, part-time work or volunteering (initial target: 670). DFN-MoveForward has helped 61 young people to go into work (initial target: 103). Although neither of these projects have achieved 100% of their initial targets, they faced challenging labour market conditions due to the COVID-19 pandemic.

One key learning emerging from these projects is the relevance of rewarding young people who get a part-time job. Most programmes tend to incentivise young people to go into full-time jobs due to the perceived advantages (higher salary, more time occupied, etc.). However, most of the LCF projects found that part-time employment works better for cohorts of young people with learning disabilities, special needs or other vulnerabilities. Part-time jobs allow them to adjust to working life and to other changes that might be going on with their lives. Full-time jobs were perceived as overwhelming for more vulnerable cohorts.

Chances and The Skill Mill had specific metrics for young people who have been offenders. In Chances, 573 service users who had offended once did not reoffend

³² NHS England (2023). Individual placement and support for severe mental illness. Access it [here](#).

³³ Whitworth, A. & Cullen, A. M. (2023). Evaluation of the WDP IPS Into Work service. Scottish Centre for Employment Research, Department for Work, Employment and Organisation, Strathclyde Business School, University of Strathclyde. Access it [here](#). (p.6).

again, and 116 service users who had offended three or more times did not reoffend again. In The Skill Mill, 203 service users who had offended before did not reoffend for 12 months after the end of the programme. Skill Mill achieved 82% of their initial no reoffending target. Chances did not achieve their non-reoffending targets, but this was due to a lack of ex-offenders in the referrals sent by local partners.

Early years interventions

The early years interventions present an average achievement of 111% of their primary outcome. Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings was grouped under this theme, but it could have been grouped under the healthy lives theme (together with Midlands Regional Pause Hub, the other project delivering the Pause programme).

West London Zone and ParentChild+ were the two projects with a direct focus on early years interventions. West London Zone has achieved more than 100% of their primary outcome target³⁴, while ParentChild+ has achieved 75%. However, ParentChild+ has an outcome tracking window that goes beyond September 2024. This is because they work with children aged 2-3 and learning improvements at Early Years Foundational Stage (EYFS)³⁵ level are measured when children turn 5 (among other reasons).

Other projects

Two projects were labelled as 'other cross-cutting themes': Single Homelessness Prevention Service and Kirklees Better Outcomes Partnership. They present a combined average of 118% achievement. The point in common for these projects is that they both work with people who are homeless or at risk of homelessness. Kirklees Better Outcomes Partnership works with other vulnerabilities and complex needs too, but their housing outcomes are the only comparable metric with Single Homelessness Prevention Service. 3,458 service users have achieved at least one accommodation outcome under the Kirklees Better Outcomes Partnership (target of 3,421 service users achieving at least one accommodation outcome). Accommodation outcomes include finding new accommodation, or sustaining the accommodation for 3 or 6 months. Through the Single Homelessness Prevention Service, 2,464 service users avoided becoming homeless and 4,313 have relieved their homelessness situation. Single Homelessness Prevention Service have not achieved their targets yet, as they are continuing after the LCF.

3.6 The Life Chances Fund projects and outcome payments

Table 5 shows the latest figures for maximum potential outcome payments, as recorded in the DCMS Data Portal. These figures might differ from the initial figures in Tables 1 and 2 as most of these projects requested variations of their payment profiles across the life of the service. The figures on actual outcome payments as of September 2024 were also sourced from the DCMS Data Portal. These might differ from the figures that projects have reported internally, given that some local commissioners kept paying for outcomes after September 2024. Table 5 marks with an asterisk (*) all cases in which the difference between the value reported in the Portal and those reported internally was larger than 5%. Overall, according to internal project reports, the outcome payments were £128,898,222, ie. about £3m more than those documented on the Portal. More details are provided, for each project, in the project chapters later in the report.

³⁴ The DCMS Data Portal could not support the level of detail required to capture granular data on West London Zone payment triggers. Thus, this primary outcome achievement is at the outcome metric level.

³⁵ The Early Years Foundation Stage (EYFS) Profile assessment is typically completed in the final term of the academic year in which a child reaches age 5. This assessment is a statutory requirement, meaning it is legally mandated for schools and early years settings to complete.

Table 5 Life Chances Fund projects, maximum potential outcome payment and total outcome payments from LCF and local commissioners

LCF theme	Name of project	Planned maximum potential outcome payments (LCF and commissioners)	Actual outcome payments up to Sep 2024 (according to DCMS Data Portal)	Percentage maximum outcome payment claimed
Children's services	Fostering Better Outcomes	£1,028,926	£964,058	94%
	Stronger Families Suffolk	£6,925,607	£4,710,609	68%
	Stronger Families Norfolk	£9,576,245	£8,626,543	90%
	Pyramid Project	£11,341,260	£1,066,524*	9%
	DN2 Children's Services Social Impact Bond	£9,123,323	£4,102,993	45%
Drug and alcohol dependency	Integrated Family Service Support	£5,331,000	£4,662,002	87%
	Cornwall Frequent Attenders	£2,226,336	£2,205,244	99%
	IPS Employment Support For People With Drug And Alcohol Addictions	£2,375,150	£2,072,296*	87%
Early years	Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	£1,623,872	£1,598,983	98%
	ParentChild+	£1,107,287	£1,107,197	100%
	West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	£16,244,960	£16,112,650*	99%
Young people	FutureImpact	£3,288,900	£3,103,050	94%
	DFN-MoveForward UK	£1,683,620	£1,644,120	96%
	Big Picture Learning in Doncaster	£6,194,792	£5,112,036	83%

LCF theme	Name of project	Planned maximum potential outcome payments (LCF and commissioners)	Actual outcome payments up to Sep 2024 (according to DCMS Data Portal)	Percentage maximum outcome payment claimed
Young people continued	The Skill Mill	£3,241,776	£3,176,810	98%
	Chances	£4,104,000	£3,878,283*	95%
	Gloucestershire Positive Behaviour Support	£1,774,925	£840,500	47%
Older people's services	Enhanced Dementia Care Service	£810,000	£810,000	100%
Healthy lives	MHEP Haringey And Barnet	£1,421,234	£1,431,647	101% ³⁶
	Promoting Independence	£2,744,750	£2,376,250*	87%
	Midlands Regional Pause Hub	£5,643,426	£4,933,934	87%
	MHEP Enfield	£620,689	£604,044	97%
	MHEP Tower Hamlets – Severe Mental Illness	£2,068,270	£1,724,693	83%
	MHEP Shropshire	£1,034,487	£1,034,487	100%
	MHEP Tower Hamlets – Learning Disabilities	£1,307,059	£1,243,387	98%
	A Norfolk Carers SIB	£11,872,775	£9,238,784	78%
	Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	£8,455,774	£2,991,017	35%
Other cross-cutting themes	Kirklees Better Outcomes Partnership	£22,297,917	£22,553,79	101% ³⁷
	Single Homeless Prevention Service	£17,113,000	£11,919,546*	70%
	Total:	£162,581,360	£125,845,483	77%

*denotes projects in which the value reported in the portal and those reported internally was larger than 5%.

³⁶ Some projects claimed more outcomes funding than their maximum potential outcome payment. This is because they negotiated an increase in the outcomes funding available from local commissioners after signing their contract with the LCF, and did not update the DCMS Data Portal on this change.

³⁷ Some projects claimed more outcomes funding than their maximum potential outcome payment. This is because they negotiated an increase in the outcomes funding available from local commissioners after signing their contract with the LCF, and did not update the DCMS Data Portal on this change.

As shown in Table 5, the LCF and local commissioners started with a commitment to use £162,581,360 as outcomes funding to support SOPs. As of September 2024, the LCF and local commissioners have spent £125,845,483 in outcome payments, which amounts to 77% of the total available funding. It is worth noting that there are 11 ongoing projects that are still delivering a service and will be drawing on the local component of this funding to claim for their outcomes. There are two ways of describing total payments for LCF projects. First, when comparing the total payments received by all projects against the maximum potential payments available for all projects, completed projects have claimed 85% of the available funding, while ongoing projects have claimed 70%. Second, when looking at payments claimed by individual projects (as a percentage of the maximum potential outcome payment), completed projects have claimed an average of 91% of available payments, compared with an average of 72% for ongoing projects.

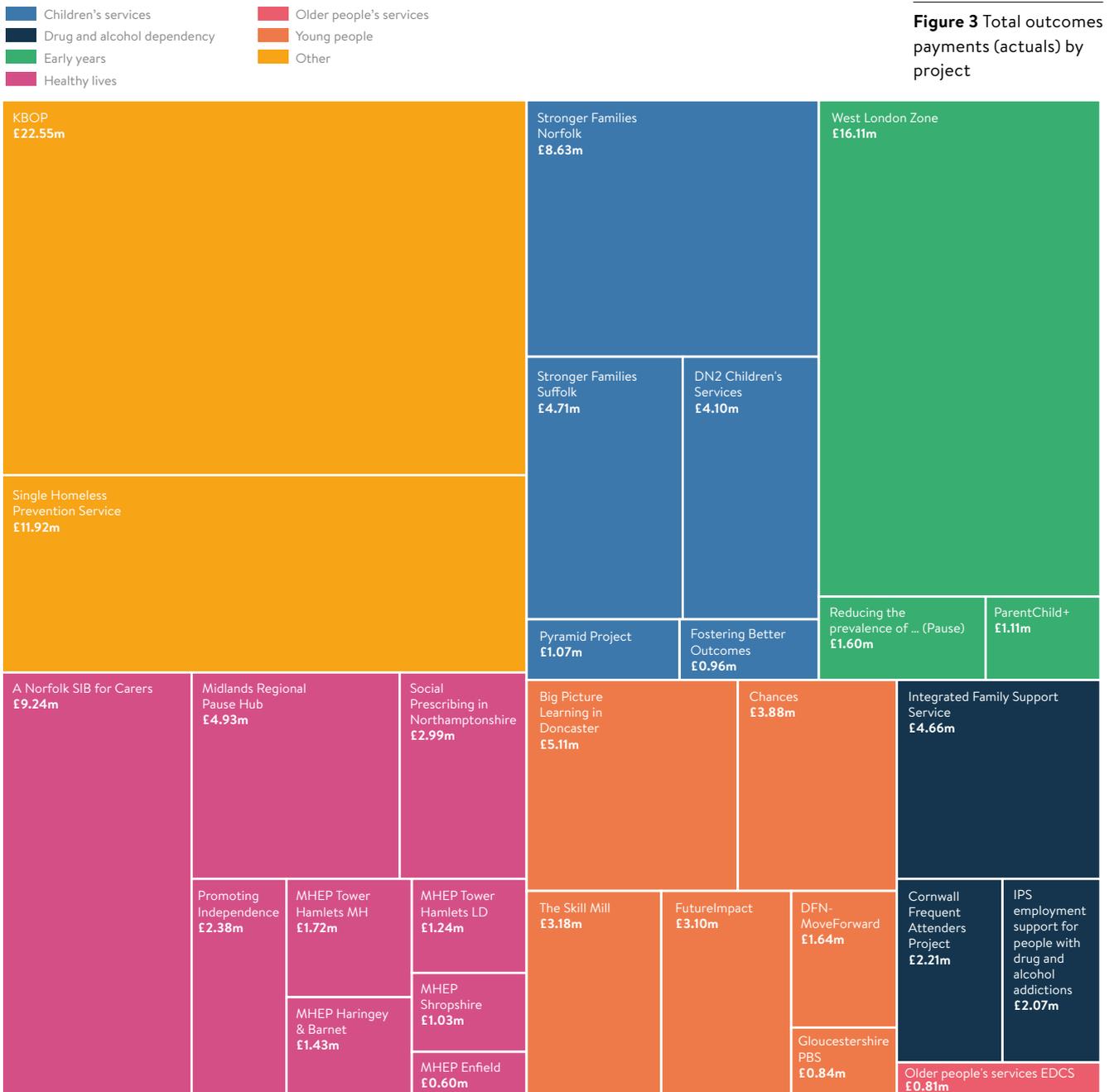
Table 5.1 shows the distribution of committed and actual outcome payments across policy themes. The projects with the highest amount of combined potential outcome payments are the two projects labelled as 'other cross-cutting themes': Single Homelessness Prevention Service and Kirklees Better Outcomes Partnership. They are followed by the children's services projects (5), the healthy lives projects (9), young people's projects (6), early years projects (3), drug and alcohol dependency (3) and older people's services (1).

Table 5.1 Committed and actual outcome payments across policy themes as recorded in the DCMS Data Portal

	Total maximum potential outcomes funding from LCF and local commissioners per policy theme	Total outcomes funding from LCF and local commissioners spent per policy theme	Average outcomes payment claimed by policy theme	Number of projects	Average outcomes payments claimed by complete projects
Children's services	£37,995,361	£19,470,727	61%	5 (2 complete, 3 ongoing)	52%
Drug and alcohol dependency	£9,932,486	£8,939,542	91%	3 (2 complete, 1 ongoing)	93%
Early years	£18,976,119	£18,818,830	99%	3 (2 complete, 1 ongoing)	99%
Young people	£20,288,013	£17,754,799	86%	6 (5 complete, 1 ongoing)	94%
Older people's services	£810,000	£810,000	100%	1 (1 complete)	100%
Healthy lives	£35,168,464	£25,578,243	85%	9 (5 complete, 4 ongoing)	95%
Other cross-cutting themes	£39,410,917	£34,473,342	85%	2 (1 complete, 1 ongoing)	101%
	£162,581,360	£125,845,483	77%	29 (18 complete, 11 ongoing)	85%

The early years and older people's services projects have claimed 99% or more of their potential outcome payment. The drug and alcohol dependency projects have claimed 91%. Young people's projects have claimed 86%. Healthy lives and "other cross cutting themes" have claimed 85%³⁸. The children's services projects have been the least successful in claiming their maximum outcome payments, having claimed for 61%. Again, these figures should be interpreted with caution as some projects decided to reprofile or lower their maximum potential outcome payment during delivery and some of the outcome payments were not recorded on the DCMS Portal. These changes make it easier for projects to achieve a higher percentage of outcome payments claimed.

38 There are four ongoing projects in the healthy lives group, so this percentage will be higher once they finish service delivery



3.7 The Life Chances Fund projects and social investment

SOPs include the provision of upfront capital by social investors. Table 6 shows the planned total investment and actual investment received for each LCF project.

LCF projects planned to leverage private investment totalling £29,348,038. Given the SOPs' capacity to adapt, investment commitment figures changed during the life of the fund, with some projects receiving different investment amounts than expected. In total, LCF projects received 93% of committed upfront capital. When complete and ongoing projects are considered separately, complete projects have used 93.1% of their planned investment and ongoing projects have used 93.4%.

Table 6 Life Chances Fund projects, planned and actual investment from social investors

Project name	Planned total investment commitment	Actual investment as reported in the EOG form ³⁹	Percentage investment received (actual vs planned)
Fostering Better Outcomes	£300,000	£0 ⁴⁰	0%
Stronger Families Suffolk	£1,400,000	£1,400,000	100%
Stronger Families Norfolk	£2,100,000	£2,100,000	100%
Pyramid Project	£925,562	£600,000	65%
DN2 Children's Services Social Impact Bond	£884,831	£884,831	100%
Integrated Family Support Service	£475,000	£445,000	94%
Cornwall Frequent Attenders Project	£407,000	£123,000	30%
IPS Employment Support For People With Drug And Alcohol Addictions	£400,000	£400,000	100%
Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	£1,100,000	£721,000	66%
ParentChild+	£100,000	£100,000	100%
West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	£1,400,000	£1,400,000	100%
FutureImpact	£498,000	£498,000	100%
DFN-MoveForward	£450,000	£400,000	89%
Big Picture Learning In Doncaster	£750,000	£750,000	100%
The Skill Mill	£1,100,000	£1,100,000	100%
Chances	£1,245,000	£1,250,000	100.4%

³⁹ Actual investment figures are only reported in end of grant forms and cannot be double-checked with other sources.

⁴⁰ The initial investment was channelled through a previous SOP, which made it difficult for the lead applicant to calculate the investment and investment return. The lead applicant preferred to report £0 instead of reporting a figure that they were not confident with.

Project name	Planned total investment commitment	Actual investment as reported in the EOG form ³⁰	Percentage investment received (actual vs planned)
Gloucestershire Positive Behaviour Support	£501,000	£501,000	100%
Enhanced Dementia Care Service	£345,000	£355,950	103%
Mental Health And Employment Partnership Haringey and Barnet	£227,000	£227,000	100%
Promoting Independence	£725,000	£800,000	110%
Midlands Regional Pause Hub	£2,150,000	£1,429,000	66%
Mental Health And Employment Partnership Enfield	£126,000	£126,000	100%
Mental Health And Employment Partnership Tower Hamlets SMI	£300,000	£300,000	100%
Mental Health And Employment Partnerships Shropshire	£204,000	£204,000	100%
Mental Health And Employment Partnership Tower Hamlets LD	£328,000	£328,000	100%
Norfolk Carers SIB	£2,500,000	£2,500,000	100%
Provision Of A Social Prescribing Framework And Offer At Scale Across Northamptonshire	£1,350,000	£1,480,000	110%
Kirklees Better Outcomes Partnership	£4,535,645	£4,847,427	107%
Single Homeless Prevention Service	£2,521,000	£2,087,921	83%
Total	£29,348,038	£27,358,129	93%

Table 6.1 presents the distribution of planned and actual investment amounts by policy themes. Most groups of projects have received all or most of the planned social investment. For instance, the healthy lives projects present an average of 98% of planned investment and the early years' projects have an average of 99%. The groups of projects that have received less investment than expected were the young people's projects (90% of planned investment) and children's services projects (61% of planned investment). There are three ongoing projects in the children's services group, which might indicate that this figure will increase in the remaining years of delivery.

Table 6.1 Planned and actual social investment amounts by policy themes

	Total planned social investment per policy theme	Actual social investment by policy theme	Average investment received by policy theme	Number of projects in policy theme	Average investment received by complete projects
Children's services	£5,610,393	£4,984,831	61%	5 (2 complete, 3 ongoing)	32%
Drug and alcohol dependency	£1,282,000	£968,000	95%	3 (2 complete, 1 ongoing)	65%
Early years	£2,600,000	£2,221,000	99%	3 (2 complete, 1 ongoing)	83%
Young people	£4,544,000	£4,499,000	90%	6 (5 complete, 1 ongoing)	98%
Older people's services	£345,000	£355,950	100%	1 (1 complete)	103%
Healthy lives	£7,910,000	£7,394,000	98%	9 (5 complete, 4 ongoing)	100%
Other cross-cutting themes	£7,056,645	£6,935,348	93%	2 (1 complete, 1 ongoing)	107%
Total	£29,348,038	£27,358,129		29 (18 complete, 11 ongoing)	

3.8 The Life Chances Fund projects and their return on social investment

All Life Chances Fund (LCF) projects included upfront capital from a third party as a requirement of the Fund. In LCF SOPs, this initial investment is provided by social investors and financial returns are made if social outcomes are achieved and evidenced as contractually agreed. In the UK, social investment for SOPs is typically made available by specialist fund managers. By pooling risks across a portfolio, social investors are able to balance potential short-term financial fluctuations in individual projects against cumulative long-term value creation. This aggregated approach allows investors to absorb temporary setbacks in particular projects, provided their overall portfolio achieves its intended social outcomes and maintains financial sustainability. Ultimately, this long-term portfolio perspective facilitates continuous capital deployment into SOP initiatives.

Projected investment returns were reported by projects in the LCF projects' baseline forms. In baseline forms, investment return was defined as 'the percentage return [of total investment commitment] that social investors stand to gain in the best-case scenario'. These figures were self-reported by projects, but it has become clear in the production of this report that projects did not use a consistent methodology in estimating projected or final returns. DCMS did not prescribe a method for calculating financial returns at the outset of data collection.

As a result of these data issues, we consulted Better Society Capital to fully explore the potential to report projected and actual investment returns through a consistent methodology for all 29 projects. Better Society Capital recommended using a "Money Multiple" (MM) methodology to understand returns.⁴¹

The money multiple measures the total amount of capital returned to the investor relative to the capital provided. It's calculated by dividing the total cash returned to the investor by the total cash provided. A money multiple of 1.0x means the project just returned the capital back to the investor; a multiple greater than 1.0x means that the project was able to repay more than the initial capital; a multiple smaller than 1.0x means that the investor received back only a percentage of the original capital (eg. 0.8x means that the investor recovered 80% of the capital).

Money multiples are relatively easy to understand and helpful in the context of a socially motivated investor which is not driven by maximising profit. It is important, however, not to interpret the money multiple measures as annual returns. To estimate annual returns, it would be necessary to take into account the exact timeline of when money has been provided and paid back. For instance, consider two hypothetical projects with a money multiple of 1.5x, project A and project B. Project A has an initial investment of £1,000, lasts for one year, returning £1,500 at the end of the year. The money multiple is 1.5x and the approximate annual return 50%. Project B also has an initial investment of £1,000, returning £1,500 at the end of the project, but has a duration of 5 years. In project B the approximate annual return is about 8.5%.

⁴¹ The final synthesis report of the Commissioning Better Outcomes Fund also provides returns information in the form of a money multiple. Adopting the money multiple in LCF reporting therefore supports comparison.

Better Society Capital were able to capture final actual (outturn) money multiples for 20 of the 29 LCF projects, and forecast money multiples for 6 projects. We do not have data on 3 projects. Table 7 is provided by BSC and shows complete projects have a median net money multiple of 1.04, meaning most completed projects were able to repay more than the initial capital back to the investor. For 6 ongoing projects, we estimate a median net money multiple of 0.9-1.18. Different projects have still calculated these on a different basis, so although more consistent than original data, these figures should only be taken as an indication, they can not be used to inform bidding for outcomes contracts or investment into them.

Table 7 Life Chances Fund project money multiples for complete and ongoing projects

Note: Table provided by BSC. *includes 7 LCF projects, however, 2 of these projects are treated as 1 transaction by the investor and considered as a single unit for the purposes of this analysis.

	Completed projects, actuals (Net MM)	Ongoing projects, forecasts (Net MM)
Lower quartile	0.74	0.73-1.11
Median	1.04	0.9-1.18
Upper quartile	1.16	1.08-1.21
Projects/ transactions	14	6*

Discussion of LCF investment and return on investment provided by Better Society Capital

Better Society Capital (herein BSC, formerly known as Big Society Capital) is the UK's leading social impact-led investor. Our mission is to improve the lives of people in the UK, with a focus on disadvantaged or underserved individuals, through growing the amount of money invested in tackling social issues and inequalities. We believe social outcomes contracts could play a key role in delivering this mission – this has led us to become the largest institutional investor into the UK SOPs market over the last 15 years.

Fund managers, and the funds they raise, are the principal conduits through which most social investment is raised and channelled into social outcomes contracts, including those from the LCF. These specialist funds bring together funding and expertise to maximise impact at project level, including through coordination of delivery partners, adaptive management and supporting delivery partners to implement delivery innovations where relevant. The investors into these funds are socially motivated to use their capital to tackle some of the most difficult problems facing people in the UK. They are actively seeking investments where financial performance is achieved in tandem with impact performance and achievement of outcomes.

Most social outcomes contracts in the UK have been invested into through these specialist funds. A consequence of this is that individual or aggregate project-level returns are not reliable indicators of fund-level investor returns – they do not take account of fund-level costs and expenses and where they try to, there has not been a consensus approach for how to attribute these costs to individual projects across the funds that invest in LCF SOC. Currently, these investment funds are still active and invest into social outcomes contracts that also are not from the LCF. Therefore, current fund level returns are also not indicative of returns made from LCF SOC. Whilst acknowledging these limitations in the data, to give an indication, BSC expects to generate a low-to-mid single digit return per annum on its capital invested directly into SOC and through SOC funds to date overall (including both LCF and non-LCF SOC)⁴².

42 Outcomes For All Report, BSC Please note this is based on the Big Society Capital portfolio of completed investments and forward-looking projections of current investments and is not necessarily representative of the likely performance of the wider SOC market.

To better understand investment and financial returns in future outcomes funds, the SOP community may wish to jointly develop a shared set of definitions, methods and reporting expectations. Some fund managers are developing an approach for allocating costs so that there is a more standardised approach to fees, charges and investment structures at a project level. A neutral convening and development space could be used to further prototype SOP investment definitions and reporting norms. In future, this would mean that project-level investment and financial returns information could be published in a comparable and granular format.

LCF EVALUATION REPORT

CHILDREN'S SERVICES PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
Fostering Better Outcomes	June 2018	Cheshire West and Chester	DCMS Data Portal	
Stronger Families Suffolk	January 2019	Suffolk	DCMS Data Portal	✓
Stronger Families Norfolk	February 2019	Norfolk	DCMS Data Portal	✓
Pyramid Project Staffordshire	April 2020	Staffordshire, Telford and Wrekin, Warwickshire, Sandwell, Stoke on Trent, Surrey, Worcestershire, Wolverhampton, and Dudley.	Outcomes: end of grant form – self-reported by project stakeholders Payments: DCMS Data Portal	
DN2 Children's Services Social Impact Bond	October 2020	Nottinghamshire and Derbyshire	DCMS Data Portal	✓

ONE

FOSTERING BETTER OUTCOMES

 **Project delivery dates:**
June 2018 – June 2024

 **Location:**
Cheshire West and Chester

 **Planned size of cohort:**⁴³
30 service users
Actual size of cohort:
12 service users

 **Planned investment commitment:**
£300,000
Actual investment committed:
£0⁴⁴

 **Summary:**
Fostering Better Outcomes aimed to reduce the number of children in residential placements by 'stepping down' to specialist foster care, thereby offering an intensive, therapeutic and family-based support package. The project sought to reduce the number of children and young people entering residential placements through a preventative approach.

 **Involved organisations:**

- Commissioners: Cheshire West and Chester Council and Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management⁴⁵
- Service providers: Core Assets Group
- Intermediaries: Bridges Fund Management

 **Maximum potential outcome payments under the LCF (from the LCF and Commissioners):**
£1,028,926
Total outcome payments under the LCF (from the LCF and Commissioners):
£964,058 [LCF: £207,273 (21%)]

 **Primary outcome:**
Supporting children and young people in foster care, as an alternative to residential care.

- Planned achievement: to support 30 children and young people
- Actual achievement: 9 children and young people supported

43 In the end of grant form, the project reported aiming for a cohort of 12 people

44 The initial investment was channelled through a previous SOP, which made it difficult for the lead applicant to calculate the investment and investment return. The lead applicant preferred to report £0 instead of reporting a figure that they were not confident with.

45 Bridges Fund Management is now known as Bridges Outcomes Partnerships.

OUTCOME METRICS

Table 1.1 Outcome metrics for Fostering Better Outcomes

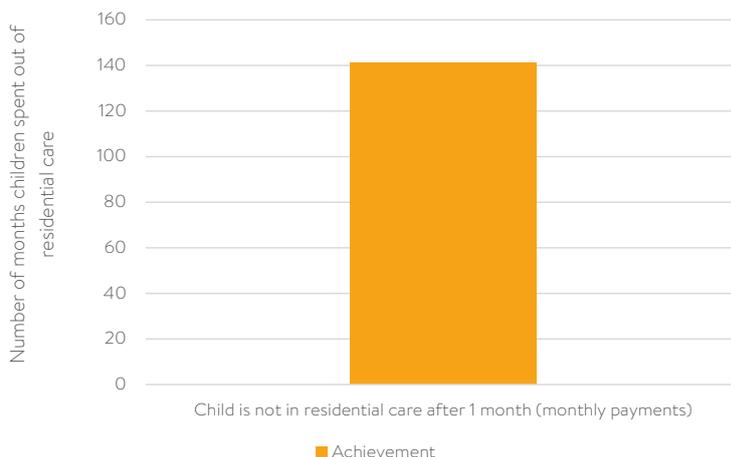
Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: supporting children and young people in foster care, as an alternative to residential care. Primary Outcome.	PT1: child is not in residential care paid monthly after 1 month for up to 2 years	£5,262
	PT2: child is not in residential care after 12 months: one payment after 12 months	£32,000
	PT3: child is not in residential care after 24 months: one payment after 24 months	£30,000

Table 1.1 shows the latest outcome metric structure for Fostering Better Outcomes. This structure has not changed during the life of the project. The only variation that the project went through was a reduction of the LCF award, which was reduced from £939,000 to £221,219 (April 2023). This reduction was due to TNLCF asking projects to recalculate their outcome payment expectations in 2023, to ensure that TNLCF had a more realistic idea of the amount of outcome payments that could be claimed before the end of the LCF.

An important feature of this structure is the different timings for payments. PT1 pays on a rolling monthly basis, whereas PT2 and PT3 are 'anniversary payments', meaning that they can only be triggered once after 12 and 24 months. PT2 and PT3 reward placement stability.

Outcome achievements and results

Figure 1.1 Outcomes achieved by Fostering Better Outcomes between 2018 and 2024 linked to payment trigger 1



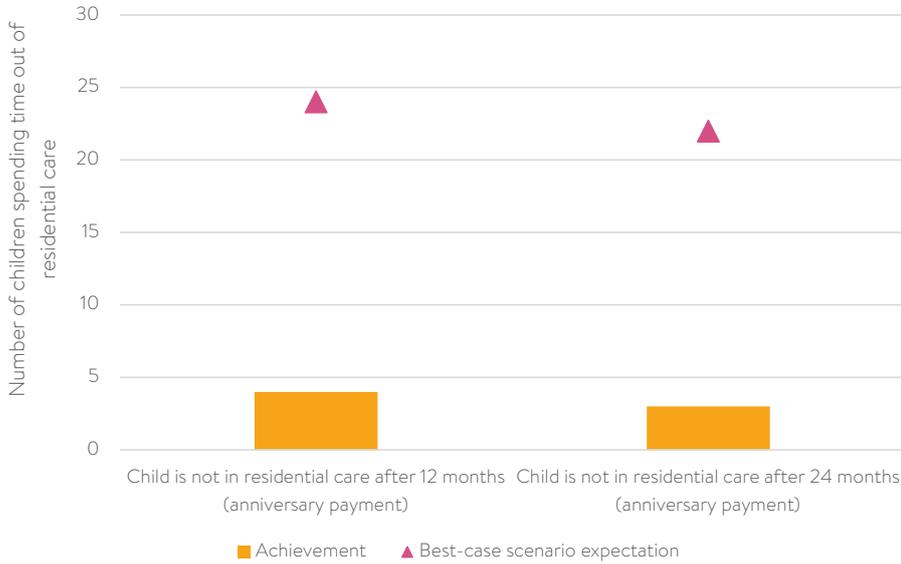


Figure 1.2 Outcomes achieved by Fostering Better Outcomes between 2018 and 2024 linked to payment triggers 2 and 3

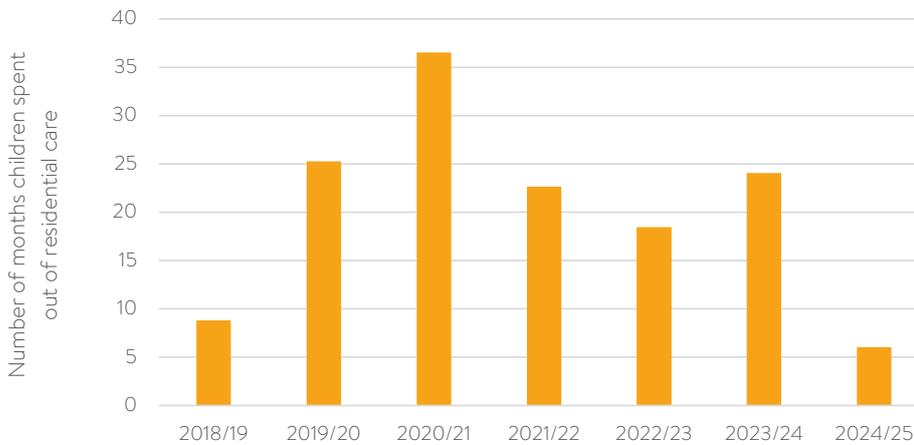


Figure 1.3 Outcomes linked to payment trigger 1 achieved by Fostering Better Outcomes across fiscal years 2018/19 to 2024/25

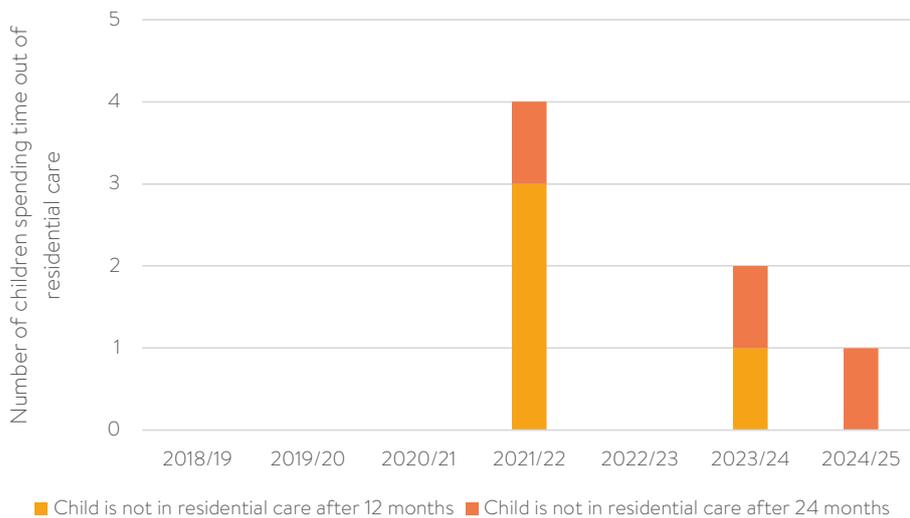


Figure 1.4 Outcomes linked to payment triggers 2 and 3 achieved by Fostering Better Outcomes across fiscal years 2018/19 to 2024/25

The outcomes for Fostering Better Outcomes are better visualised separately due to the different units of analysis. Payment trigger 1 can be triggered on a rolling monthly basis, as it pays for every month a child is out of residential care up to 2 years. Payment trigger 1 can be triggered several times for the same child. Payment triggers 2 and 3 can be triggered only once for each child, when a child reaches 12 months and 24 months out of residential care, respectively.

Figure 1.1 shows the achievements for payment trigger 1, which was triggered 141 times across the life of the programme. In end of grant form, the project stated that 9 children achieved this metric (30% of best-case scenario target). The best-case scenario target for payment trigger 1 was 30 children.

Figure 1.2 shows the achievements for payment trigger 2 and payment trigger 3. 4 children reached 12 months out of residential care and 3 children reached 24 months out of residential care.

The project has not achieved their best-case scenario target. In the end of project reporting, Fostering Better Outcomes explained that there are a number of reasons behind this underperformance. The main challenge was identified as the insufficient availability of skilled, experienced and resilient foster carers. Additionally, the project faced disrupted placements where carers lacked experience and understanding or did not fully engage with the agreed therapeutic approach. These difficulties meant that some children experienced the breakdown of placements. Towards the end of the programme there was some loss of model fidelity in the role of the therapist, progress meetings and wrap-around support, impacting on the effectiveness of support provided.

Figures 1.3 and 1.4 present the distribution of outcomes across fiscal years. Figure 1.3 shows number of months children spent out of care (linked to payment trigger 1) and Figure 1.4 shows number of children out of care (linked to payment triggers 2 and 3).

Outcome payments and project's costs

Figure 1.5 Outcome payments paid to Fostering Better Outcomes between 2018 and 2024

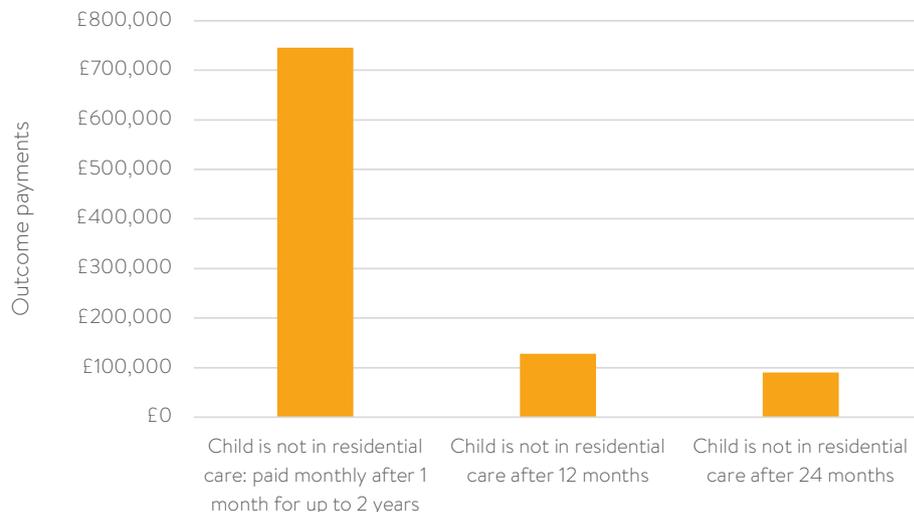




Figure 1.6 Outcome payments paid to Fostering Better Outcomes across fiscal years 2018/19 – 2024/25

Figure 1.5 shows outcome payments for Fostering Better Outcomes. In total, the project received £746,058 for payment trigger 1, £128,000 for payment trigger 2 and £90,000 for payment trigger 3. Total outcome payments under the LCF for this project were £964,058.

Figure 1.6 presents the distribution of outcome payments across fiscal years.

	Planned	Actual
Total investment commitment	£300,000	£0
Maximum outcome payments	£1,028,926.00	£964,058

Table 1.2 Planned and actual investment and maximum potential outcome payment

In end of project reporting, the project explained that the investment cost for this project was £0. This was because they considered this contract as a continuation of the Birmingham Step Down Programme, a previous SOP with the same provider aimed at providing foster placements to children in residential care. The initial investment was channelled through that previous SOP, which made it difficult for the project to calculate the investment. The project claimed 94% of their maximum potential outcome payment (which was reduced from £4,362,000 to £1,028,926 in 2023).

Table 1.3 Project's
cost distribution

	Planned	Actual
Investment cost	£38,070 (4%)	£0 (0%)
Management cost	£31,896 (3%)	£31,896 (3%)
Evaluation and learning cost	£30,000 (3%)	£19,900 (2%)
Delivery cost	£927,926 (90%)	£958,695 (95%)
Total cost	£1,027,892 (100%)	£1,010,491 (100%)

Table 1.3 shows the cost distribution for Fostering Better Outcomes. As this project is a continuation of a previous SOP in Birmingham, it was difficult for the project to calculate investment and management costs. The lead applicant preferred to report investment cost at £0 and left the management cost as the baseline figure. The evaluation and learning cost was reduced to £19,900 due to the reduced scale of young people on the programme. The delivery cost was approximately £30,000 higher than anticipated.

TWO

STRONGER FAMILIES SUFFOLK⁴⁶



Project delivery dates:

March 2019 –
March 2026⁴⁷



Location:

Suffolk



Planned size of cohort:

542 service users

**Planned size of cohort
by September 2024:**

461 service users

**Actual size of cohort
by September 2024:**

448 service users



**Planned investment
commitment:**

£1,400,000

**Actual investment
committed:**

£1,400,000



Summary:

Stronger Families Suffolk is a whole family-based intervention using Functional Family Therapy. It enables families to address challenging patterns of behaviour and communication in order to build their capacity for sustainable, positive change. The service was aimed at supporting children aged 8 to 16, and 17-year-olds with the commissioner's consent, who were either at risk of entering care or in the process of returning home after time in care.



Involved organisations:

- Commissioners: Suffolk County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Family Psychology Mutual
- Intermediaries: ATQ Consultants⁴⁸



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£6,925,607

**Expected outcome payments under the LCF by September 2024
(from the LCF and commissioners):**

£4,374,624

**Total outcome payments under the LCF received by September 2024
(from the LCF and commissioners):**

£4,710,609 [LCF: £658,112 (14%)]



Primary outcome:

To avoid the need for sustained care through the delivery of an evidenced-based therapeutic intervention, Functional Family Therapy.

- Planned achievement for August 2025: 251 children sustainably avoid the need for care
- Planned achievement by September 2024: 282 children sustainably avoid the need for care⁴⁹
- Actual achievement by September 2024: 277 children sustainably avoided the need for care

⁴⁶ In the DCMS Data Portal, this project is identified as 'Outcomes Based Contract for Children at Risk of Care'.

⁴⁷ Suffolk County Council has extended the original three-year contract twice. The current contract's referral period (during which new referrals will be accepted) runs to September 2025, with a remaining operational period during which the interventions are delivered to March 2026 then a tail of 18 months until the outcome payments end.

⁴⁸ ATQ were engaged in the early stages of the project up to Full Award Set Up.

⁴⁹ The planned achievement for September 2024 is higher than the planned achievement for August 2025 due to the further allocation of funding in March 2021.

OUTCOME METRICS

Table 2.1 Outcome metrics for Stronger Families Suffolk

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: to avoid the need for sustained care. Primary Outcome.	PT1: children on the edge of care sustainably avoid the need for care. Paid at 14 weeks after referral and then paid quarterly each day for up to 2 years.	£3,736 paid at 14 weeks after referral and then paid quarterly at a rate of £20 each day for up to 2 years.
	PT2: further allocation – Children on the edge of care sustainably avoid the need for care. Paid after intervention completion and then paid quarterly each day for up to one and a half years.	£3,642.60 paid for intervention completion and £26 paid for each day the child remains out of care for one and a half years.
Metric 2: to reunify children that have entered care with their family/wider network, when it is safe and appropriate to do so.	PT3: children are sustainably reunified with their family/wider network. Paid at 14 weeks after referral and then paid quarterly each day for up to 2 years.	£5,198 paid at 14 weeks after referral and then paid quarterly at a rate of £28 each day for up to 2 years.
	PT4: further allocation – children are sustainably reunified with their family/wider network. Paid after intervention completion and then paid quarterly each day for up to one and a half years.	£5,068.25 paid for intervention completion and £36.40 paid for each day the child remains out of care for one and a half years.

Table 2.1 shows the latest outcome metric structure for Stronger Families Suffolk. This structure changed in March 2021 when Stronger Families Suffolk received a further allocation from the LCF and the local commissioner to extend the referral period by 18 months. It has since also been extended again for a further 24 months of referrals in 2023. They created payment triggers 2 and 4 which modified the completion and day rates to reflect that the tracking period was shortened from 24 months to 18 months.

Outcome achievements and results

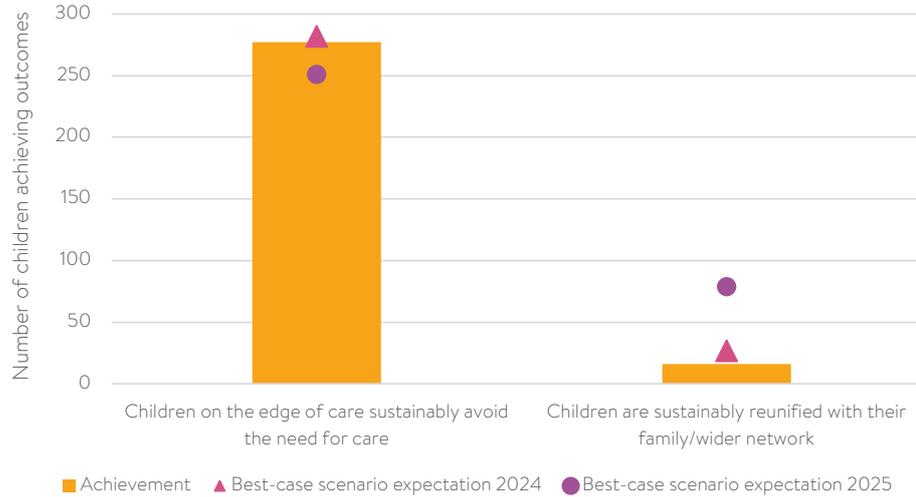


Figure 2.1 Outcomes achieved by Stronger Families Suffolk (up to September 2024)

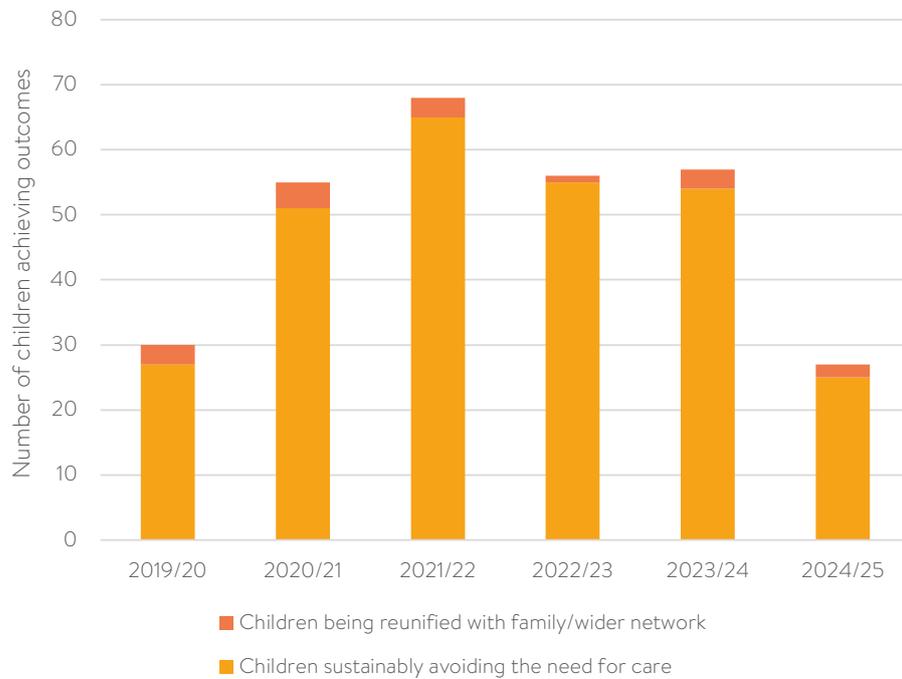


Figure 2.2 Number of children and young people achieving outcomes with Stronger Families Suffolk across fiscal years 2019/20 – 2024/25⁵⁰

⁵⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Stronger Families Suffolk will deliver services until March 2026. This data should be read as interim data up to September 2024⁵¹.

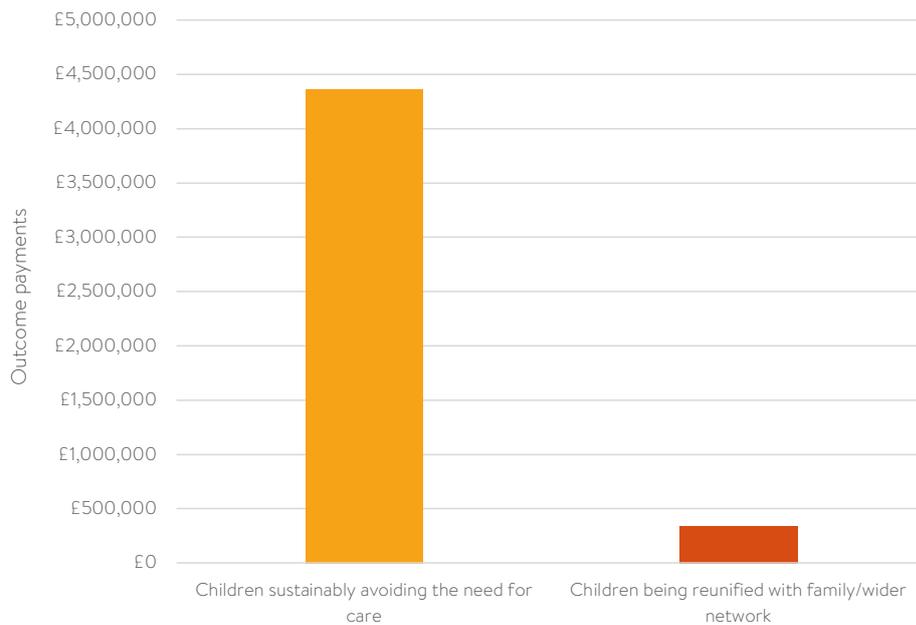
Figure 2.1 shows outcome achievements and best-case scenario targets for Stronger Families Suffolk. As of September 2024, the size of the cohort for Stronger Families Suffolk is 448 service users (including children and family members). 277 children sustainably avoided the need for care and 16 children on the edge of care were reunified with their families or wider network. The project shared their internal targets for September 2024, represented by orange triangles. Stronger Families Suffolk have achieved their internal target for metric 1: children sustainably avoiding the need for care, and were very close to achieving the 2024 target for metric 2: children sustainably reunified with family/wider network.

Figure 2.2 shows the number of children avoiding care and being reunified with their family. In total, 277 children have sustainably avoided care and have spent 152,454 days out of care and 16 children have been reunified with their families/wider networks and have spent 8,696 days in reunification.

The project explained that a number of factors supported the achievement of stability rates. The delivery partnership was committed to reshaping and increasing the size of the team (when needed) to adapt to the needs of different families. In addition, programme managers spent time with children's services in Suffolk County Council to develop referral panels and processes to ensure that Stronger Families can support all families who needed support. The programme developed different processes to embed learnings from implementation.

Outcome payments and project's costs

Figure 2.3 Outcome payments paid to Stronger Families Suffolk



⁵¹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

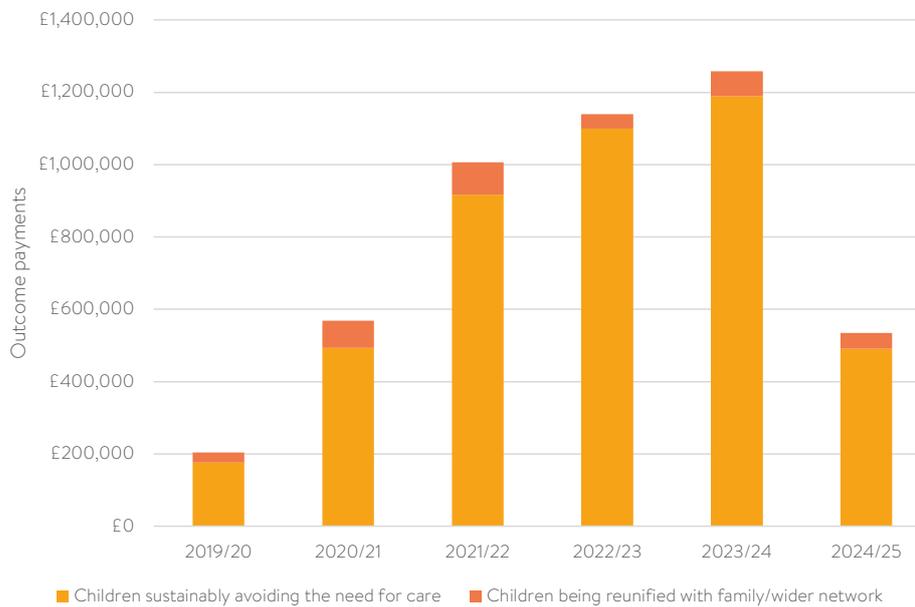


Figure 2.4 Outcome payments paid to Stronger Families Suffolk across fiscal years (2019/20 – 2024/25)⁵²

Figure 2.3 shows the Total outcome payments under the LCF received by Stronger Families Suffolk up to September 2024. In total, the project received £4,366,342 for children avoiding care and £344,267 for children being reunified with their families.

Figure 2.4 presents the distribution of outcome payments across fiscal years. Stronger Families Suffolk received £203,542 in 2019, £568,434 in 2020, £1,006,085 in 2021, £1,138,983 in 2022, £1,258,739 in 2023 and £534,826 in 2024, amounting to a total of £4,710,609.

	Planned (up to Sept 2024)	Actual (up to Sept 2024)
Total investment commitment	£1,400,000	£1,400,000
Maximum outcome payments	£4,374,624 (expectation by Sep 2024)	£4,710,609 (interim data up to September 2024)

Table 2.2 Planned and actual investment and maximum potential outcome payment

Table 2.2 shows that investors have committed the same amount of capital as originally expected.

As of September 2024, the project expected to achieve outcomes of £4,374,624 from both the LCF and the local commissioner. The project had actually achieved outcomes of £4,710,609. The project reported that financial performance up to September 2024 had exceeded targets, and the programme continues to operate with the aim of achieving full planned outcomes which should enable the repayment of social investment funding.

⁵² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 2.3 Project's cost distribution

	Planned for entire project up to 2026	Planned (up to September 2024)	Actual (up to September 2024)
Investment cost	£646,835	£0	£0
Management cost	£189,198	£26,071 (0.6%)	£26,074 (0.6%)
Evaluation and learning cost	Not reported in grant baseline form	£52,075 (1.1%)	£52,075 (1.1%)
Delivery cost	£5,865,985	£4,548,175 (98.3%)	£4,395,897 (98.3%)
Total cost	Not reported in grant baseline form	£4,626,321 (100%)	£4,474,046 (100%)

Table 2.3 shows costs that the project planned and incurred. It is not possible to construct the total forecasted cost, as the cost of evaluation and learning had not been established at the beginning of the project. It was mandatory to have an external evaluation for each project, but projects could take some time to decide on their evaluation approach.

As Stronger Families Suffolk is still delivering services, the project has provided their expected costs for September 2024. The project has not spent any funding on investment costs, due to the programme having access to pro-bono support for legal fees and delivery partnership set up. The project now has an evaluation plan in place, which costed £52,075. The delivery cost was expected to be at £4,548,175 by September 2024, but it was at £4,395,897, due to some cost savings compared to initial budgets. In total, the project was expected to cost £4,626,321 by September 2024 but costed £4,474,046.

The difference between the total amount of outcome payments received and the September 2024 cost of the programme is £236,563. This amount remains in the programme to be used for ongoing delivery of the service, repayment of loans, and payment of cost of funding to social investors as appropriate (depending on the outcome achievement) over the remainder of the project.

THREE

STRONGER FAMILIES NORFOLK



Project delivery dates:

February 2019 – February 2028



Location:

Norfolk



Planned size of cohort (up to June 2025):

436 families⁵³

Planned size of cohort (up to Sept 2024):

399 families

Actual size of cohort (up to Sept 2024):

404 families



Planned investment commitment:

£2,100,000

Planned investment commitment (up to Sept 2024):

£2,100,000

Actual investment committed:

£2,100,000



Summary:

Stronger Families Norfolk enables families to address challenging patterns of behaviour and communication in order to build their capacity for sustainable, positive change. They work to prevent family breakdown and give families the tools to cope, so that children can remain safely with their families and experience reduced involvement with children's services. They support children and young people aged 6-15, on the edge of care (ie. who are at risk of being taken into care) or already in care due to abuse or neglect. The systemic therapy used is Family Functional Therapy – Child Welfare (FFT-CW).



Involved organisations:

- Commissioners: Norfolk County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Family Psychology Mutual (Functional Family Therapy LLC)
- Intermediaries: Bridges Fund Management



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£9,576,245

Expected outcome payments under the LCF by September 2024 (from the LCF and commissioners):

£8,509,977

Total outcome payments under the LCF received by September 2024 (from the LCF and commissioners):

£8,626,543 [LCF: £1,617,248 (19%)]



Primary outcome:

Prevention of families from breaking down and young people/children from entering care

- Planned achievement (up to June 2025): 166,748 days of care saved
- Planned achievement (up to Sep 2024) 141,951 days of care saved
- Actual achievement (as of Sep 2024): 145,852 days of care saved

⁵³ Planned size of cohort was specified at the start of the project. The project has been extended and by the end of their programme, they expect to engage with over 600 families.

OUTCOME METRICS

Table 3.1 Outcome metrics for Stronger Families Norfolk

Outcome metric	Payment trigger	Price per payment trigger (per day out of care)
Metric 1: prevention of families from breaking down and young people/ children from entering care. Primary Outcome.	PT1: days out of care (For the edge of care cohort, a 33% Deadweight will be applied. For the cohort in care, no deadweight will be applied.) To be paid for up to 18 months.	£55

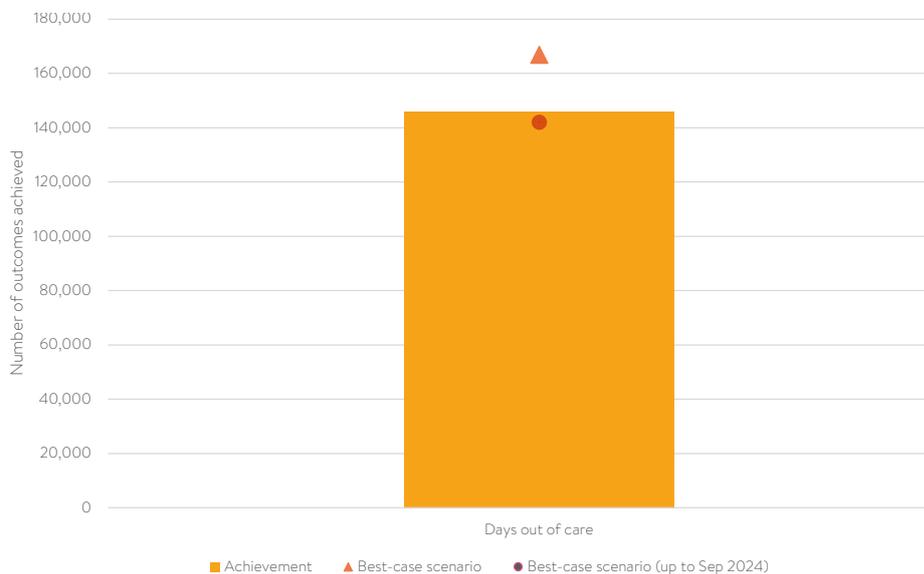
Table 3.1 shows the latest outcome metric structure recorded for Stronger Families Norfolk. This metric and payment trigger structure has changed its tracking period to 2 years and 11-months and then to 18-months in August 2023. Furthermore, from July 2023 onwards, some days out of care for the children that were reunified with their families were charged at a different price (£107 and £80), as these were considered harder to achieve than other outcomes.

This project works with two cohorts: the edge of care cohort and in-care cohort. Both cohorts have children aged 6 to 15.

Payment trigger 1 indicates that a 33% deadweight is applied to all achievements (days out of care) for the edge of care cohort. This occurs before reporting achievements to the DCMS Data Portal.

Outcome achievements and results

Figure 3.1 Outcomes achieved by Stronger Families Norfolk between 2019 and 2024



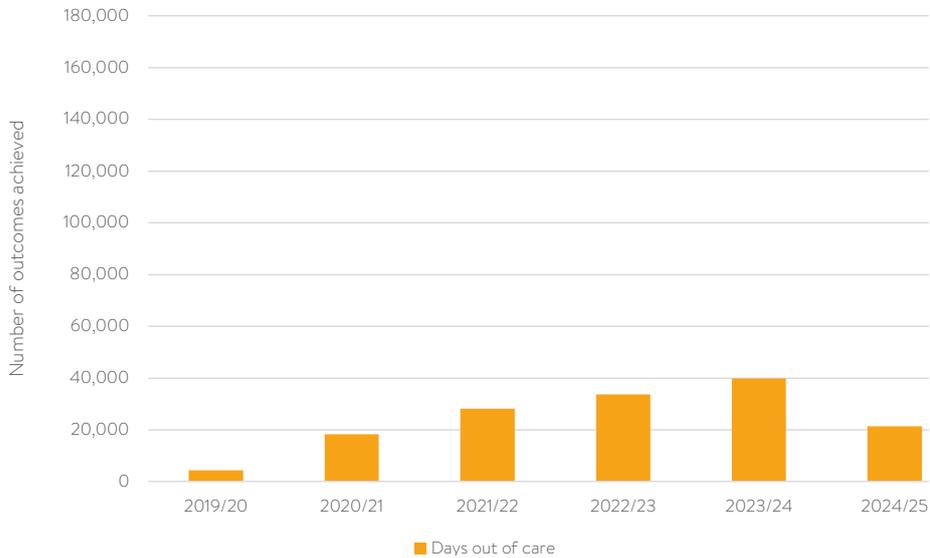


Figure 3.2 Outcomes achieved by Stronger Families Norfolk across fiscal years 2019/20 – 2024/25⁵⁴

Figure 3.1 shows outcome achievements and the best-case scenario target for Stronger Families Norfolk between 2019 and 2024. Stronger Families Norfolk is an ongoing project. All data shown in Figures 3.1 to 3.4 should be understood as interim data up to September 2024.

As of September 2024, the project worked with a cohort of 404 families and achieved 145,852 days of care saved, exceeding the expectations for September 2024 which were 141,951 days of care saved. The overall target for the project is to save 166,748 days of care. This overall target was set when the project was contracted to deliver services until June 2025 with funding from the Council, so this target may have since been revised.

According to end of project reporting, 92% of families supported by the service have remained together. The project explained that this stability rate can be explained by a number of factors. The delivery partnership was committed to reshaping and increasing the size of the team (when needed) to adapt to needs of different families. In addition, programme managers spent time with children’s services in Norfolk County Council to develop referral panels and processes to ensure that Stronger Families could support all families for whom that was the needed support and that processes were developed to embed learnings from implementation.

Figure 3.2 shows the distribution of outcome achievements across fiscal years, with the highest achievements occurring in 2023/24. The project has noted that higher outcomes are expected to be achieved in 2024/25, but this report only includes half of the annual reporting cycle (up to Sept 2024).

⁵⁴ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Outcome payments and project's cost

Figure 3.3 Outcome payments for Stronger Families Norfolk between 2019/20 and 2024/25

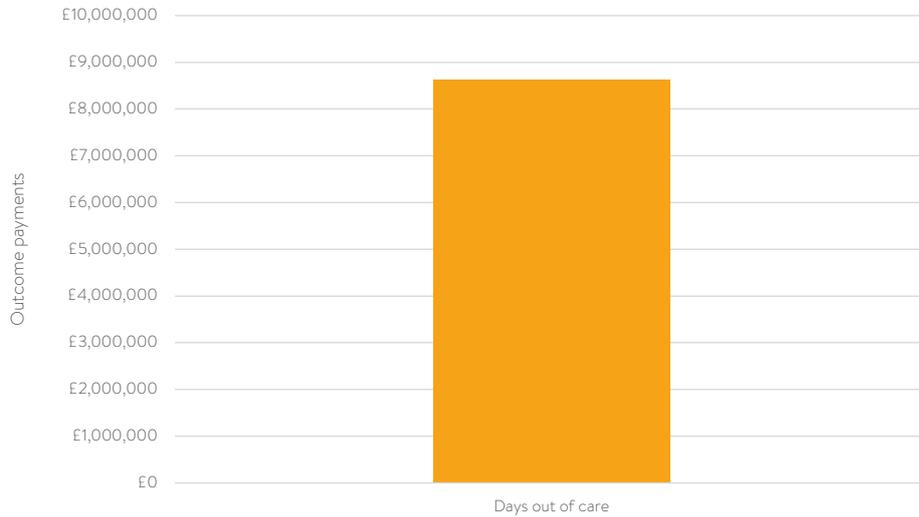


Figure 3.4 Outcome payments for Stronger Families Norfolk across fiscal years 2019/20 – 2024/25⁵⁵

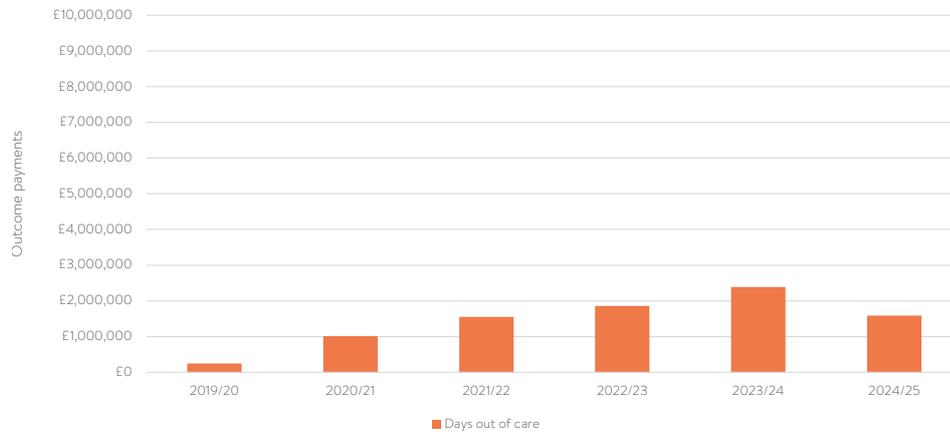


Figure 3.3 shows outcome payments for Stronger Families Norfolk between 2019 and Sept 2024. The project received £8,626,543 for care days saved. Figure 3.4 shows the distribution of outcome payments across fiscal years, with 2023/24 being the year with the highest number of outcome payments.

⁵⁵ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

	Planned	Planned (up to Sep 2024)	Actual
Total investment commitment	£2,100,000	£2,100,000	£2,100,000
Maximum outcome payments	£9,576,245	£8,509,977	£8,626,543

Table 3.2 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

As Stronger Families Norfolk is an ongoing project, Tables 3.2 and 3.3 show the plans according to the baseline estimates that the project shared at the beginning of their engagement with the LCF ('planned' column), their expectations for the project as of September 2024 ('planned up to Sep 2024') and their current status as of September 2024.

Table 3.2 indicates that the project has drawn down as much investment as expected. Stronger Families Norfolk has received £8,626,543 for outcome payments from the LCF and local commissioner.

	Planned	Planned (up to Sep 2024)	Actual
Investment cost	£273,210 (3%)	£0 (0%)	£0 (0%)
Management cost	£648,865 (8%)	£27,190 (0.4%)	£24,564 (0.3%)
Evaluation and learning cost	£40,000 (1%)	£40,000 (0.5%)	£40,000 (0.5%)
Delivery cost	£7,144,424 (88%)	£7,783,486 (99.1%)	£7,656,758 (99.2%)
Total cost	£8,106,499 (100%)	£7,850,676 (100%)	£7,721,322 (100%)

Table 3.3 Project's cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 3.3 indicates that the project's actual costs were in line with their expectations for September 2024. The project reported an investment cost of £0 as they had accessed pro-bono support for legal advice and SPV set up. Management costs were lower than expected as a portion of that funding was reallocated to support delivery innovations. In total, the project cost £7,721,322 as of September 2024.

FOUR

THE PYRAMID PROJECT – STEP DOWN FROM RESIDENTIAL CARE PROVISION

**Project delivery dates:**

April 2020 –
September 2024⁵⁶

**Location:**

Telford and Wrekin,
Warwickshire,
Sandwell, Stoke
on Trent, Surrey,
Worcestershire,
Wolverhampton,
Staffordshire,
and Dudley.

**Planned size of cohort:**

92 service users

Actual size of cohort:

16 service users

**Planned investment commitment:**

£925,562

Actual investment committed:

£600,000

**Summary:**

The aim of The Pyramid Project was to work with independent foster care providers to recruit specific resilient carers for children in residential care with high levels of complex needs. The service included bespoke wrap around support alongside the delivery of therapeutic services to enhance the stability of placements.

**Involved organisations:**

- Commissioners: Staffordshire County Council (lead commissioner), Worcestershire County Council, City of Wolverhampton Council, Telford and Wrekin Council, Dudley Council, Warwickshire Council, Sandwell Council, Stoke on Trent Council, Surrey Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: National Fostering Group⁵⁷
- Intermediaries: ATQ Consultants and CAT Consultants (advice on complex commissioning and social investment)

**Maximum potential outcome payments under the LCF (from the LCF and commissioners):**

£11,341,260

Total outcome payments under the LCF (from the LCF and commissioners):

£1,066,524 [LCF: £207,895 (20%)]

**Primary outcome:**

Young person moves from residential to foster placement.

- Planned achievement: 79 young people moving from residential to foster placement.
- Actual achievement: 16 young people moving from residential to foster placement.

⁵⁶ The Pyramid Project was originally designed to deliver services until January 2026 but ended in September 2024.

⁵⁷ The National Fostering Group (NFG) is made up of separate Independent Fostering Agencies (IFAs) distributed across England.

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: young person moves from residential to foster placement. Primary Outcome.	PT1: child/young person moves from residential care – paid at the end of the first week in placement.	£4,100
	PT2: West Midlands commissioners: continuation of placement – paid per week for a maximum of 104 weeks.	£820
	PT3: West Midlands commissioners: 6 months sustainment of placement.	£18,980
	PT4: West Midlands commissioners: sustainment of placement – paid at 9, 12, 15, 18, 21, and 24 months.	£9,490
	PT5: Surrey commissioners: continuation of placement – paid per week for 104 weeks.	£900
	PT6: Surrey commissioners: continued sustainment of placement – paid at 3, 6, 9, 12, 15, 18, 21, and 24 months.	£11,500
Metric 2: young person who is 16 years old when placed moves from residential to foster placement.	PT7: young person aged 16 or over move from residential care complete – paid at the end of the first week in placement.	£4,100
	PT8: sustainment of placement – paid per week for 13 weeks.	£1,200
	PT9: sustainment of placement – paid per week, for 14-65 weeks.	£1,000
	PT10: sustainment of placement for 13 weeks.	£900
	PT11: continued sustainment of placement at 3, 6, 9, 12, and 15 months.	£9,490
	PT12: West Midlands commissioners only: Continuation of placement – paid per week for a maximum of 104 weeks.	£1,020
	PT13: Surrey commissioners only: Continuation of placement – paid per week for a maximum of 104 weeks.	£1,100

Table 4.1 Outcome metrics for The Pyramid Project

Table 4.1 shows the latest outcome metric structure for The Pyramid Project. The payment triggers are complex, given that commissioners pay different prices at different points in time for the same outcomes.

The project went through four main changes during the life of the service. In January 2021, the project included an additional metric to support young people after the age of 16 requiring a longer period of intervention to prevent a return to residential care (metric 2 and associated payment triggers).

In June 2022, two of the original commissioners dropped out and four new commissioners were brought on board. This led to adjustments in the payment trigger amounts, which meant that the project moved from the structure described in Table 4.2 (below) to the structure described in Table 4.1. The delivery partnership also agreed to lower the original target of 92 to 79 young people moving to foster care. Table 4.2 shows the original payment triggers for The Pyramid Project.

Table 4.2 Original outcome metric structure for The Pyramid Project (valid until June 2022)

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: young person moves from residential to foster placement (Primary Outcomes).	PT1: move from residential to foster care – to be paid at the end of the first week in foster care.	£4,100
	PT2: move from residential to foster care – continuation of placement – payment per week for a maximum of 104 weeks.	£820 (per week)
	PT3: placements beyond 6, 9, 12, 15, 18, 21, 24 months. One payment trigger of £18,980 at six months followed by six payment triggers of £9,490.	£18,980 / £9,490
Metric 2: young person who is 16 years old when placed moves from residential to foster placement.	PT4: young person aged 16 move from residential to foster care – to be paid at the end of the first week in foster care.	£4,100
	PT5: move from residential to foster care – continuation of placement – payment of £1,200 per week for a maximum of 13 weeks, followed by £1,000 per week for weeks 14-65, followed by £900 per week for 13 weeks with 92 service users.	£1,200 / £1000 / £900 (per week)
	PT6: placements beyond 3, 6, 9, 12, 15, 18, months. Six payment triggers of £9,490.	£9,490

In February 2023, the project agreed to reduce the outcomes funding contribution from the LCF from £2,388,592 to £1,553,609, due to the project not performing as expected. The delivery partnership also agreed an increase in payment tariffs and referral pathways. For instance, the price of weekly enhanced foster care placements went up from £820 to £1,020 for the West Midlands commissioners and from £900 to £1,100 for the Surrey commissioners. The referral pathways were widened to include children and young people identified as being on the edge of care⁵⁸.

Outcome achievements and results

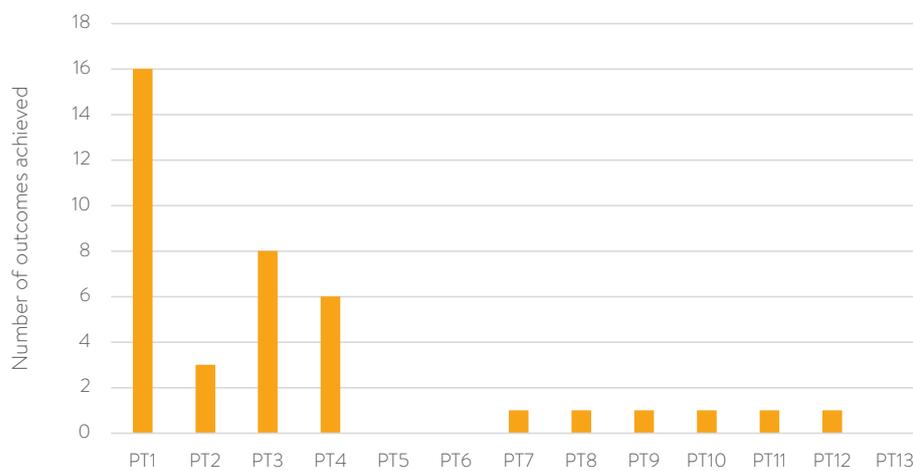


Figure 4.1 Outcomes achieved by The Pyramid Project⁵⁹ between 2020 and 2024

The source of data for Figure 4.1 is the end of grant form completed by the project at the end of the contract with the LCF.

Figure 4.1 shows outcome achievements for The Pyramid Project between 2020 and 2024. The project reported that 16 children or young people moved from residential to foster care, and 1 person aged 16 or over moved into a foster placement (metric 2). This project did not have a best-case scenario target per payment trigger, but the expectation was to support 79 children and young people to move to more stable foster placements. Overall, the project achieved 20% of their original project target. Of those 16 children who were placed in foster placements, only 5 remained there for more than one year.

The project explained that the COVID pandemic had an impact in the performance of the service. The pandemic exacerbated the need for more foster placements, and the project could not identify suitable foster homes for children in residential care. Securing stable foster care for children required more work than initially expected. Insufficient carers and the complexities of the cohort impacted the performance of the project.

⁵⁹ As this data was extracted from the end of grant form, it is not possible to build a figure with distribution of outcomes across years.

⁵⁸ Before February 2023, the cohort only included children and young people already in care.

Staffordshire Council already had a readiness tool that helped the project plan into the future when children would be ready to access foster homes. A benefit of this partnership was that Staffordshire Council shared this tool with other local authorities, who found it very helpful. In addition, the project worked with the National Fostering Agency, which has numerous foster care agencies in their portfolio. This connection enabled the project to access a wider range of potential foster carers. The experience helped the local authorities to change internal ways of working and provided a platform to have conversations around the challenging supply and demand of foster placements for children.

Outcome payments and project's costs

Figure 4.2 Outcome payments paid to The Pyramid Project between 2020 and 2024

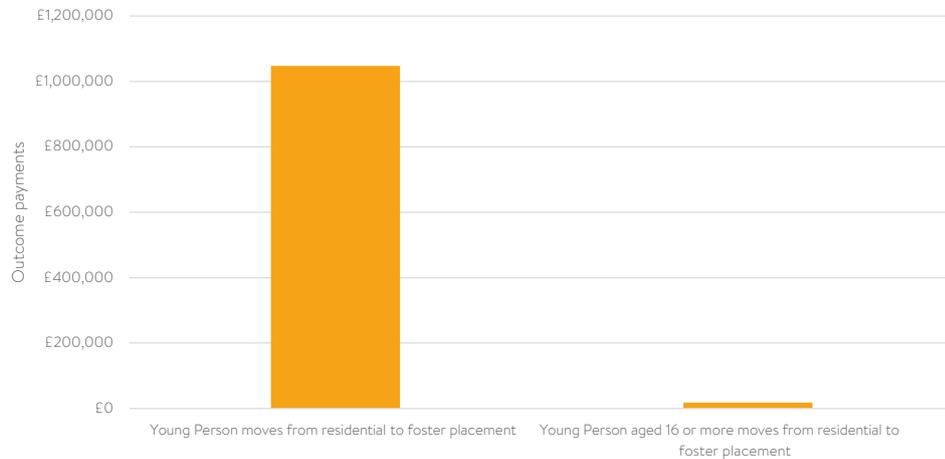


Figure 4.3 Outcome payments paid to The Pyramid Project across fiscal years 2020/21 - 2024/25



The source of data for Figures 4.2 and 4.3 is the DCMS Data Portal.

Figure 4.2 shows outcome payments for The Pyramid Project. The commissioners spent £1,047,510 on young people moving from residential care to foster placements, and £19,014 in young people aged 16 or over moving from residential to foster placements. The payments for these outcomes include all payments for moves to foster care, continuation of placement and sustainment of placements. Figure 4.3 presents the distribution of outcome payments across fiscal years.

	Planned	Actual
Total investment commitment	£925,562	£600,000
Maximum outcome payments	£11,341,260	£1,066,524

Table 4.3 Planned and actual investment and maximum potential outcome payment

Table 4.3 shows that Big Issue Invest invested less funding than anticipated. In total, the project managed to drawdown 9% of the maximum potential outcomes payment.

	Planned	Actual
Investment cost	£519,685 (5%)	£95,000 (8.4%)
Management cost	£656,444 (6%)	£224,775 (20%)
Evaluation and learning cost	£105,617 (1%)	£105,617 (9.4%)
Delivery cost	£9,620,609 (88%)	£702,317 (62.2%)
Total cost	£10,902,355 (100%)	£1,127,709 (100%)

Table 4.4 Project's cost distribution

Table 4.4 shows the distribution of costs for The Pyramid Project. The project had a total cost of 10% of what had been planned. This is mostly related to the fact that the project did not engage with as many young people as expected, thus providing a smaller service and achieving less outcomes than originally planned.

In terms of cost distribution, the original plan was to spend 88% of income on delivery costs, and distribute the remaining 12% between investment, management and evaluation and learning costs. After the delivery of the service, The Pyramid Project spent 62% on delivery costs, while allocating 8% to investment costs, 20% to management costs and 9% to evaluation costs. Evaluation and learning costs stayed fixed between planned and actual expenditure.

The project reported that final figures relating to the cost of delivering the project might be incomplete at this stage. The social investor has provided all available information to the best of their ability.

FIVE

DN2 CHILDREN'S SERVICES
SOCIAL IMPACT BOND⁶⁰**Project delivery dates:**October 2020 -
March 2027**Location:**Nottinghamshire
and Derbyshire**Planned size of cohort:**

304 service users

**Planned size of cohort
(up to Sept 2024):**

300 service users

Actual size of cohort:

288 service users

**Planned investment
commitment:**

£884,831

**Planned investment
commitment
(up to Sept 2024):**

£884,831

**Actual investment
committed:**

£884,831

**Summary:**

DN2 offers intensive support to children and young people (aged 10-17) at risk of care entry or who recently entered care. The goal is to help them remain with their families when it is safe to do so. For the children in care, DN2 offers wraparound specialist support to help them step down to suitable foster placements.

**Involved organisations:**

- Commissioners: Nottinghamshire County Council, Nottingham City Council, Derby City Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Nottingham Futures and Core Assets Group⁶¹
- Service providers: Core Assets Group

**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£9,123,323

**Total outcome payments under the LCF
(from the LCF and commissioners):**

£4,102,993 [LCF: £1,692,838 (41%)]

**Primary outcome:**

Child/young person steps down from residential care into a familial type of environment.

- Planned achievement: 85 children stepping down from residential care
- Planned achievement (as of Sep 2024): 70 children stepping down from residential care
- Actual achievements (as of Sep 2024): 70 children stepped down from residential care

60 Across the stakeholders in this project, this SOP is known as STARS.

61 Core Assets Group became Polaris Children's Services at the beginning of the contract.

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger (per week)
Metric 1: child/young person steps down from residential care into a familial type of environment. Primary Outcome.	PT1: weeks out of residential care after intervention period – to a maximum of 104 weeks (85 children to be supported).	£523
Metric 2: stabilising foster care placements, where the child/young person would be likely to enter residential care without intervention	PT2: weeks spent in foster care after intervention period – to a maximum of 104 weeks (85 children to be supported).	£536
Metric 3: re-unifying children/young people who have entered care with their family/primary carer.	PT3: weeks out of care with birth parents/primary carers after intervention period – to a maximum of 104 weeks (57 children to be supported).	£244
Metric 4: preventing children/young people on the edge of care entering the care of the local authority.	PT4: weeks out of care with birth parents/primary carers after (67 children to be supported) intervention period – to a maximum of 104 weeks.	£176

Table 5.1 Outcome metrics for DN2 Children's Services Social Impact Bond

Table 5.1 shows the latest outcome metric structure for DN2. This metric and payment trigger structure has not changed at any point in the life of the project. The only variation agreed between the LCF and the local commissioner occurred in September 2020, when the LCF agreed to increase their funding contribution. The LCF contributed to 27.5% of funding across the project lifetime and 41% of funding across the LCF period.

The project works with four different cohorts, and each cohort's achievements were measured with a particular metric. Cohort A were children stepping down from residential care to foster care (metric 1). Cohort B were children in foster placements that, without the intervention, would have likely gone into residential care (metric 2). Cohort C were children reunified with their families or primary carers (metric 3); Cohort D were children on the edge of care who avoid entering the care services of the local authority (metric 4).

Outcome achievements and results

Figure 5.1 Outcomes achieved by DN2 between 2020 and 2024

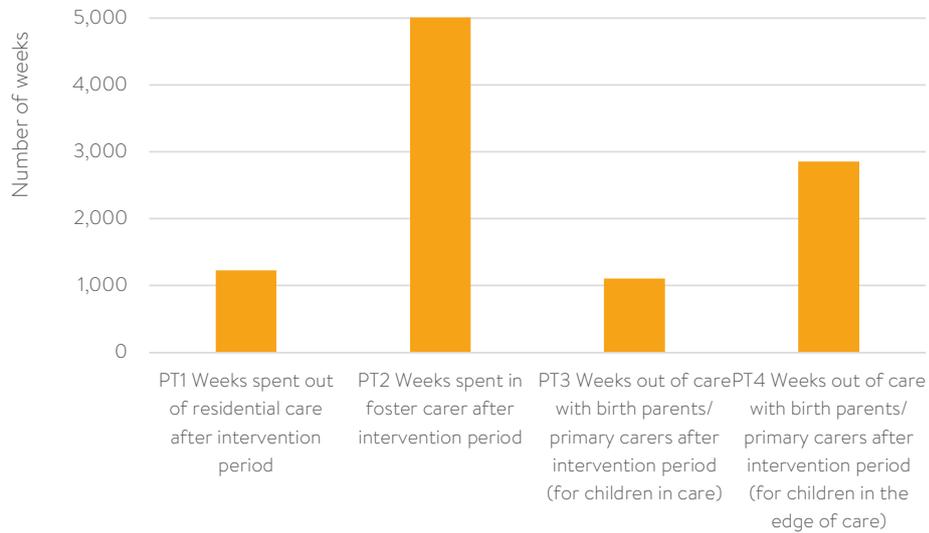


Figure 5.1 shows outcome achievements for DN2. As the project claims a payment for every week a child spends out of care, or are reunified with their families, Figures 5.1 and 5.2 show the number of weeks children are out of care, not the number of individual children. However, the targets for this project were set to the number of children supported by the intervention. The best-case scenario targets for the entire life of the project can be found in Table 5.1.

DN2 is an ongoing project, so all data shown in Figures 5.1 to 5.4 should be understood as interim data as of September 2024. The project accepts new referrals until March 2025, and the contract does not finish until March 2027.

As of September 2024, children in cohort A spent 1,226 weeks out of residential care (payment trigger 1). Children in cohort B, who would have likely entered care without the DN2 intervention, spent 5,008 weeks in foster care placements (payment trigger 2). Children in cohort C spent 1,106 weeks reunified with their parents or primary carers (payment trigger 3). Children in cohort D were on the edge of care and avoided entering care for 2,857 weeks (payment trigger 4). In the end of project reporting, DN2 reported the number of individual children achieving outcomes, which can be found in the Appendix 1 of this report.

The project reported that cohorts A and B (using payment triggers 1 and 2) did not meet their initial targets. One reason for the programme not achieving as many outcomes as expected was the lack of referrals. According to the project, a possible reason for low referral numbers might relate to changes of staff throughout the programme, which meant that learning was lost and communication processes were limited. For cohort A, it was particularly difficult to achieve their expectations in part due to the lack of foster care placements, which is a national problem.

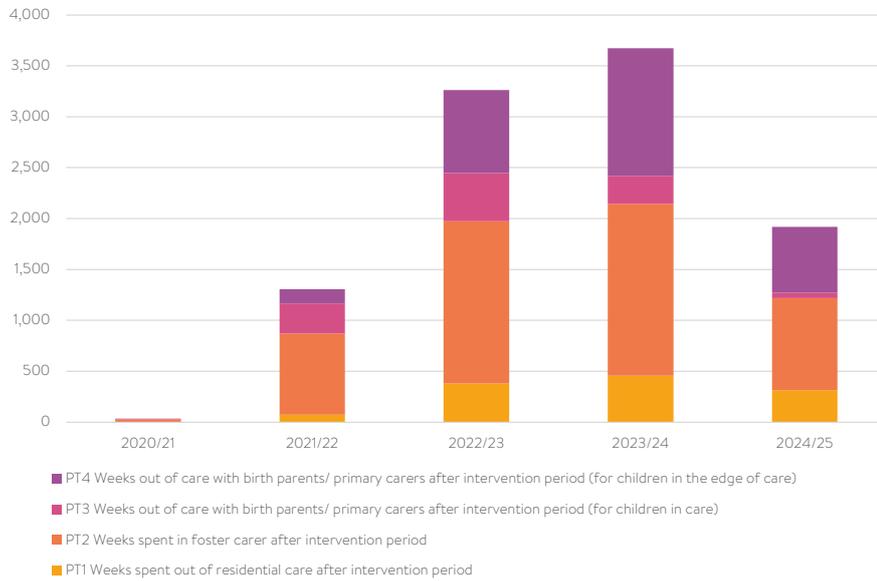


Figure 5.2 Outcomes achieved by DN2 across fiscal years 2020/21 – 2024/25

Figure 5.2 shows the distribution of outcomes (weeks) across fiscal years, with 2023/24 being the year with the highest number of achievements.

Outcome payments and project's cost

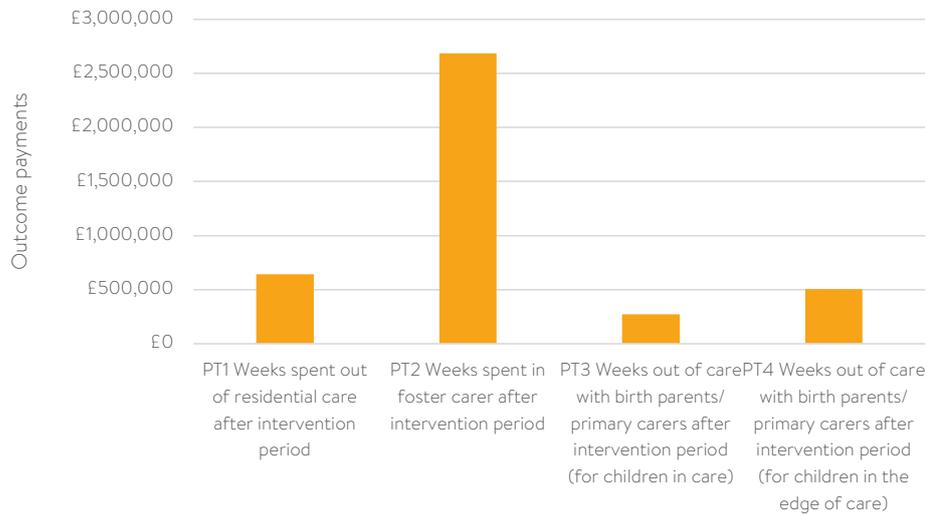


Figure 5.3 Outcome payments for DN2 between 2020 and 2024

Figure 5.4 Outcome payments for DN2 across fiscal years 2020/21 – 2024/25

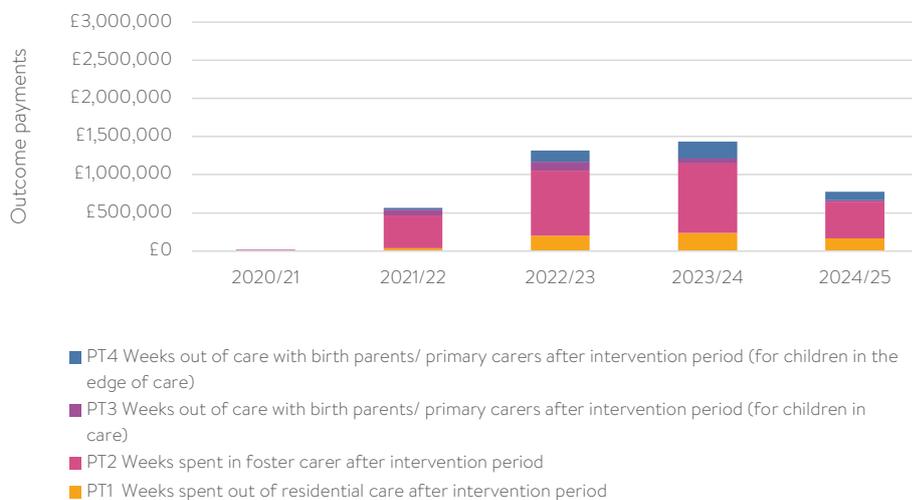


Figure 5.3 shows outcome payments for DN2 as of September 2024. The project received £641,284 for outcomes (weeks) achieved by cohort A (payment trigger 1), £2,686,992 for outcomes achieved by cohort B (payment trigger 2), £270,649 for outcomes achieved by cohort C (payment trigger 3), and £504,068 for outcomes achieved by cohort D (payment trigger 4).

Figure 5.4 presents the distribution of outcome payments for DN2 across fiscal years, with 2023/24 being the year with the highest number of payments.

Table 5.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual (as of Sep 2024)
Total investment commitment	£884,831	£884,831
Maximum outcome payments	£9,123,323	£4,102,993

[Please check the Glossary section to find definitions for these terms]

Table 5.2 indicates that the project has drawn down as much investment as expected. As of September 2024, the project has received £4,102,993 for outcome payments, this is 45% of the maximum potential outcome payment. In the end of project reporting, DN2 explained that the service has not claimed for more outcome payments as they have received the minimum possible number of referrals (as contractually agreed with the local commissioners), but they expected those referral numbers to be higher. Additionally, DN2 still delivers a service with funding from the local authorities, so further outcomes may be achieved.

	Planned (up to 2027)	Planned (up to Sep 2024)	Actual (Sep 2024)
Investment cost	£255,455 (3%)	£0 (0%)	£0 (0%)
Management cost	£333,055 (4%)	£300,000 (4.5%)	£300,000 (6%)
Evaluation and learning cost	£370,430 (4%)	£30,000 (0.5%)	£30,000 (1%)
Delivery cost	£8,164,393 (89%)	£6,000,000 (95%)	£4,400,000 (93%)
Total cost	£9,123,333 (100%)	£6,330,000 (100%)	£4,730,000 (100%)

Table 5.3 Project's cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 5.3 presents the total cost and cost distribution for DN2. It indicates that the project's costs are in line with their expectations for September 2024, except that delivery cost is lower than expected. The project explained that the decrease in this cost reflects the fact that DN2 received the minimum contracted referrals and could not work with bigger cohorts.

When comparing costs to the baseline values (planned up to 2027 column), the project reported investment cost of £0, as no investor repayment had been made yet. Management costs are slightly lower than expected, given a series of vacancies during the life of the service. Evaluation and learning costs were also reduced as the evaluators reduced the price of the evaluation, given the smaller size of the cohorts.

LCF EVALUATION REPORT

DRUG AND ALCOHOL DEPENDENCY PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
Integrated Family Service Support Staffordshire	April 2018	Staffordshire	DCMS Data Portal	✓
Cornwall Frequent Attenders	November 2018	Cornwall	DCMS Data Portal	
IPS Employment Support For People With Drug And Alcohol Addictions	January 2019	West London Boroughs (Barnet, Brent, Ealing, Harrow, Hillingdon, Hounslow, Kensington and Chelsea, and Westminster)	DCMS Data Portal	

SIX

INTEGRATED FAMILY SUPPORT SERVICE (IFSS)

Project delivery dates:
 April 2018 –
 March 2027

Location:
 Staffordshire

Planned size of cohort:
 2,006 service users

Actual size of cohort:
 2,400 service users

Planned investment commitment:
 £475,000

Actual investment committed:
 £445,000

Summary:
 IFSS works with families who have children and young people identified as being in need or who are under child protection plans, particularly in cases where parental drug and alcohol use may indicate a potential risk.

Involved organisations:

- Commissioners: Staffordshire County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Humankind, Addiction Dependency Solutions and Midlands Partnership Foundation Trust

Maximum potential outcome payments under the LCF (from the LCF and commissioners):
 £5,331,000

Total outcome payments under the LCF (from the LCF and commissioners):
 £4,662,002 [LCF: £1,840,113 (39%)]

Primary outcome:
 To reduce the number of children with Child Protection Plans (CPP) escalating to become looked after children (LAC)

- Planned achievement: 553 families engaging on the CPP programme
- Planned achievement: 553 children and young people avoid escalation from CPP to LAC
- Planned achievement: 455 families completing the CPP programme
- Actual achievement: 553 families engaging on the CPP programme
- Actual achievement: 795 children and young people avoid escalation from CPP programme to LAC
- Actual achievement: 466 families completing the CPP programme

OUTCOME METRICS

Table 6.1 Outcome metrics for IFSS

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: reduce the number of CPP escalating to become LAC. Primary Outcome.	PT1: families beginning engagement on CPP programme	£2,000 (per family)
	PT2: children and young people escalated from CPP to LAC status averted – six months after engagement	£3,602 (per child)
	PT3: families completed CPP programme	£1,000 (per family)
Metric 2: reduce the number of children in need escalating to CPP.	PT4: families beginning engagement on to children in need programme	£200 (per family)
	PT5: children in need to CPP status averted – six months after engagement	£800 (per child)

Table 6.1 shows the latest outcome metric structure for IFSS. This structure changed in March 2021, when the project was allocated further funding from the LCF. Initially, IFSS was designed as a project with a maximum potential outcome payment of £4,725,000. After a further allocation process, the maximum potential outcome payment was increased to £5,331,000. The outcome metrics and payments triggers for IFSS remained the same, but the best-case scenario targets and prices changed. Table 6.2 shows the old outcome metric structure for IFSS.

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: reduce the number of CPP escalating to become LAC. Primary Outcome.	PT1: families beginning engagement on CPP programme – 80 families to trigger this payment	£1,000
	PT2: children and young people escalated from CPP to LAC status averted – 85 children and young people to trigger this payment	£3,000
	PT3: families completed CPP programme – 70 families to trigger this payment	£2,000
Metric 2: reduce the number of children in need escalating to CPP.	PT4: families beginning engagement on to children in need programme – 160 families to trigger this payment	£200
	PT5: Children in need to CPP status averted – six months after engagement – 233 children and young people to trigger this payment	£800

Table 6.2 Outcome metrics for IFSS – valid from April 2018 to February 2021

During the COVID pandemic, IFSS switched to a grant-based payments mechanism based on a medium-scenario forecast for the project. These grant-based payments were paid between April 2020 and December 2020.

Outcome achievements and results

Figure 6.1 Outcomes achieved by IFSS between 2018-2024

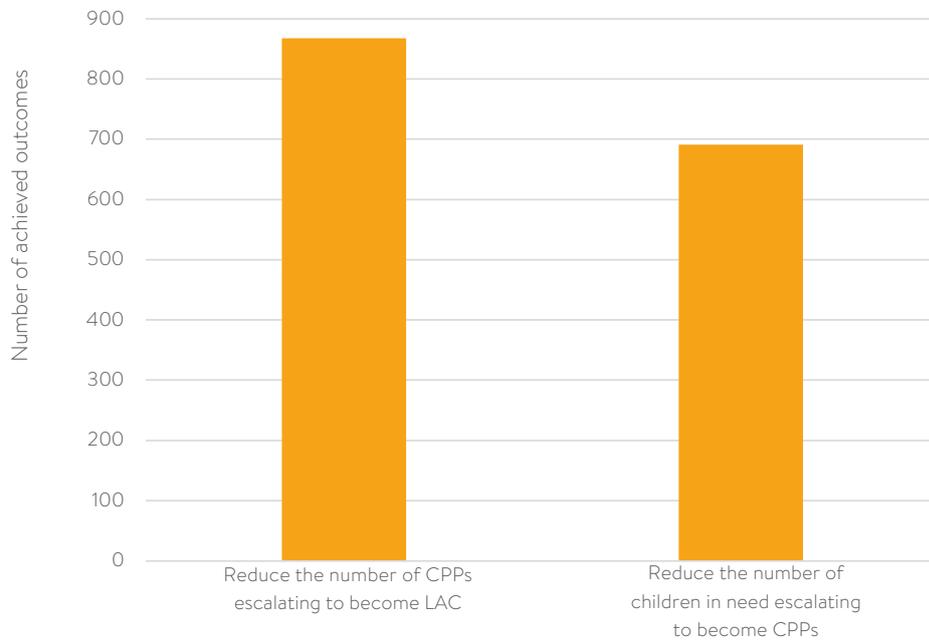


Figure 6.1 shows outcome achievements for IFSS between 2018 and 2024. As the project did not report data during the period under COVID grants, it is not possible to identify accurately how many families began engagement with the programme, how many children avoided escalating from a child protection plan (CPP) to looked after children (LAC), or how many families completed the CPP programme. This chapter builds on the data from the DCMS Data Portal, but readers are invited to check the end of grant performance information in the Appendix as well.

Payment triggers 1, 2 and 3 are clustered under the metric ‘to reduce the number of children with CPP escalating to LAC’. Payment triggers 4 and 5 are clustered under the metric ‘To reduce the number of children in need escalating to CPP’.

IFSS worked with a cohort of 2,400 service users (children, young people and their families). The outcome around avoiding escalation to the status of LAC was achieved 868 times and the outcome around reducing the escalation to CPP was achieved 691 times.

The IFSS project had 2 outcome metrics linked to two different services. The main IFSS service is designed for families with children with CPP, supporting them to avoid becoming LAC (metric 1). In the end of project reporting, IFSS stated that this service performed as expected and was very well received by the community in Staffordshire. There is a second service, which is often referred as ‘IFSS-lite’, designed for families with children in need, aiming to avoid escalation to the status of children with a CPP. While the first service is introduced to families when there is a serious risk that a child might be removed, the second service acts as an early intervention to avoid escalation. Participation from families was optional, and the second service did not carry the same importance in the eyes of parents. Consequently, the second service was less well received and achieved fewer outcomes than expected.

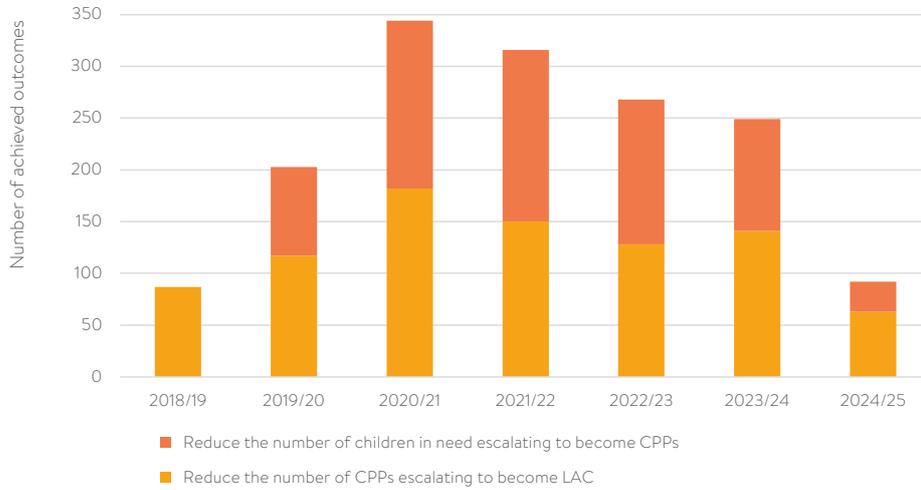


Figure 6.2 Outcomes achieved by IFSS across fiscal years 2018/19 – 2024/25⁶²

Figure 6.2 presents the distribution of outcomes across fiscal years, with the year 2020/21 being the year with the highest number of achievements.

Outcome payments and project’s cost

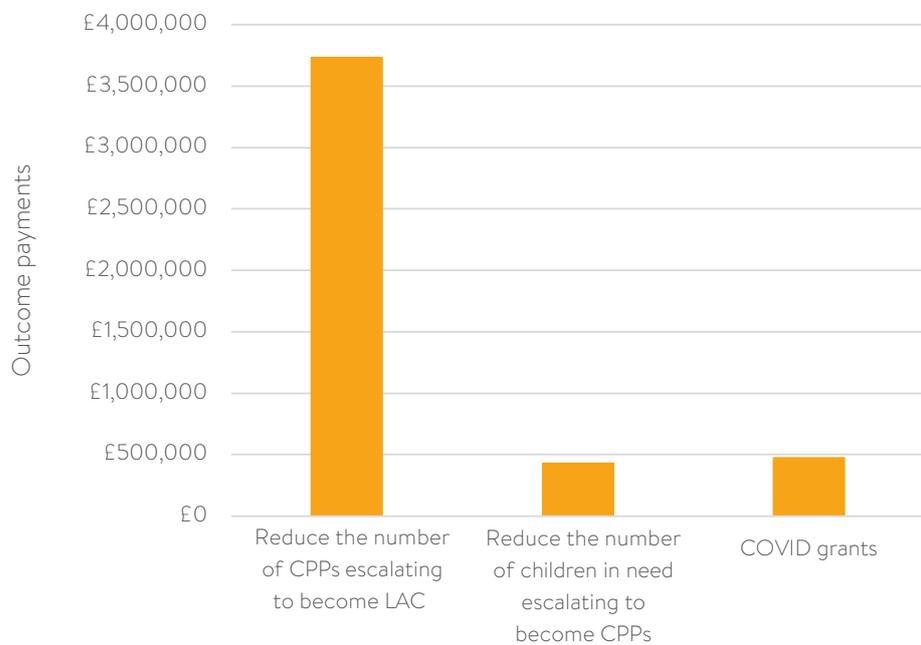


Figure 6.3 Outcome payments paid to IFSS between 2018/19 and 2024/25

⁶² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 6.4 Outcome payments paid to IFSS across fiscal years 2019/20 and 2024/25⁶³

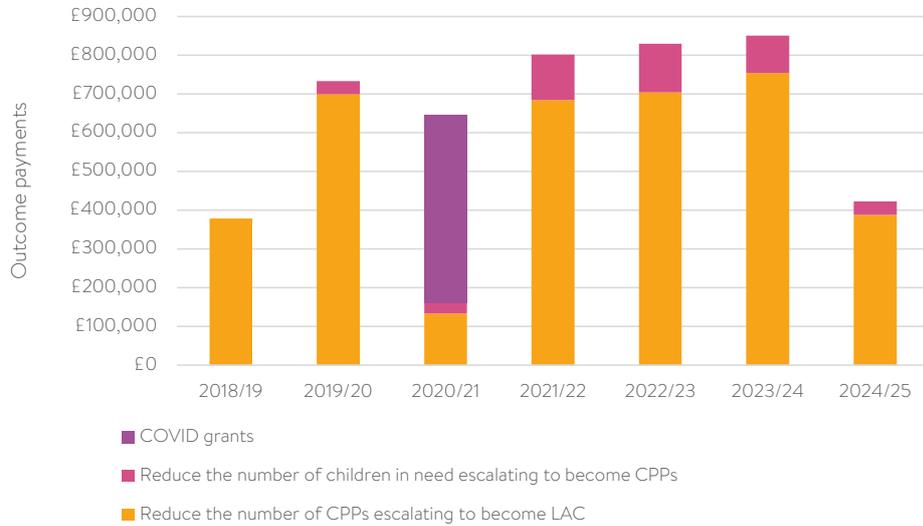


Figure 6.3 shows outcome payments paid to IFSS between 2018 and 2024. The IFSS project received £3,739,327 for outcomes related to metric 1, £438,145 for outcomes related to metric 2 and £484,530 in COVID grants. In total, IFSS received £4,662,002 from the LCF and Staffordshire County Council.

Payments for metric 2 have been significantly lower than payments for metric 1. This is mostly related to the prices for metric 1 outcomes being higher than prices for metric 2 outcomes (see Table 6.1).

Figure 6.4 presents the distribution of outcome payments across fiscal years, with the year 2023/24 being the year with the highest amount of outcome payments for IFSS.

Table 6.3 Planned and actual investment and maximum potential outcome payment

	Planned	Actual (as of September 2024)
Total investment commitment	£475,000	£445,000
Maximum outcome payments	£5,331,000	£4,662,002

[Please check the Glossary section to find definitions for these terms]

Table 6.3 shows that Big Issue Invest invested £30,000 less than expected. The project explained that they could have claimed for the entire committed amount, but they decided to not do so, as it was not necessary given the project’s cashflow.

63 Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

	Planned	Actual (as of September 2024)
Investment cost	£103,950 (2%)	£3,300 (0.05%)
Management cost	£103,000 (2%)	£168,000 (3.6%)
Evaluation and learning cost	£103,000 (2%)	£73,200 (1.6%)
Delivery cost	£5,021,050 (94%)	£4,417,502 (94.75%)
Total cost	£5,331,000 (100%)	£4,662,002 (100%)

Table 6.4 Project's cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 6.4 presents the total cost and cost distribution for IFSS. Delivery costs were lower than anticipated due to the project being less active during the COVID period. Investment and evaluation and learning costs decreased, while management costs increased.

SEVEN

CORNWALL FREQUENT ATTENDERS

**Project delivery dates:**

November 2018
– December 2023⁶⁴

**Location:**

Cornwall

**Planned size of cohort:**

705 service users

Actual size of cohort:

687 service users

**Planned investment commitment:**

£407,000

Actual investment committed:

£123,000

**Summary:**

The target cohort comprised residents of Cornwall aged 18 and older who are experiencing issues related to substance misuse and have had eight or more⁶⁵ visits to Accident and Emergency or two or more hospital admissions on to the ward within a 12-month period. The intervention included regular key worker outreach, home visits, drop-in sessions, crisis management to address immediate problems, SMART goal planning alongside motivational interviewing and other therapeutic techniques. This included intensive case management by the Hospital Outreach Team, reconnecting service users back into primary/ community-based services for ongoing support to break the cycle of them using Accident and Emergency.

**Involved organisations:**

- Commissioners: Cornwall County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: We Are With You

**Maximum potential outcome payments under the LCF (from the LCF and commissioners):**

£2,226,336

Total outcome payments under the LCF (from the LCF and commissioners):

£2,205,244 [LCF: £771,836 (35%)]

**Primary outcome:**

Reduce the avoidable use of A&E by drug and alcohol 'frequent attenders' – sustained reduction of use of A&E services achieved after 18 months

- Planned achievement: 380 individuals achieving a 60% reduction in A&E attendance – achieved after 6, 9 and 12 months.
- Planned achievement: 233 individuals achieving a sustained reduction of use of A&E services after 18 months.
- Actual achievement: 362 individuals achieving a 60% reduction in A&E attendance – achieved after 6, 9 and 12 months.
- Actual achievement: 271 individuals achieving a sustained reduction of use of A&E services after 18 months⁶⁶

⁶⁴ Cornwall Frequent Attenders finished service delivery in 2023, but had time until September 2024 to track and claim for outcomes.

⁶⁵ The project has noted that this changed to five or more visits to A&E.

⁶⁶ Source: Cornwall Frequent Attenders end of grant form stored in DCMS Data Portal

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: increase service users' ability to engage with support services in an effective way.	PT1: sustained engagement after 12 weeks (best-case scenario expectation: 620 achievements)	£1,200
Metric 2: decrease the chaotic and avoidable use of A&E by drug and alcohol frequent attenders. Primary Outcome.	PT2: 60% reduction in A&E attendance – achieved after 6, 9 and 12 months (best-case scenario expectation: 380 achievements). In practice, the project checked PT2 at 7 months.	£3,000
	PT3: sustained reduction of use of A&E services – achieved after 18 months (best-case scenario expectation: 233 achievements).	£1,600

Table 7.1 Outcome metrics for Cornwall Frequent Attenders

Table 7.1 shows the latest outcome metric structure for Cornwall Frequent Attenders. This structure has not changed throughout the entire life of the project, except for the periods of April 2020 – September 2020 and January 2021 – March 2021, during which the project switched to a grant-based payment scheme due to the COVID pandemic.

For payment trigger 2, payments could be triggered at different points in time, but the project decided to check the completion of this achievement at 7 months after starting the programme. Each payment trigger could be claimed one time per service user.

During the COVID pandemic, Cornwall Frequent Attenders reported data on outcomes, not on payment trigger achievements. Therefore, the following subsection presents outcome achievements at the outcome metric level and does not offer granularity on payment triggers.

Outcome achievements and results

Figure 7.1 Outcomes achieved by Cornwall Frequent Attenders between 2018-2024

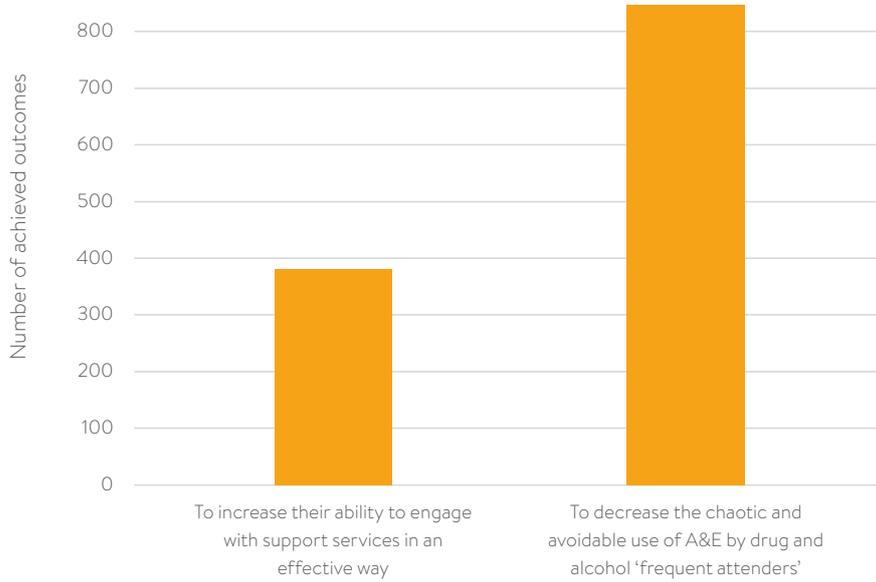


Figure 7.2 Outcomes achieved by Cornwall Frequent Attenders across fiscal years 2019/20 – 2024/25⁶⁷

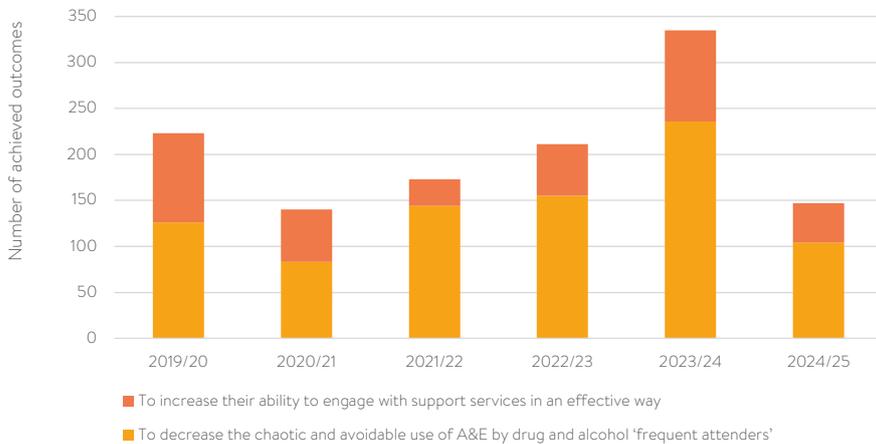


Figure 7.1 shows outcome achievements for Cornwall Frequent Attenders between 2018 and 2023. 381 individuals have increased their ability to engage with support services in an effective way. This achievement was measured by sustaining their engagement with the programme for 3 months. In addition, the outcome 'to decrease the avoidable use of A&E services by drug and alcohol frequent attenders' was achieved 848 times. Payment triggers 2 and 3 are included in the achievements of metric 2⁶⁸.

⁶⁷ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

⁶⁸ As the dataset on payment triggers for this project is not complete on the DCMS Data Portal, it not possible to identify with accuracy the number of people reducing A&E attendance after 7 or 18 months.

Figure 7.1 does not show any best-case scenario targets as they were associated with payment triggers, not outcome metrics. The original targets for this project can be found in Table 7.1, next to the payment trigger description. The project has shared granular data on achievements at the payment trigger level, but this covers a longer period than the LCF contract. These figures can be found in the Appendix.

In the end of project reporting, the project reported having overachieved in every target that it set for itself. Broader benefits from this project included strengthening the relationship between the council and healthcare professionals. Prior to the start of this project, there was no formal link between the hospital and community drug and alcohol teams. Cornwall Frequent Attenders has facilitated the integration of these teams, resulting in a well-defined, coordinated care pathway for high-risk patients. This means that every time A&E services receive a frequent attender with drug or alcohol related issues, there is now a formal channel and protocol in place to notify the community team and initiate a comprehensive support programme. Furthermore, the NHS has replicated this model for managing high-intensity users in hospitals beyond Cornwall.

In terms of barriers, the project referred to the COVID period as a challenging time. Outreach workers were unable to work from their offices or hospital as usual, which significantly reduced face-to-face contact with patients. Hospital staff were managing other priorities related to the pandemic and had reduced capacity for other services. As a result, the project had fewer referrals than initially expected and faced additional challenges when visiting patients.

Outcome payments and project's cost

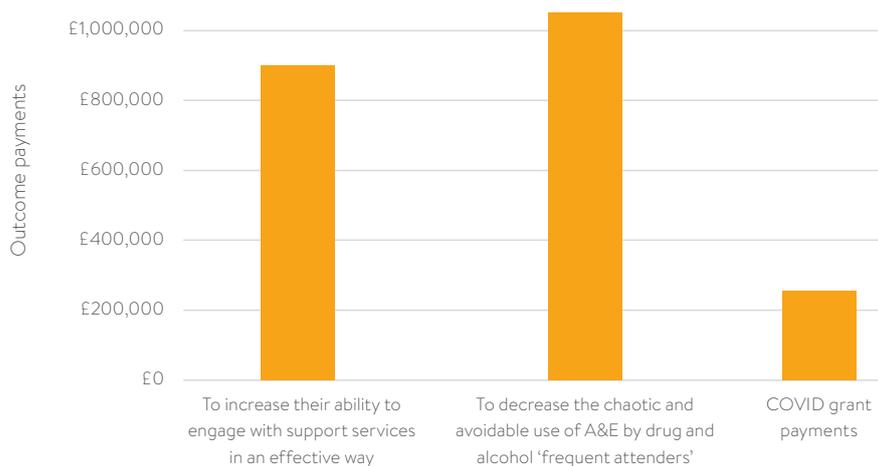


Figure 7.3 Outcome payments paid to Cornwall Frequent Attenders between 2018-2024

Figure 7.4 Outcome payments paid to Cornwall Frequent Attenders across fiscal years 2019/20 and 2024/25⁶⁹

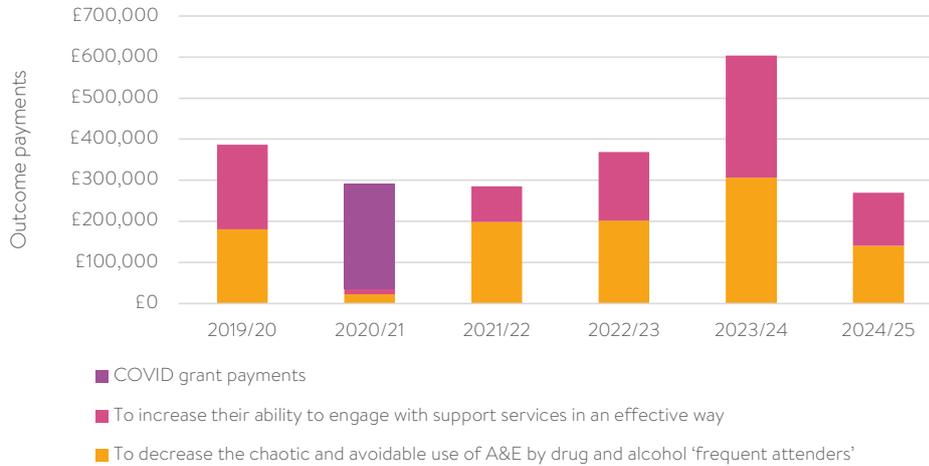


Figure 7.3 shows outcome payments paid to Cornwall Frequent Attenders between 2019/20 and 2024/25. The project received £899,400 for increasing the ability of service users to engage with support services in an effective way (engagement), £1,049,600 for service users reducing the avoidable use of A&E services and £256,244 in COVID grant payments. In total, the project received £2,205,244 from the LCF and their local commissioner.

Figure 7.4 presents outcome payments across fiscal years, with fiscal year 2023/24 being the year with the highest payments. In fiscal year 2020/21, most of the payments were COVID grant payments, not outcome payments.

Table 7.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£407,000	£123,000
Maximum outcome payments	£2,226,336	£2,205,244

[Please check the Glossary section to find definitions for these terms]

Table 7.2 shows that Big Issue Invest invested less funding than initially anticipated. The project explained that the provider’s cash flow was sufficient and allowed them not to drawdown further funds from Big Issue Invest. The provider has not borrowed as much funding as planned, and so have taken a larger financial risk in the project, which means that they have paid significantly less interest to the investor/lender. The project was very close to achieving their maximum potential outcome payments under the LCF.

⁶⁹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

	Planned	Actual
Investment cost	£327,000 (15%)	£23,000 (1%)
Management cost	£34,400 (2%)	£34,400 (2%)
Evaluation and learning cost	£104,000 (5%)	£104,000 (5%)
Delivery cost	£1,712,900 (78%)	£1,745,401 (92%)
Total cost	£2,178,300 (100%)	£1,906,801 (100%)

Table 7.3 Project's cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 7.3 shows that, due to the reduced loan from Big Issue Invest, investment cost went down significantly, representing only 1% of the project costs. Management, and evaluation and learning costs remain stable between baseline and actual expenditure. Delivery cost had a small increase, as the project used the savings from the investment cost and allocated them to service delivery. In total, Cornwall Frequent Attenders costed £1,906,801.

EIGHT

IPS EMPLOYMENT SUPPORT FOR PEOPLE WITH DRUGS AND ALCOHOL ADDICTION (IPS EMPLOYMENT SUPPORT)

**Project delivery dates:**

January 2019 –
June 2022

**Location:**

West London
Boroughs

(Barnet, Brent,
Ealing, Harrow,
Hillingdon, Hounslow,
Kensington and Chelsea,
and Westminster)

**Planned size of cohort:**

2,074 service users

Actual size of cohort:

1,768 service users

**Planned investment commitment:**

£400,000

Actual investment committed:

£400,000

**Summary:**

Individual Placement Support Service helps adults (16-70 years old) with drug and alcohol addictions, who are out of work, to gain and retain competitive employment. All service users were voluntary and were either receiving treatment, in recovery, or previous users of Drug and Alcohol Treatment services.

**Involved organisations:**

- Commissioners: London Borough (LB) of Ealing, Ealing Clinical Commissioning Group (CCG), Hillingdon CCG, West London CCG, Hounslow CCG, Brent CCG, Harrow CCG, Central London CCG, Harrow LB Council, LB Hillingdon, LB Brent, LB Hounslow, LB Westminster, LB of Kensington and Chelsea, West London Job Centre Plus, Barnet Job Centre plus, and LB of Barnet and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Westminster Drug Project (WDP)
- Intermediaries: Social Finance UK

**Maximum potential outcome payments under the LCF (from the LCF and commissioners):**

£2,375,150

Total outcome payments under the LCF (from the LCF and commissioners):

£2,072,296 [LCF: £991,466 (48%)]

**Primary outcome:**

Job start.

- Planned achievement: 766 individuals starting a new job
- Actual achievement: 276 individuals starting a new job

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: service user engagement	PT1: service user completes a vocational form at their second meeting with the project	£300
Metric 2: job start	PT2: service user starts a job up to nine months after engagement	£3,293
Metric 3: job sustainment less than 16 hours	PT3: job sustainment < 16 hours: achieved up to nine months after engagement the LCF pays	£4,407
Metric 4: job sustainment more than 16 hours	PT4: job sustainment > 16 hours: achieved up to nine months after engagement	£7,047
Metric 5: improved service user wellbeing	PT5: improved service user wellbeing evidenced with PROM (reduction of TOP score) and SURE forms completed 6 months after engagement	TOP form improvement: £281 SURE form improvement: £100
Metric 6: reduced health care usage	PT6: change in forecasted healthcare resource group	£10,719

Table 8.1 Outcome metrics for IPS Employment Support for people with drug and alcohol addictions

Table 8.1 shows the latest version of the outcome metric structure for IPS Employment Support. The LCF paid for the engagement outcomes. Both the LCF and local commissioners paid for the metrics around job start and job sustainment. The local commissioners paid for the metrics around health and wellbeing improvements (metrics 5 and 6).

During the life of this service, two adjustments impacted this structure:

- To mitigate the impact of the COVID pandemic, IPS Employment Support switched to a grant-based payment mechanism between April and September 2020. This means that payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.
- Between January and June 2021, the LCF agreed to pay a different price for the engagement outcome (metric 1). During this period, the LCF paid £600 for engagement outcomes, instead of £300. IPS Employment Support went back to the originally agreed engagement price in July 2021.

Outcome achievements and results

Figure 8.1 Outcomes achieved by IPS Employment Support (2019-2022)

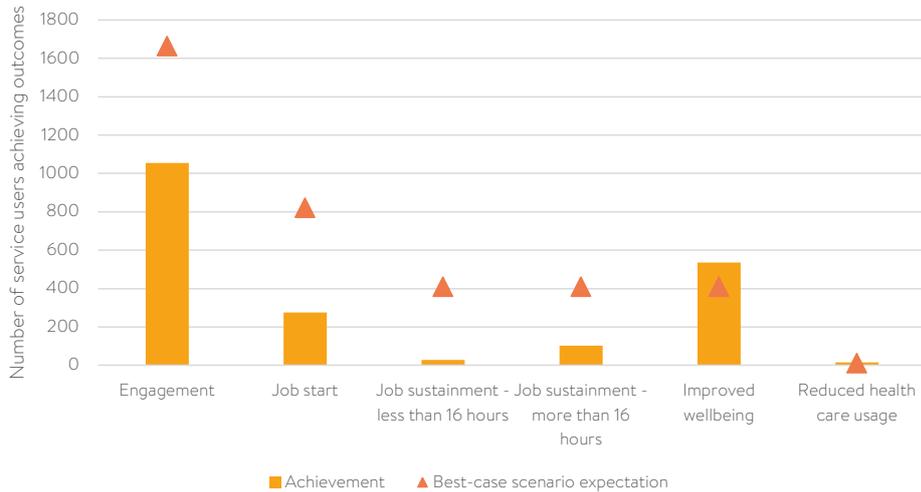
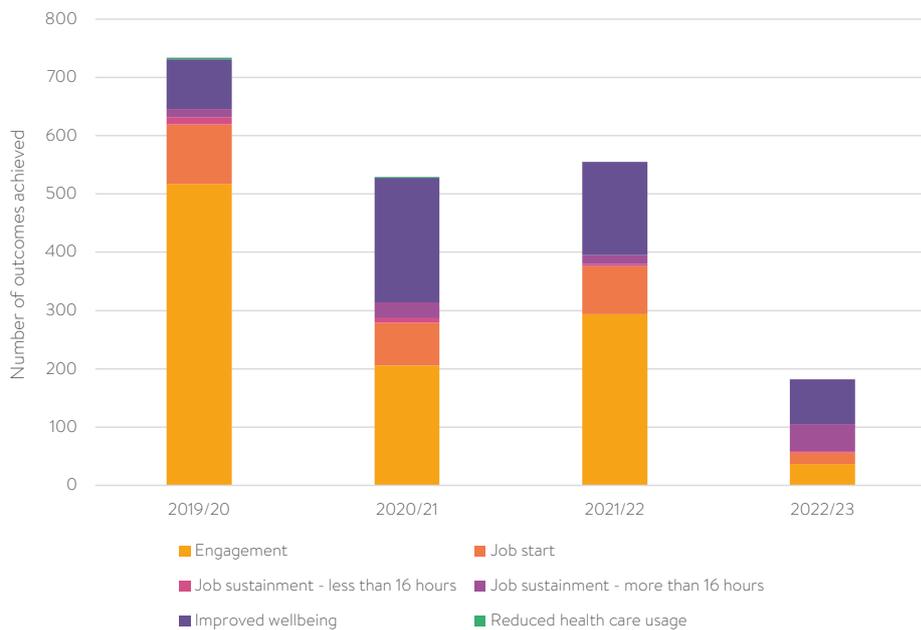


Figure 8.2 Outcomes achieved by IPS Employment Support across fiscal years (2019/20-2022/23)⁷⁰



⁷⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff date was September 2024.

1,768 service users were referred to the IPS Employment Support. 1,054 users formally engaged with the programme. Of those 1,054 individuals, 276 started a new job (27% of engaged cohort), 27 sustained a job for less than 16 hours a week (3% of engaged cohort), 103 sustained a job for more than 16 hours a week (10% of engaged cohort). 536 individuals showed an improvement in wellbeing, either by working on a TOP or SURE forms⁷¹ (51% of engaged cohort). The project triggered the reduction of health care usage⁷² metric 4 times.

The project was successful in meeting best-case scenario targets for health metrics, but did not achieve best-case scenario targets for employment outcomes. The project reported that the COVID pandemic had a significant impact on the number of referrals that the service received and affected the capacity of the service to keep a fully staffed team. The pandemic meant that services could not interact face-to-face with users, which disrupted original plans for the service. The project also reported difficulties in meeting the evidence requirements of a SOP to claim for payments, and difficulties in keeping the same levels of fidelity to the IPS methodology across the different service locations and employers.

In addition, the service was testing the suitability of IPS Employment Support for cohorts with drug and alcohol addiction problems. The pandemic meant that the drug and alcohol sector experienced a decrease in patient recruitment throughout 2020-2022. This reduction affected the capacity of the project to achieve its best-case scenario targets, but the project could still prove the efficacy of IPS for individuals with an addiction or history of addiction. The service was extended through a grant until 2023 and a ninth borough started offering the service.

Outcome payments and project's cost

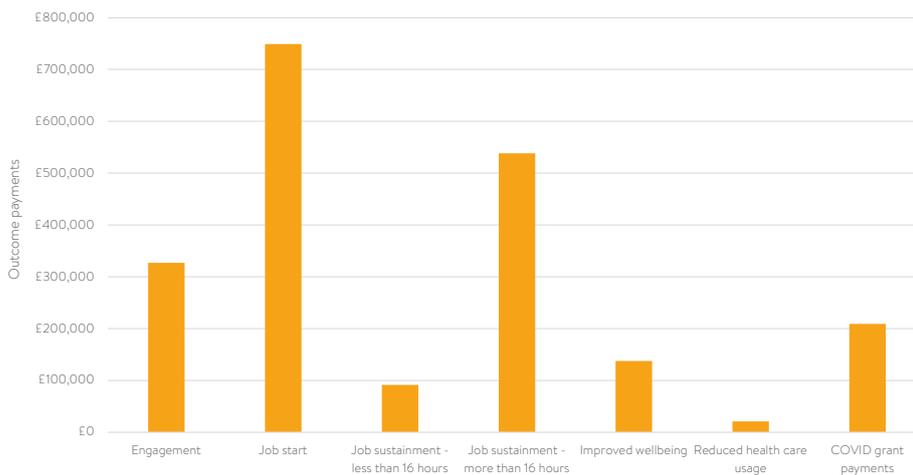


Figure 8.3 Outcome payments paid to IPS Employment Support 2019-2022

⁷¹ The Treatment Outcomes Profile (TOP) is a standard tool for measuring changes that occur during treatment for Drug and Alcohol service users. It is a questionnaire/survey that the service user answers themselves, choosing a number of Yes/No for each question. Outcome payments for IPS Employment Support were triggered when a TOP form that was completed 6 months after engagement showed a score reduction of at least 2 points when compared against an initial TOP form completed at baseline. The Substance Use Recovery Evaluator (SURE) form is another tool for measuring alcohol/drug dependency, also taking the form of a self-completed questionnaire. Outcome payments for IPS Employment Support were triggered for every SURE that was completed at the 6-months mark. These two forms are often called 'PROM forms' – Patient Reported Outcome Measures.

⁷² The 'Reduced healthcare usage' metric was triggered every time that a CCG could prove that the group of IPS Employment Support patients needed less visits to A&E services and other urgent care visits.

Figure 8.4 Outcome payments paid to IPS Employment Support by fiscal year (2019/20-2022/23)⁷³

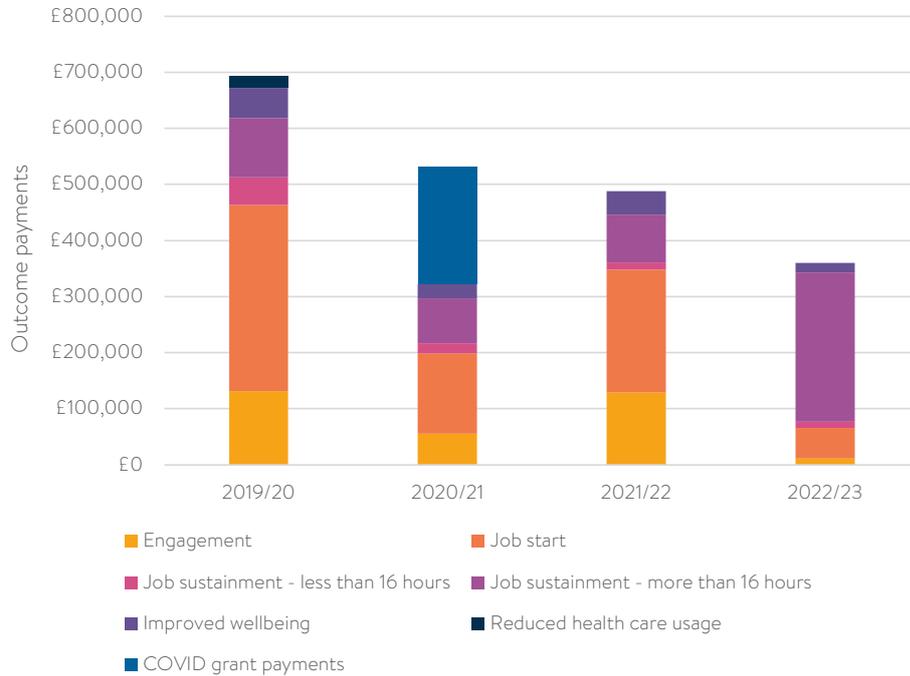


Figure 8.3 shows the amount paid per outcome metric for IPS Employment Support. The project received £327,000 for engagement outcomes, £748,782 for job start outcomes, £91,205 for job sustainment (less than 16 hours a week), £538,240 for job sustainment (more than 16 hours a week), £137,476 for improvement in wellbeing and £20,562 for reduction in healthcare usage. In total, the project received £1,863,265 in outcome payments and £209,031 in COVID grant funding.

Figure 8.4 shows the distribution of payments for IPS Employment Support across fiscal years. In total, the project received £692,698 in fiscal year 2019, £531,829 in 2020 (including COVID grants), £487,918 in 2021 and £359,851 in 2022.

Table 8.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£400,000	£400,000
Maximum outcome payments	£2,375,150	£2,072,296

⁷³ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 8.2 shows that Big Issue Invest, the social investor for IPS Employment Support, invested the same amount of funding as originally planned.

	Planned	Actual
Investment cost	£169,202 (7.4%)	£155,187 (7.9%)
Management cost	£210,950 (9.2%)	£196,851 (10.1%)
Evaluation and learning cost	£61,050 (2.7%)	£61,050 (3.1%)
Delivery cost	£1,852,000 (80.8%)	£1,541,622 (78.9%)
Total cost	£2,293,202 (100%)	£1,954,710 (100%)

Table 8.3 Project's total cost and cost distribution

Table 8.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. IPS Employment Support's actual total cost is more than £300,000 lower than initially planned. The project reported the possibility that the initial forecast for the project might have been miscalculated or included incorrect types of costs. In addition, the IPS Employment Support received funding from other sources, such as a grant from Job Centre Plus.

LCF EVALUATION REPORT

EARLY YEARS SERVICES PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	April 2019	Plymouth	DCMS Data Portal	
ParentChild+	June 2019	London Borough of Kensington and Chelsea and London Borough of Westminster	DCMS Data Portal	✓ ⁷⁴
West London Zone (AllChild), Placed-Based Support for Children and Young People: Scale-Up	August 2019	London Boroughs of Brent, Westminster, Kensington and Chelsea, and Hammersmith and Fulham	DCMS Data Portal	

74 ParentChild+ finished service delivery in September 2023 but had an outcome tracking window until September 2025.

NINE

REDUCING THE PREVALENCE OF MOTHERS EXPERIENCING RECURRENT CARE PROCEEDINGS (PAUSE)⁷⁵

Project delivery dates:
April 2019 – March 2024

Location:
Plymouth

Planned size of cohort:
56⁷⁶ service users

Actual size of cohort:
49 service users

Planned investment commitment:
£1,100,000

Actual investment committed:
£721,000

Summary:
The programme aims to help women who have experienced or are at risk of experiencing at least two episodes of care proceedings leading to the removal of one or more of their children into care. Pause is an intensive, relationship-based support intervention in which the trauma-informed support offered is practical, behavioural and therapeutic.

Involved organisations:

- Commissioners: Plymouth City Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Trevi House
- Intermediaries: Bridges Fund Management

Maximum potential outcome payments under the LCF (the LCF and commissioners):
£1,623,872

Total outcome payments under the LCF as of September 2024 (from the LCF and commissioners):
£1,598,983 [LCF: £649,559 (41%)]

Primary outcome:
Women are supported to take a 'pause' from pregnancy to enable them to focus on their own needs, take control of their lives and develop new skills and responses, building their wellbeing and resilience to move forwards to a more positive future.

- Planned achievement: 40 women will be supported to take a 'pause' from pregnancy to enable them to focus on their own needs
- Actual achievement: 49 women were supported to take a 'pause' from pregnancy to enable them to focus on their own needs

⁷⁵ To facilitate the reading of this chapter, we will refer to this project as the "Pause project". Please notice that a different project, Midlands Regional Pause Hub, also delivers a service based on the Pause programme and methodology.

⁷⁶ The end of grant form included a revised planned size of cohort of 48 service users.

OUTCOME METRICS

Table 9.1 Outcome metrics for the Pause Project – Plymouth

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: women are supported to take a 'pause' from pregnancy to enable them to focus on their own needs, take control of their lives and develop new skills and responses, building their wellbeing and resilience to move forwards to a more positive future. Primary Outcome.	PT1: woman completes the Pause programme and does not become pregnant for 18 months from commencing the programme.	£24,664 (one payment per woman)
Metric 2: women who enrol onto the Pause programme do not become subject to the instigation of further care proceedings for a period of 36 months from the point they engage with the Pause programme.	PT2: the local authority does not instigate care proceedings (in respect of either an Interim Care Order or a Care Order) for a period of 36 months from the point that the woman engages with the Pause programme.	The maximum payment is £10,570 per woman, to be paid quarterly at £19.60 per day (several payments per woman)

Table 9.1 shows the latest outcome metric structure for the Pause Project. This structure has not changed at any point in the life of the project. Payment trigger 1 measures the number of women completing the Pause programme. Women can claim for payment trigger 1 only once. Payment trigger 2 measures the number of times the project has claimed for women avoiding care proceedings. Women can claim for payment trigger 2 many times. Payment trigger 2 does not measure the unique number of women.

Outcome achievements and results

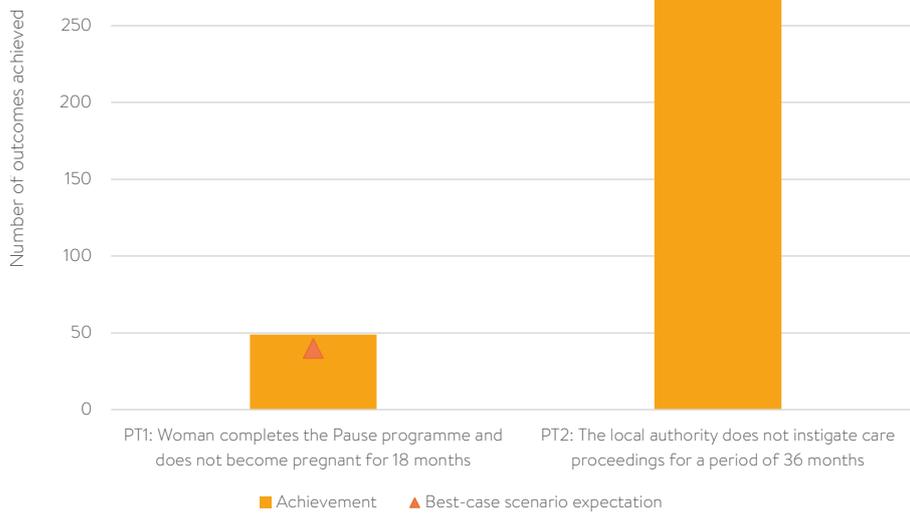


Figure 9.1 Outcomes achieved by the Pause Project in Plymouth between 2019 and 2024

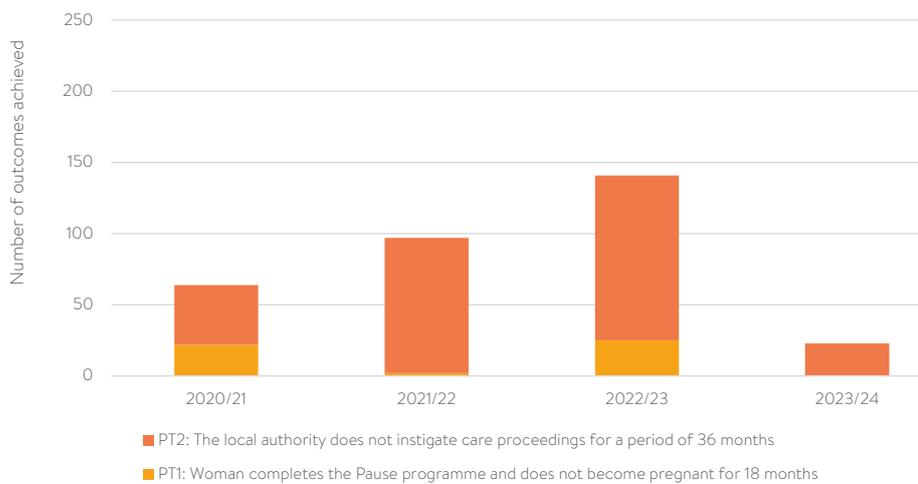


Figure 9.2 Outcomes achieved by the Pause Project in Plymouth across fiscal years 2020/21 – 2023/24⁷⁷

Figure 9.1 shows outcome achievements and best-case scenario target for the Pause Project. The Pause Project achieved Metric 1 outcomes for 49 women, overachieving their initial target of 40 women. All completed the programme and did not become pregnant for 18 months (payment trigger 1).

According to the end of grant form, the Pause Project achieved Metric 2 outcomes for 49 women, overachieving their initial target of 47 women. The figure illustrates how the payment trigger 2 was triggered 276 times, each time for a number of days that a woman avoided care proceedings. In total, the women involved in the Plymouth Pause Project avoided care proceedings for 21,694 days. The project reported an average of 25 women avoiding care proceedings each quarter, and an average of 80 days of avoided care proceedings per woman. These are not unique women, as the care proceedings avoidance trigger could be claimed several times for each woman.

⁷⁷ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

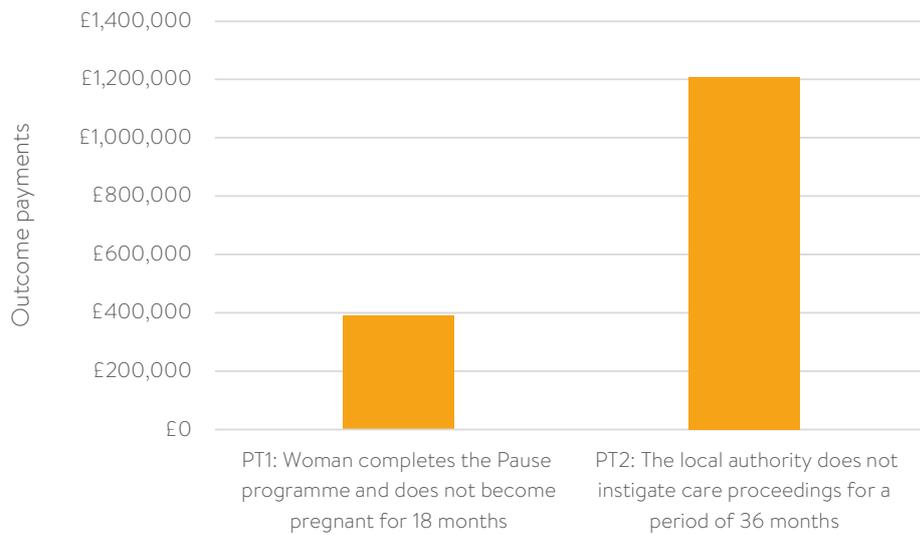
The key factors identified by stakeholders as contributing to these achievements included increased support for the delivery team, enabling them to be innovative and resourceful in their engagement with women. Additionally, the programme was delivered within a trauma informed, women-only centre, allowing service users to feel secure while also accessing a broader range of wellbeing support services.

This success can also be attributed to several innovations within the service, including the introduction of a full-time dedicated Next Steps Practitioner, who provided support for women as they transitioned from the programme for up to 18 months. The project reported that approximately one third of Pause women engaged with the Next Steps offer – some engaged regularly including via scheduled ‘drop in’ groups, whilst others reached out occasionally during periods of crisis or when trusted professional help was required.

Figure 9.2 shows the distribution of outcome achievements across fiscal years, with 2022/23 being the year with the highest achievements.

Outcome payments and project’s cost

Figure 9.3 Outcome payments for the Pause Project – Plymouth between 2019-2023



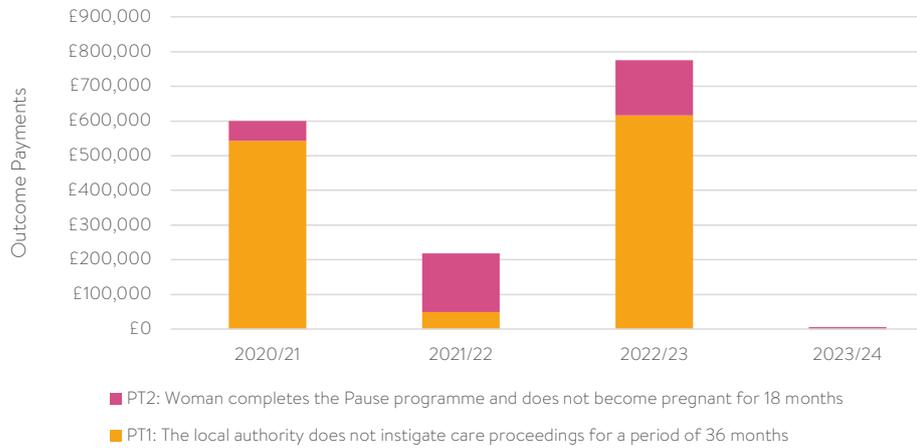


Figure 9.4 Outcome payments for the Pause Project – Plymouth across fiscal years 2020/21 and 2023/24⁷⁸

Figure 9.3 shows outcome payments for the Pause Project. The project received £390,447 for women completing the Pause programme and not becoming pregnant for 18 months, and £1,208,536 for women not having further episodes of care proceedings for 36 months. In total, the project received £1,598,983 from the LCF and Plymouth County Council.

Figure 9.4 shows the distribution of outcome payments across fiscal years. The year 2023/24 only has outcome payments of £6,268 (which are not visible given the scale of the figure). This is because the last outcome payment claim was capped as per the contract with the local authority and the LCF. The payments for the quarter April – June 2023 should have been £41,023 but were capped at £6,268. Therefore, the value of the outcomes created by the Pause Project was £1,633,738, but the actual payments received were £1,598,983.

	Planned	Actual
Total investment commitment	£1,100,000	£721,000
Maximum outcome payments	£1,623,872	£1,598,983

Table 9.2 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

Table 9.2 shows that the project used less investment capital than initially planned, due to further refinement of the financial model which resulted in the service needing less investment capital than anticipated. The project was very close to achieving the maximum potential outcome payments under the LCF, which could have been achieved had the last payment not been capped.

⁷⁸ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 9.3 Project's cost distribution

	Planned	Actual
Investment cost	£251,118 (16%)	£0 (0%)
Management cost	£105,816 (6%)	£13,703 (1%)
Evaluation and learning cost	£25,000 (2%)	£25,000 (2%)
Delivery cost	£1,217,751 (76%)	£1,472,216 (97%)
Total cost	£1,599,685 (100%)	£1,510,919 (100%)

[Please check the Glossary section to find definitions for these terms]

Table 9.3 presents the total cost and cost distribution for the Pause Project. In the end of project reporting, the Pause Project explained that investment cost was reported as £0 as they had access to pro-bono support for legal advice and SPV set up. Management costs were also significantly lower than expected, as the project reallocated that portion of funding to contribute to other delivery innovations. Evaluation and learning costs remained the same between initial forecast and actual costs. Delivery costs were higher than expected, but funding was reallocated from other categories to support a series of innovations in the delivery of the programme. In total, the Pause Project in Plymouth costed £1,510,919.

TEN

PARENTCHILD+



Project delivery dates:

June 2019 –
September 2023



Location:

Royal Borough
of Kensington and
Chelsea and City
of Westminster.



Planned size of cohort:

198 service users

Actual size of cohort:

214 service users



**Planned investment
commitment:**

£100,000

**Actual investment
committed:**

£100,000



Summary:

ParentChild+ aimed to narrow the gap in school readiness between vulnerable children and their peers. The service targeted families with a child aged 2-3 who do not meet age related goals on speech and language, and social-personal skills assessed by the Ages and Stages Questionnaire during the national 2-year-old checks.



Involved organisations:

- Commissioners: Bi-borough Children’s Services – Royal Borough of Kensington and Chelsea and City of Westminster, and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: CAF Venturesome
- Service providers: Family Lives
- Intermediary: Ecorys and ATQ (feasibility study)



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£1,107,287

**Total outcome payments under the LCF
(from the LCF and commissioners):**

£1,107,197 [LCF: £332,187 (30%)]



Primary outcome:

Narrow school readiness gap by improving early speech and language, and personal-social-emotional skills⁷⁹.

- Planned achievement: speech and language skills improvement at ASQ level for 94 children (original cohort)
- Planned achievement: socio-personal skills improvement at ASQ level for 94 children (original cohort)
- Planned achievement: speech and language skills improvement at EYFS (Early Years Foundation Stage) for 77 children (original cohort)
- Planned achievement: socio-personal skills improvement at EYFS for 77 children (original cohort)
- Actual achievement: speech and language skills improvement at ASQ level for 87 children (original cohort)
- Actual achievement: socio-personal skills improvement at ASQ level for 84 children (original cohort)
- Actual achievement: speech and language skills improvement at EYFS for 28 children (original cohort)
- Actual achievement: socio-personal skills improvement at EYFS for 34 children (original cohort)

79 New cohort targets and achievements are not reported in the main factsheet as the project has an outcome tracking window until September 2025 for the new cohort.

OUTCOME METRICS

Table 10.1 Outcome metric structure for the original cohort in ParentChild+

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: narrow school readiness gap by improving early speech and language, and personal-social-emotional skills. Primary Outcome.	PT1: speech and language skills at ASQ level for 94 children within 16 months of starting the project.	£1,794
	PT2: social-personal skills at ASQ level for 94 children within 16 months of starting the project.	£1,794
	PT3: speech and language skills at EYFS level for 77 children within 39 months of starting the project.	£547
	PT4: social-personal-emotional skills at EYFS level for 77 children within 39 months of starting the project.	£547
Metric 2: parenting sense of competency.	PT5: parental self-efficacy increased by 5% over 15 months of the project compared to baseline assessment.	£448
Metric 3: successful participation and completion of the programme.	PT6: beneficiaries initially engage with the programme.	£674
	PT7: beneficiaries complete the first cycle of the programme.	£1,720
	PT8: beneficiaries complete the second cycle of the programme.	£1,166

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: narrow school readiness gap by improving early speech and language, and personal-social-emotional skills. Primary Outcome.	PT1: speech and language skills at ASQ level for 30 children within 16 months of starting the project.	£1,757
	PT2: social-personal skills at ASQ level for 30 children within 16 months of starting the project;	£1,757
	PT3: speech and language skills at EYFS level for 25 children within 39 months of starting the project.	£536
	PT4: social-personal-emotional skills at EYFS level for 25 children within 39 months of starting the project.	£536
Metric 2: parenting sense of competency.	PT5: parental self-efficacy increased by 5% over 15 months of the project compared to baseline assessment.	£439
Metric 3: successful participation and completion of the programme.	PT6: beneficiaries initially engage with the programme.	£661
	PT7: beneficiaries complete the first cycle of the programme.	£1,573
	PT8: beneficiaries complete the second cycle of the programme.	£1,142

Table 10.2 Outcome metric structure for the second cohort in ParentChild+

Tables 10.1 and 10.2 show the outcome metric structure for ParentChild+. There were two separate rate cards for the original and second cohorts of the programme, with different targets and prices. Both cohorts were pursuing the same outcomes around reducing the school readiness gap in young children, increasing parental self-efficacy and ensuring the successful completion of the programme. The creation of new payment triggers for the second cohort was motivated by the expansion of the service to include a group of families in Grenfell. The Royal Borough of Kensington and Chelsea decided to widen the lower age of children accepted into the programme as the families who needed the intervention the most had children just below the original age threshold (2 years old). ParentChild+ started working with a new (second) cohort that accepted 18-month-old children. As the service was already in place, the provider was able to absorb additional children at a lower cost.

These outcome metrics and payment triggers did not change during the life of the service, except for the COVID pandemic period. Between April 2020 and March 2021, ParentChild+ switched to a grant-based payment mechanism. This means that payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.

Outcome achievements and results

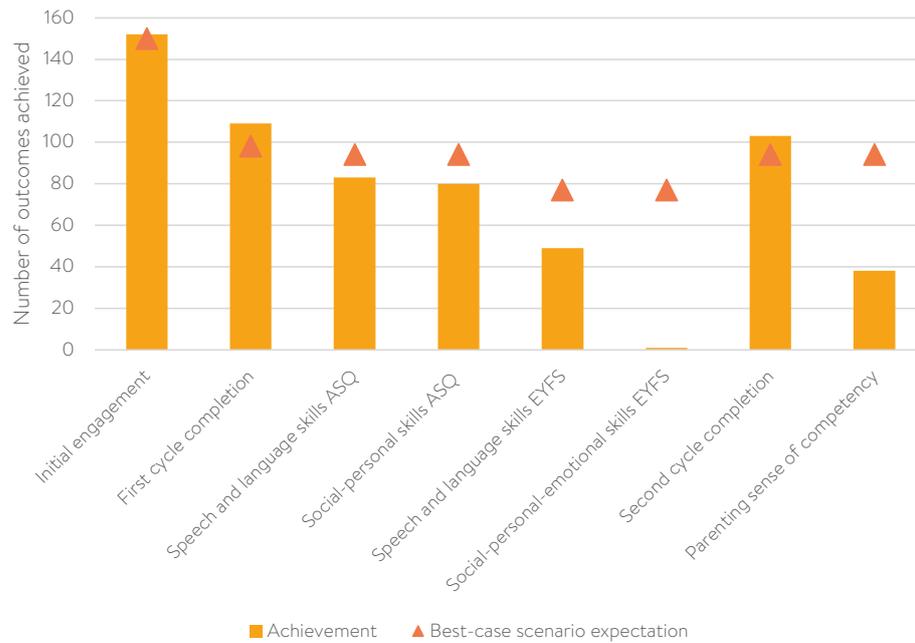


Figure 10.1 Outcomes achieved by ParentChild+ for the original cohort as of September 2024 (at payment trigger level)

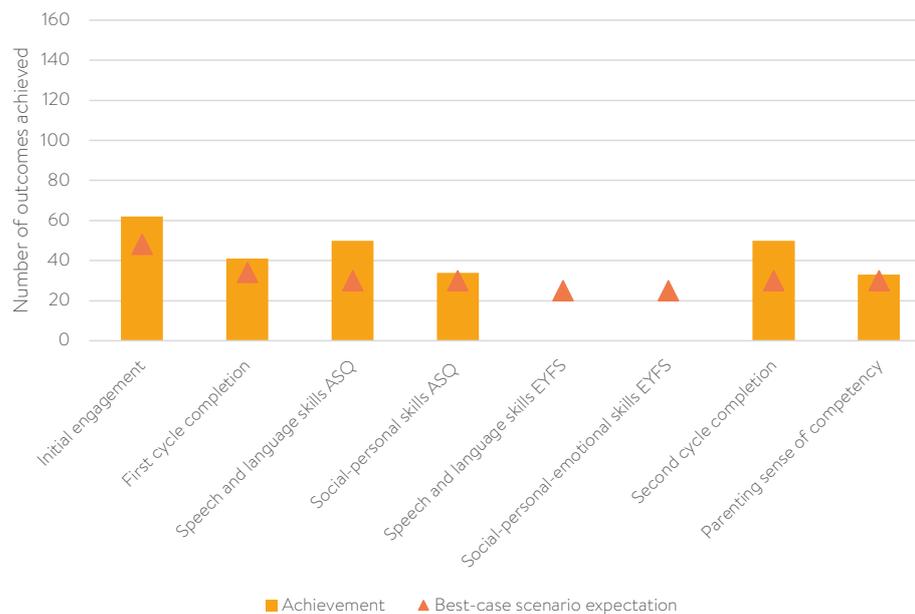
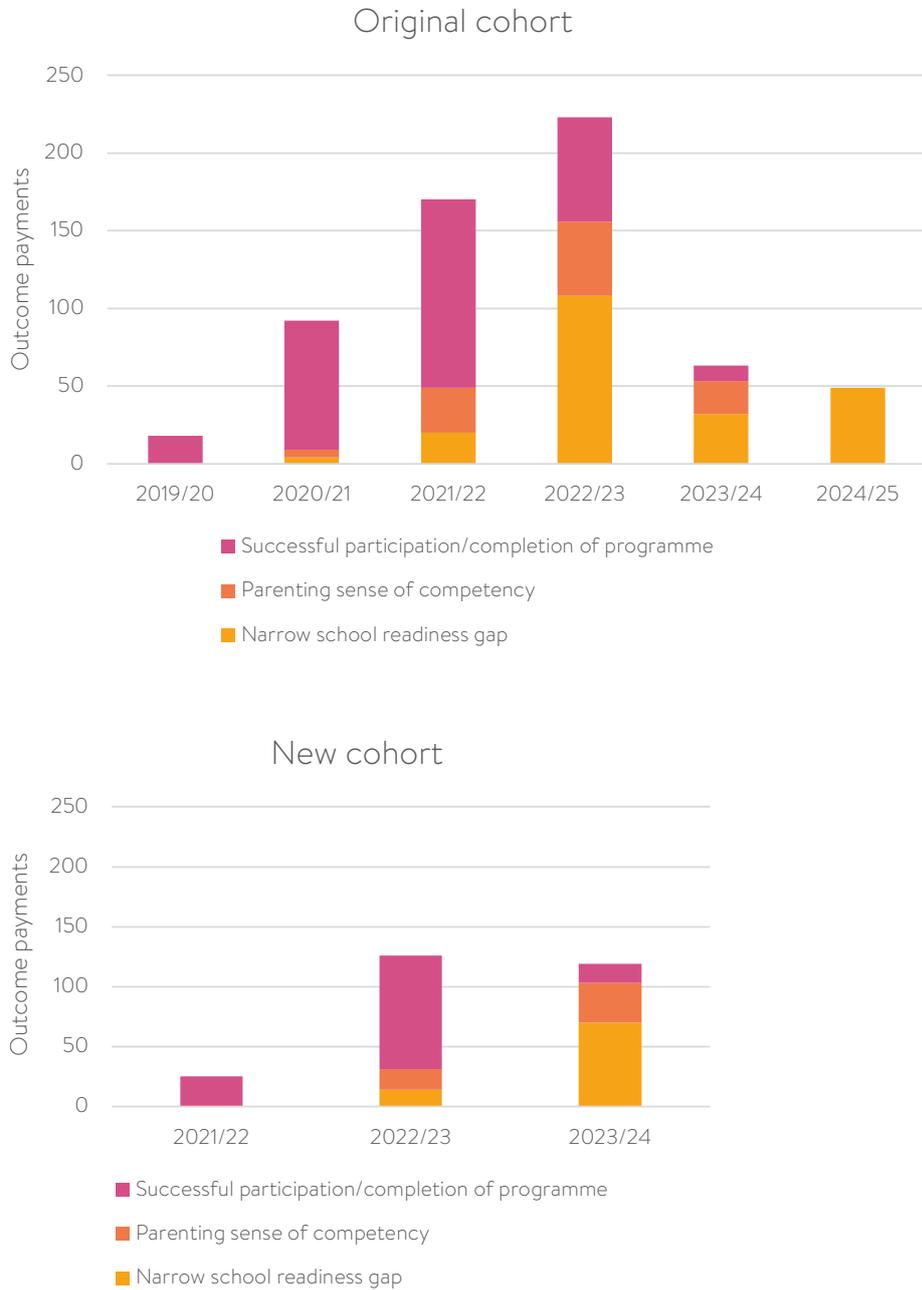


Figure 10.2 Outcomes achieved by ParentChild+ for the second cohort as of September 2024 (at payment trigger level)

Figure 10.3. Outcomes achieved by ParentChild+ across fiscal years 2019/20 and 2024/25 (at outcome metric level)⁸⁰



Figures 10.1, 10.2 and 10.3 show outcome achievements for ParentChild+ between 2019 and 2024. ParentChild+ divided their service users in two cohorts: the first one (original cohort) started in 2019 and second one (new cohort) started in 2021. ParentChild+ kept tracking outcome achievements for their children and families after September 2024 given that some outcome metrics can only be evidenced once children are 5 years old, and the second cohort started later than anticipated.

⁸⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Outcomes achieved after September 2024 are not accounted for in this evaluation report. Hence, this data should be considered as interim results only based on the LCF tracking period.

The outcomes pursued for both cohorts were the same, but with different prices and targets. Figures 10.1 and 10.2 present achievements at the payment trigger level, which is the most granular level for the LCF projects. Figure 10.3 presents achievements clustered in broader outcome metrics: successful participation and completion of the programme, parenting sense of competency and narrowing the school readiness gap.

Figure 10.1 indicates that ParentChild+ has reached the best-case scenario target for the metrics 'initial engagement', 'first cycle completion' and 'second cycle completion'. For the original cohort, 100% of expected families engaged with the programme. The number of children completing the first and second cycle of the programme was higher than originally expected (higher than best-case scenario).

The project was close to reaching the targets for 'speech and language skills at ASQ level' (88%) and 'socio-personal skills at ASQ level' (85%). The service did not reach the targets for 'speech and language skills at EYFS level', 'socio-personal skills at EYFS level', and 'parenting sense of competency'. However, the service is still tracking outcome achievements for both cohorts after September 2024, so these outcomes might have been achieved and evidenced after the cutoff date for this report. In addition, it is worth mentioning that EYFS assessments were planned for children reaching the age of 5. This means that some children in this programme, which was specifically targeting children aged 2 to 3, need to wait for two more years to take this assessment.

Figure 10.2 indicates that ParentChild+ achieved all best-case scenario targets for the second cohort, except for 'speech and language skills at EYFS level' and 'socio-personal skills at EYFS level'.

The project reported having problems with keeping track and evidencing two particular outcomes. Due to the need to wait until children were 5 to take the EYFS assessment, the project had to keep track of some children for a longer period of time. This proved difficult for the service as some families moved abroad or children did not enter mainstream education (eg. specialist educational needs and disability (SEND) or independent schools). When children were not assessed using EYFS achievements in their new schools, the outcome could not be claimed.

Keeping track of parental self-efficacy during the COVID pandemic was also challenging. This outcome was evidenced by completing a 'Becoming a parent' (BAP) questionnaire, administered by the evaluators at Warwick University. The project reported having issues with getting the questionnaires completed and returned. In addition, the provider needed to assist with completion for parents who did not speak English as a first language.

The project highlighted that recruitment of families was difficult at the beginning, due to limited referrals from health visitors, particularly in areas where the provider had fewer connections. However, there was an increase in referrals from speech and language therapists and health visitors following the easing of COVID-19 restrictions, and an increase in self-referrals and referrals from other sources as the project became more widely known in the areas.

Outcome payments and project's cost

Figure 10.4 Outcome payments paid to ParentChild+ between 2019 and 2024

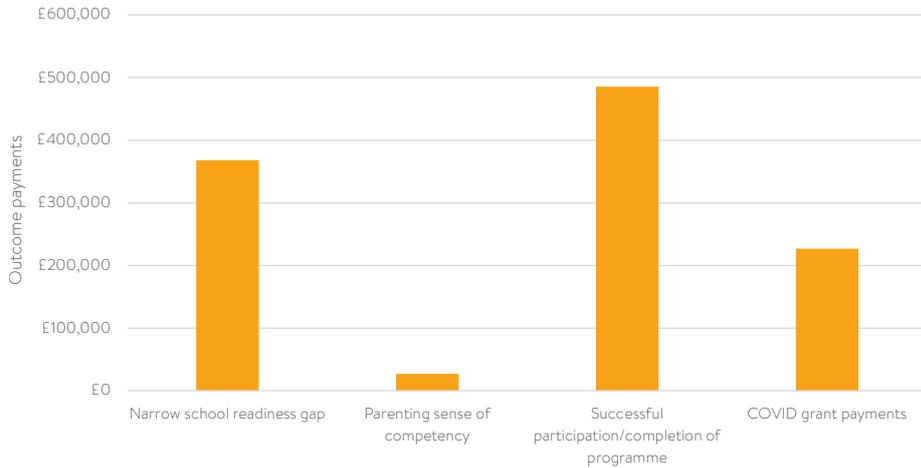


Figure 10.5 Outcome payments paid to ParentChild+ by fiscal year (2019/20 -2024/25)⁸¹

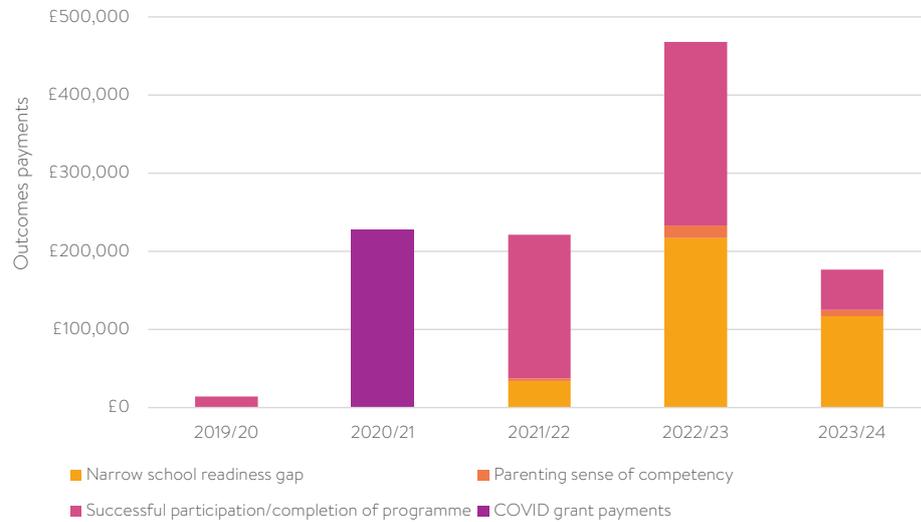


Figure 10.4 shows the outcome payments for ParentChild+. The project received £367,965 for outcome related to narrowing the school readiness gap; £27,103 for outcomes around increasing parenting sense of self-competency; £485,139 for participation and completion of first and second cycle; and £226,990 for COVID grants. In total, the project received £1,107,197.

Figure 10.5 presents the distribution of payments for ParentChild+ across fiscal years. The project received £14,224 in fiscal year 2019/20, £226,990 in 2020/21 (COVID grants), £221,257 in 2021/22, £468,088 in 2022/23 and £176,638 in 2023/24. There were outcome achievements in 2024/25, but the project did not receive payments in that year. That is due to the project reaching all its caps earlier than anticipated, drawing down all the LCF award and commissioner payments in 2023.

⁸¹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

	Planned	Actual
Total investment commitment	£100,000	£100,000
Maximum outcome payments	£1,107,287	£1,107,197

Table 10.3 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

Table 10.3 shows that CAF Venturesome invested as much funding as initially planned. The project practically achieved the planned maximum outcome payment.

	Planned	Actual
Investment cost	£40,700 (4%)	£12,788 (1%)
Management cost	£46,197 (4%)	£45,832 (4%)
Evaluation and learning cost	£40,000 (4%)	£40,000 (4%)
Delivery cost	£970,190 (88%)	£983,780 (91%)
Total cost	£1,097,087 (100%)	£1,082,400 (100%)

Table 10.4 Project's total cost and cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 10.4 shows the project's total cost and cost distribution. The service costed almost the same amount as forecasted. There was a reduction in investment costs. The project reported having repaid their loan earlier than anticipated, which resulted in less interest for them. The savings from the investment costs were allocated to service delivery.

ELEVEN

WEST LONDON ZONE (ALLCHILD), PLACED-BASED SUPPORT FOR CHILDREN AND YOUNG PEOPLE: SCALE-UP

**Project delivery dates:**

August 2019 –
July 2024

**Location:**

London
Boroughs (Brent,
Westminster,
Kensington and
Chelsea, and
Hammersmith
and Fulham).

**Planned size of cohort:**

12,800 children
to potentially engage
with service and
2,420 children to
be fully supported
by project

Actual size of cohort:

2,255 children
supported by the
project under
the LCF⁸²

**Summary:**

All children who participated in this project faced various challenges, including economic disadvantage, emotional wellbeing, proficiency in English and Maths, school attendance and interpersonal relationships. The intervention was structured around each child's Individual Support Plan, which had four key components: informal engagement, formal engagement, developmental support, and specialised support from delivery partners.

**Involved organisations:**

- Commissioners: St Jons XXII Catholic School, Bevington Primary School, Wendell Park Primary School, Ark Swift Primary School, Bank of America, Brent Council, Westminster City Council, Royal Borough of Kensington and Chelsea, London Borough of Hammersmith and Fulham and the Department for Culture, Media and Sport (DCMS)⁸³
- Investors/fund managers: Bridges Fund Management
- Service providers: AllChild (formerly 'West London Zone')
- Intermediaries: Bridges Fund Management

**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£16,244,960

**Total outcome payments under the LCF
(from LCF and commissioners):**

£16,112,650⁸⁴ [LCF: £4,612,082 (29%)]

⁸² Data on actual size of cohort and supported service users is according to the end of grant form.

⁸³ The project works with more schools in different London Boroughs, but their names were not recorded in the DCMS Data Portal. The project states that they have worked with 50+ Primary and Secondary Schools.

⁸⁴ The project reported a total outcome payment of £18,021,546, but this could not be verified through the DCMS Data Portal.



**Planned investment
commitment:**

£1,400,000

**Actual investment
committed:**

£1,400,000



Primary outcome:

Child achieves at least one outcome on the AllChild rate card to set a foundation for successful development into adulthood (eg.) less likely to go on to experience NEET-status and/or crime and/or poor wellbeing by adulthood and more likely to achieve goals for work, college, or university.

- Planned achievement: 1,487 children to achieve at least one outcome from the AllChild rate card
- Actual achievement: 1,352 children achieved at least one outcome from the AllChild rate card (DCMS Data Portal)⁸⁵

⁸⁵ The figure of 1,352 from the DCMS Data Portal at September 2024 does not include outcomes achieved by the project before the end of July 2024 due to late submission of data. As indicated in the end of grant reporting provided by the project, 2,024 children achieved at least one outcome from the AllChild rate card (see Appendix 1).

OUTCOME METRICS

Table 11.1 Outcome metrics for West London Zone, now rebranded as AllChild

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: majority of children/families identified by AllChild give consent to participate in the programme and would otherwise be unlikely to participate in any services.	PT1: parent consent given to participate	£1,680
	PT2: 6 or more logged interactions with Parent Plus – at least 75% attendance at scheduled partner support.	£1,675
Metric 2: participating children engage with support to a 'high' level so that they are more likely to achieve the primary outcome.	PT3: child signs up to the programme	£1,680
	PT4: child engages with support	£1,675
Metric 3: child achieves at least one outcome on the AllChild rate card to get on track to flourish in adulthood (eg.) less likely to go on to experience NEET-status and/or crime and/or poor wellbeing by adulthood and more likely to achieve goals for work, college, or university. Primary Outcome.	PT5: child achieves one outcome from AllChild rate card	£1,556
	PT6: child achieves two outcomes from AllChild rate card	£3,113
	PT7: child achieves three outcomes from AllChild rate card	£4,670

Table 11.1 shows the latest outcome metric structure for AllChild. This structure has not changed in the entire life of the project, except for the period between July 2020 – September 2020, when the project switched to a grant-based payment scheme due to the COVID pandemic. The AllChild rate card with detailed descriptions of the desired outcomes for children can be found in Appendix 3.

Outcome achievements and results

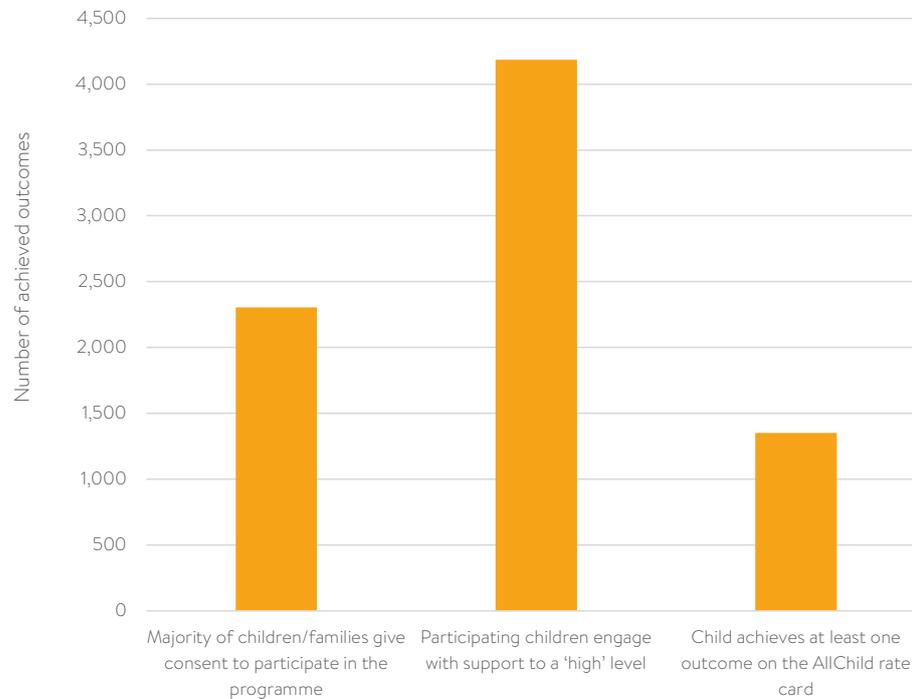


Figure 11.1 Outcomes achieved by AllChild between 2019-2024

Figure 11.1 shows outcome achievements for AllChild between 2019 and 2024 as recorded on the DCMS Data Portal at the end of September 2024. The DCMS Data Portal could not support the level of detail required to capture granular data on AllChild’s payment triggers. Thus, Figures 11.1 to 11.4 show outcome achievements at the outcome metric level (detailed in Table 11.1).

Payment triggers around parents giving consent and parents interacting with Parent Plus are clustered under metric 1. This outcome has been triggered 2,150 times in the DCMS Data Portal. These 2,150 triggers include parents giving consent for their families to participate in the programme (payment trigger 1) and their interactions with the Parent Plus programme (payment trigger 2). This consent does not mean that all these families and children were fully engaged and supported by the programme. The project reported that some families moved schools or moved to different areas of London so did not stay for the entire length of the service.

Payment triggers around children signing up and engaging with the programme are clustered under metric 2. Outcome metric 2 has been triggered 4,185 times in the DCMS Data Portal. This includes children engaging with the service (payment trigger 3) and children engaging with full support from AllChild (payment trigger 4). According to the end of grant form, the programme supported a unique number of 2,255 children.

As of September 2024, outcome metric 3 (child achieves at least one outcome on the AllChild rate card) has been triggered 1,352 times. Some children achieved one outcome (payment trigger 5), some of them two outcomes (payment trigger 6) or three outcomes of the AllChild rate card (payment trigger 7).

It is worth noting that the project finished service delivery in July 2024, but evidence was still outstanding on the achievements of the final students supported by this programme. In the end of grant form, the project took into account outcomes achieved or evidenced after September 2024 and reported 2,024 children achieving at least one outcome from the AllChild rate card (against an initial expectation of 1,487). According to data provided by the project, a total of 1,570 children achieved three of more outcomes on the AllChild rate card. The data reported by AllChild for the end of grant reporting can be found in Appendix 1.

Figure 11.2 Outcomes achieved by AllChild across fiscal years 2019/20 – 2024/25⁸⁶

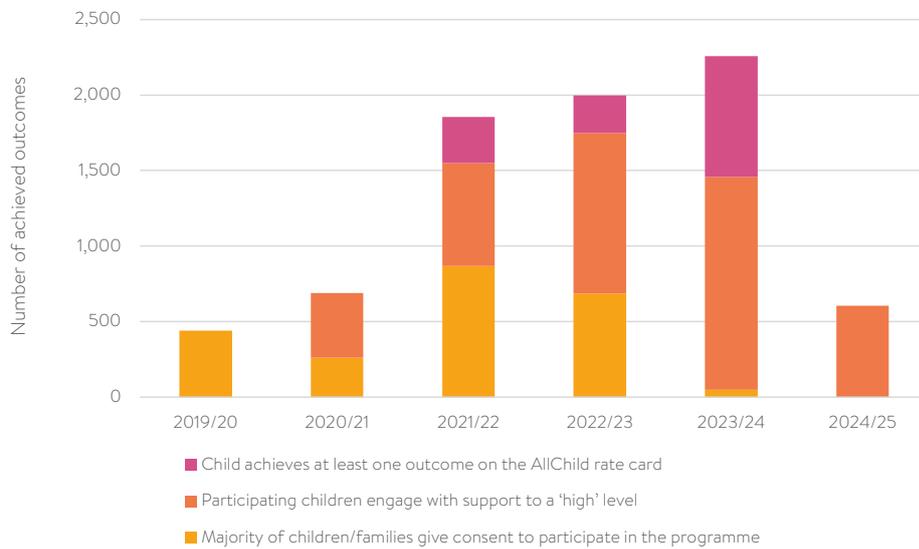


Figure 11.2 shows the distribution of outcomes across fiscal years, with 2023/24 being the year with the highest achievements.

The project reported a series of system-level effects from this partnership. A key goal behind this contract was to prove that this early intervention model could work at scale across West London⁸⁷. This goal was achieved, and the project reported that AllChild managed to renew their service contract with the London Boroughs of Westminster, Brent, and Kensington and Chelsea, without LCF support.

⁸⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

⁸⁷ This project had been tested as a SOP before in the London Boroughs of Kensington and Chelsea, and Hammersmith and Fulham, with outcomes funding from Commissioning Better Outcomes Fund.

Outcome payments and project's cost

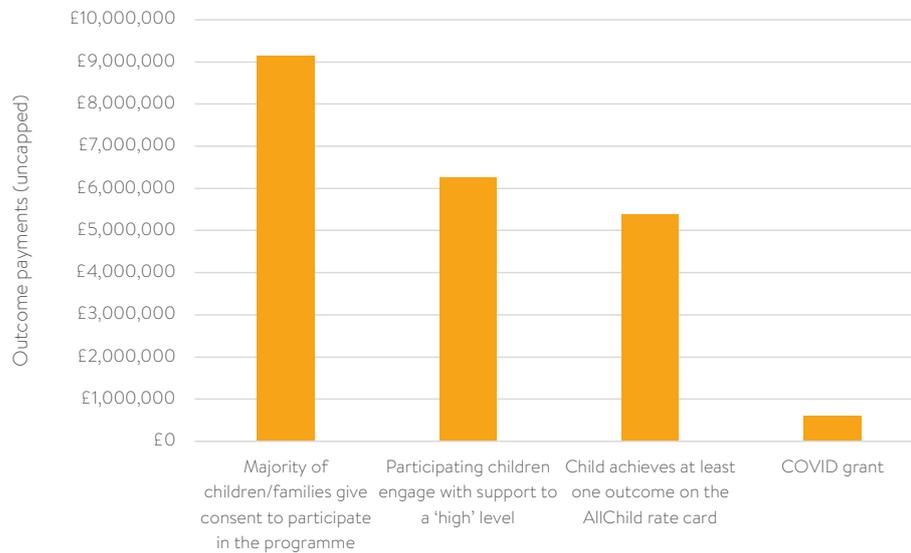


Figure 11.3 Value of uncapped outcomes for AllChild between 2019-2024

Figure 11.3 shows the total (uncapped) value for the outcomes achieved by AllChild between 2019 and 2024, as recorded on the DCMS Data Portal by September 2024. The project achieved £9,132,097 for families giving consent to participate in the programme, £6,246,695 for children engaging with support to a high level and £5,392,321 for children achieving at least one outcome from the AllChild rate card. Additionally, the project received £600,225 for the period between July – September 2020 as a COVID grant. The total value of these outcomes (including the COVID grant) is £21,371,338. However, the local commissioners had a series of caps in place, which meant that the payments for the quarter July – September 2023 were capped. As of September 2024, the project received, under the LCF, £16,112,650 for outcome payments (including COVID grants). In December 2024 the project submitted its final figures, including the outcomes achievements that were not recorded by the cutoff date of September 2024. They reported £18,021,546 in total outcome payments (including COVID grants).

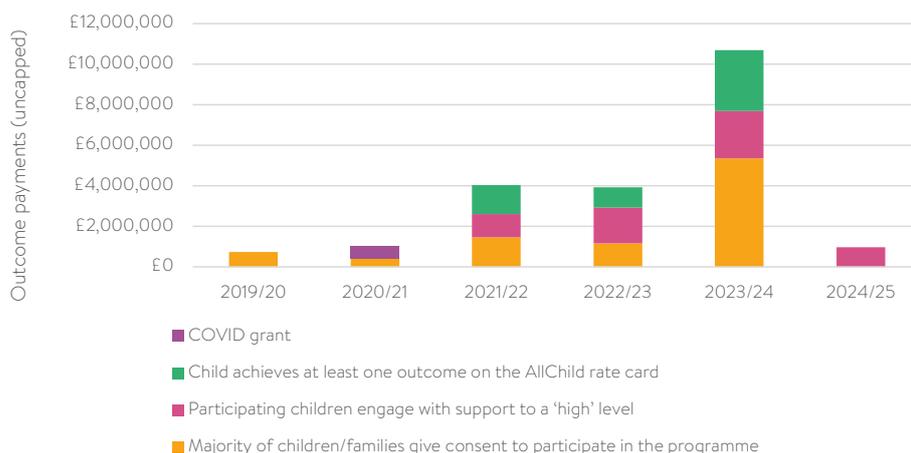


Figure 11.4 Value of uncapped outcomes for AllChild across fiscal years 2019/20 and 2024/25⁸⁸

⁸⁸ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 11.2 Planned and actual investment and maximum potential outcome payment

Figure 11.4 shows the total value of outcome payments and their distribution across fiscal years, with 2023/24 being the year with the highest outcomes value. This is not the total outcome payments that the project received in 2023/24. As mentioned in the paragraph above, payments for July - September 2023 were capped from £7,699,163 to £2,440,475⁸⁹.

	Planned	Actual
Total investment commitment	£1,400,000	£1,400,000
Maximum outcome payments	£16,244,960	£16,112,650

[Please check the Glossary section to find definitions for these terms]

Table 11.2 shows that the project received as much investment as originally planned. The project was very close to achieving the maximum potential outcome payment (which would have happened if some quarterly payments had not reached a local commissioner's cap).

Table 11.3 Project's cost distribution

	Planned	Actual
Investment cost	£759,362 (5%)	£0 (0%)
Management cost	£1,056,343 (7%)	£0 (0%)
Evaluation and learning cost	£561,485 (3%)	£1,194,976 (7%)
Delivery cost	£13,867,770 (85%)	£15,626,051 (93%)
Total cost	£16,244,960 (100%)	£16,821,027 (100%)

[Please check the Glossary section to find definitions for these terms]

⁸⁹ It is not possible to build a visualisation comparing capped and uncapped outcome payments for AllChild as the DCMS Data Portal did not capture which outcome payments were capped, but rather captured the cap to the final quarterly payment.

Table 11.3 presents the total cost and cost distribution for AllChild. In the end of project reporting, AllChild explained that these cost categories are estimations as of February 2025, given that the full financial reconciliation has not occurred yet.

The actual cost of investment and management was reported as £0. The project explained that they had accessed pro-bono legal advice and SPV set-up. In addition, repayment to investors has not happened yet, which means that there is no investment repayment to report at the time of writing. Management cost was reported as £0. The project explained that they did not contract an external organisation to do performance management. All performance management tasks were undertaken by AllChild. The project acknowledged that they had interpreted the cost categories definitions differently when completing the baseline forms. AllChild described themselves as an outcomes-focused organisation, which means that they consider management tasks and costs as embedded in their organisation (hence not externalising SOP management cost).

Evaluation and learning costs were higher than initially planned, but this is explained by the organisation including not just their external evaluation, but also their internal learning costs under this category. Their internal learning includes the internal cohort identification process, monitoring, evaluation and impact tracking/programme development.

Delivery cost was higher than expected. The project explained that they reached the LCF and other commissioners' caps earlier than expected. They were required to fundraise philanthropic funding to compensate for the capped funding. In practice, this meant that business development and fundraising costs were higher for the project.

LCF EVALUATION REPORT

YOUNG PEOPLE PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
FutureImpact	August 2018	Nottingham	DCMS Data Portal	
DFN-MoveForward UK	September 2018	London, West Midlands and Kent	DCMS Data Portal	
Big Picture Learning in Doncaster	January 2019	Doncaster	DCMS Data Portal	
The Skill Mill	August 2020	Birmingham, Croydon, Durham, Leeds, Nottingham, Rochdale, Surrey, and West Sussex	DCMS Data Portal	
Chances	October 2020	Birmingham, Bristol, Coventry, Devon, Doncaster, Hartlepool, Middlesborough, Newcastle, North Tyneside, Northumberland, Oxford, Redcar and Cleveland, Shropshire, Stockton, Sunderland, Southampton, Teesside, Wigan, and London Boroughs (Islington, Lambeth, Harrow, Waltham Forest)	DCMS Data Portal	
Gloucestershire Positive Behaviour Support	October 2020	Gloucestershire	DCMS Data Portal	✓

TWELVE

FUTURE IMPACT



Project delivery dates:

August 2018 –
July 2023



Location:

Nottingham



Planned size of cohort:

1,180 service users

Actual size of cohort:

854 service users



Planned investment commitment:

£498,000

Actual investment committed:

£498,000



Summary:

FutureImpact coaches worked with young people with special educational needs and disabilities (SEND) to overcome problematic behaviours, build capacity, resilience and confidence, and sustain their progress. The service targeted 15-24 year olds who are not in education, employment or training (NEET)/at risk of NEET, who have SENDs or demonstrate complex needs, and who have had contact with, or are on the fringes of entry into the youth justice system.



Involved organisations:

- Commissioners: Nottinghamshire County Council, Nottingham City Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Social and Sustainable Capital and Future Advice Skills and Employment Ltd
- Service providers: Future Advice Skills and Employment Ltd
- Intermediaries: Triodos Bank



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£3,288,900

Total outcome payments under the LCF (from the LCF and commissioners):

£3,103,050 [Life Chances Fund: £1,086,069 (35%)]



Primary outcome:

Wellbeing assessment completed (young person demonstrates increased resilience, social inclusion and capacity for independent living, ability and knowledge to support career planning and further education/training).

- Planned achievement: 2,487 wellbeing outcomes (one person could achieve several wellbeing outcomes)
- Actual achievement: 2,167⁹⁰ wellbeing outcomes

90 In the end of grant report, FutureImpact reported an achievement of 2,796 wellbeing outcomes, but this could not be verified through the DCMS Data Platform. The end of grant report data can be found in the Appendix of this report.

OUTCOME METRICS

Table 12.1 Outcome metrics for FutureImpact

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: young person demonstrates increased resilience, social inclusion and capacity for independent living, ability and knowledge to support career planning and further education/training. Wellbeing assessment completed. Primary Outcome.	PT1: initial wellbeing assessment	£500
	PT2: second wellbeing assessment	£500
	PT3: third wellbeing assessment	£200
	PT4: fourth wellbeing assessment	£200
	PT5: fifth wellbeing assessment	£200
Metric 2: young person achieves in education and/or training	PT6: entry into education or training	£500
	PT7: individuals 1st Entry level 1, 2 and/or 3 qualification	£1,500
	PT8: individuals achieve NVQ level 1 or equivalent	£2,500
	PT9: individuals achieve full NVQ level 2 and above or equivalent or apprenticeship	£3,500
	PT10: 13 weeks apprenticeship sustainment	£4,500

Metric 3: young person progresses in volunteering and employment.	PT11: entry into volunteering	£500
	PT12: 13 weeks volunteering	£500
	PT13: 26 weeks volunteering	£250
	PT14: entry into full-time (F/T) employment	£500
	PT15: 13 weeks F/T employment	£4,500
	PT16: 26 weeks F/T employment	£3,500
	PT17: entry into part-time (P/T) employment (including zero-hours contracts)	£500
	PT18: 13 weeks P/T employment	£3,500
	PT19: 26 weeks P/T employment	£2,500

Table 12.1 shows the latest outcome metric structure for FutureImpact. This structure changed once, in October 2020, when a contract variation was agreed between the LCF and local commissioner and the project was allowed to account for part-time employment as payment triggers (payment triggers 17, 18 and 19).

Between April 2020 and September 2020, due to the COVID pandemic, FutureImpact switched to a grant-based payment agreement. Payments were based on a medium-case scenario forecast for the project, instead of outcome payments. FutureImpact still reported outcome achievements to the DCMS Data Portal during these grant-based quarters.

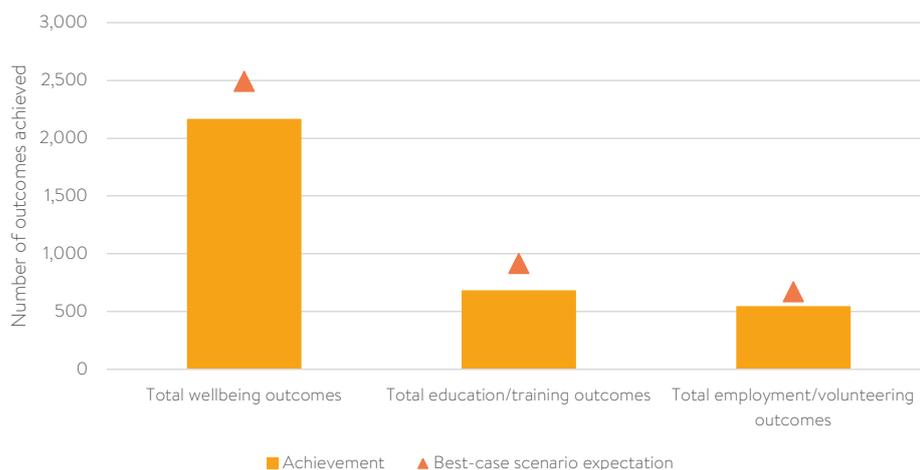


Figure 12.1 Outcomes achieved by FutureImpact

Outcome achievements and results

Figure 12.1 shows outcome achievements for FutureImpact between August 2018 and July 2023. The project reported outcome achievements at the outcome level, as opposed to the payment trigger level. The most accurate data for FutureImpact is therefore based on the outcome metrics around wellbeing, education and training, and employment and volunteering outcomes. FutureImpact achieved 2,167 wellbeing outcomes, 683 education and/or training outcomes and 547 employment and/or volunteering outcomes. The project was very close to reaching the best-case scenario targets⁹¹.

Figure 12.2 Outcomes achieved by Future Impact across fiscal years 2018/19 -2023/24⁹²

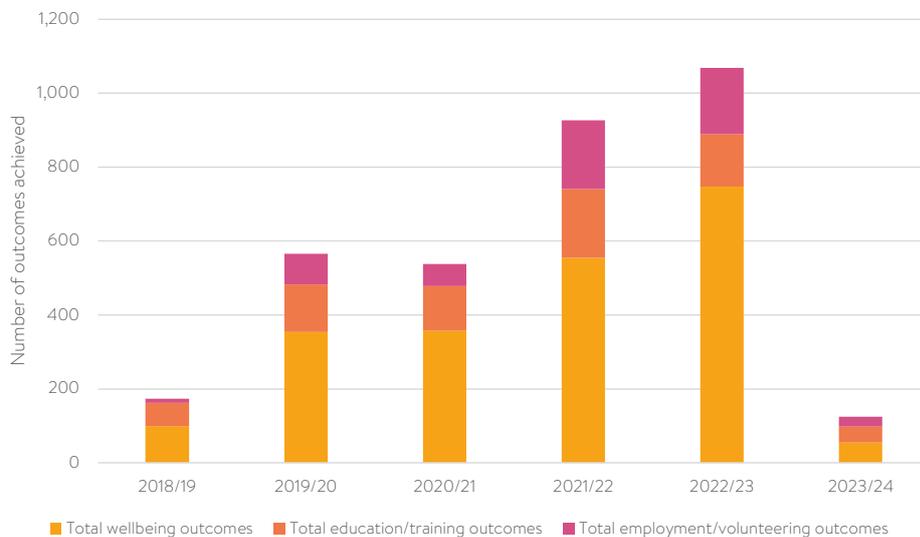


Figure 12.2 shows the distribution of outcomes across fiscal years 2018/19 and 2023/24, with the highest number of outcomes claimed between 2021 and 2022.

In the end of grant form, the project reported overachieving on some payment triggers and struggling with others. FutureImpact highlighted that well-being assessments were very well received by service users and played a significant role in the success of the project. The triggers on apprenticeships (payment triggers 9 and 10) were very popular among service users and FutureImpact managed to surpass initial expectations. Employment outcomes were slow to progress at the beginning, but achievements improved when part-time employment was included as a valid payment trigger, better reflecting the local job market and service user aspirations.

Other triggers presented more challenges for FutureImpact. More service users than initially expected already had level 1 qualifications, so FutureImpact coaches had to adapt and help service users to aspire to achieve level 2 and 3 qualifications. This means that it was difficult to reach the targets for entry level and level 1 qualifications, as there were very few service users that could use this metric. The volunteering metrics also presented difficulties. FutureImpact found it hard to source volunteering opportunities during the COVID pandemic. Additionally, most service users undertook a block of volunteering during 2 or 3 weeks, rather than a longer-term placement. A new agreement between provider and commissioner had to be put in place to recognise this new modality of volunteering as worthy of an outcome payment.

⁹² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

⁹¹ In the DCMS Data Portal, the targets are associated with payment triggers, not with outcomes; for this chapter, we have added these payment trigger targets together for each of the three overarching outcome metrics. This may not accurately reflect the performance expectations of FutureImpact.

Outcome payments and project's costs

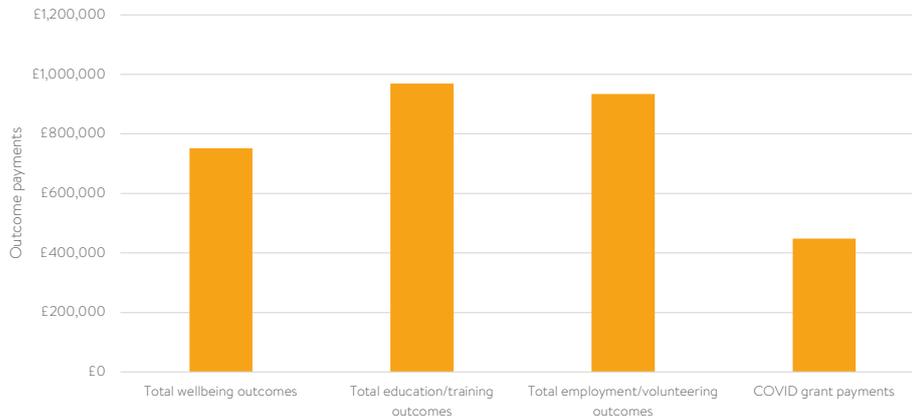


Figure 12.3 Outcome payments paid to FutureImpact

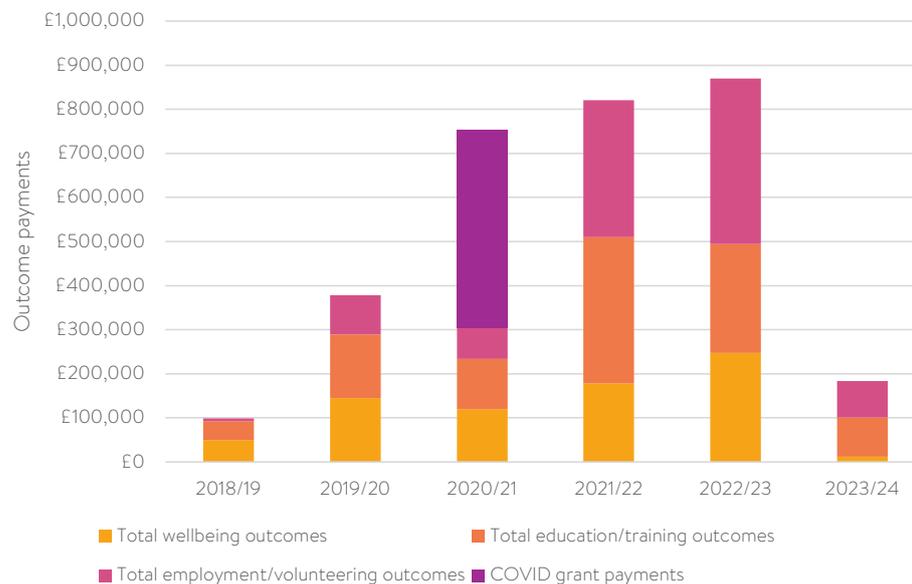


Figure 12.4 Outcome payments paid to FutureImpact across fiscal years (2018-2023)⁹³

Figure 12.3 presents total payments for each outcome metric in FutureImpact. In total, FutureImpact received £751,200 for wellbeing outcomes, £969,500 for education/training outcomes, and £933,750 for employment/volunteering outcomes. In addition, FutureImpact received £448,600 for COVID grants, with a total payment of £3,103,050.

Figure 12.4 shows the distribution of outcome payments across fiscal years. FutureImpact received £98,500 in 2018, £378,350 in 2019, £753,250 in 2020, £820,050 in 2021, £869,300 in 2022 and £183,600 in 2023.

⁹³ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 12.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£498,000	£498,000
Maximum outcome payments under the LCF	£3,288,900	£3,103,050

[Please check the Glossary section to find definitions for these terms]

Table 12.2 shows that the social investors for FutureImpact, Social and Sustainable Capital and Future Advice Skills and Employment Ltd, invested as much funding as initially expected in the projects. FutureImpact was very close to reaching the maximum potential outcome payment.

Table 12.3 Project's cost distribution

	Planned	Actual
Investment cost	£58,125 (2%)	£41,479 (1%)
Management cost	£408,930 (10%)	£419,463 (17%)
Evaluation and learning cost	£27,000 (1%)	£18,166 (1%)
Delivery cost	£2,795,415 (87%)	£2,046,381 (81%)
Total cost	£3,289,470 (100%)	£2,525,489 (100%)

[Please check the Glossary section to find definitions for these terms]

Table 12.3 presents the cost distribution for FutureImpact. Investment costs were lower than expected as the project agreed a different interest rate with the investor, due to the difficulties of the COVID pandemic. Evaluation and Learning costs were lower too, as the project benefited from a university research project that saved them the cost of an external consultant. Delivery costs were reduced as the project had an additional strand of work to support a youth justice cohort which was delayed due to the COVID pandemic and other recruitment pressures, generating some savings on delivery cost. Management costs were higher than expected as items included under the management cost umbrella changed during the course of the service.

THIRTEEN

DFN-MOVEFORWARD⁹⁴



Project delivery dates:

September 2018
– May 2024



Location:

London, West
Midlands and Kent



Planned size of cohort:

358 service users

Actual size of cohort:

283 service users



Planned investment:

£450,000

Actual investment:

£400,000



Summary:

DFN-MoveForward (DFN) supported young people aged 14-25 with mild to moderate learning disabilities, such as cognitive impairment and communication and interaction difficulties. The programme offered a framework of one-to-one coaching and action planning and included access to relevant careers information, advice, and guidance, as well as exposure to the world of work through insight days and work shadowing, etc.



Involved organisations:

- Commissioners: DFN Foundation and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: ThinkForward



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£1,683,620

**Total outcome payments under the LCF
(from the LCF and commissioners):**

£1,644,120 [LCF: £683,620 (41%)]



Primary outcome:

Young people with mild to moderate learning disabilities will enter and sustain paid employment.

- Planned achievement: 103⁹⁵ young people entering and sustaining employment
- Actual achievement: 61 young people entered and sustained employment

⁹⁴ This project is also known as 'ThinkForward', given the providers' name.

⁹⁵ The project self-reported a target of 78 in the end of grant report.

OUTCOME METRICS

Table 13.1 Outcome metric structure for DFN

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: young people are enrolled onto the DFN-MoveForward programme	PT1: metric 1 achieved within first 12 months.	£500
Metric 2: young people become work-ready through participation in 4+ workplace activities. Primary Outcome.	PT2: 4+ workplace activities undertaken within 12 months.	£2,000
Metric 3: young people complete the ThinkForward work skills BTEC/alternative in-school qualification (AQA units)	PT3: metric 3 achieved within 12 months.	£3,000
Metric 4: young people with mild to moderate learning disabilities will enter and sustain paid employment	PT4: metric 4 achieved within 12 months.	£8,000

DFN-MoveForward (DFN) did not request a formal variation agreement during service delivery. However, the project agreed small adjustments to the original targets, delivery methods and evidence requirements due to the difficulties of the COVID pandemic and the challenges of working with a cohort with severe learning disabilities:

- Metric 1: the original target of 278 enrolments into the programme was reduced to 262 in year 5, as ThinkForward proposed that it would be unfair to enrol new young people with limited time remaining for the service.
- Metric 2: the pandemic meant that the project was only able to offer online activities for a period, reducing the numbers of workplace participation activities during year 4.
- Metric 3: AQA units were introduced as an alternative to BTEC qualifications because they were considered to be more appropriate to the young people on the programme, could be tailored to service user needs, and did not duplicate qualifications young people were achieving in school and college. Although the LCF agreed with this change, the DFN Foundation would not recognise the use of AQA units and would not pay for any further outcomes achieved. The numbers of outcomes was therefore reduced in year 5, with the remaining AQA unit outcomes being paid for only by the LCF.

Outcome achievements and results

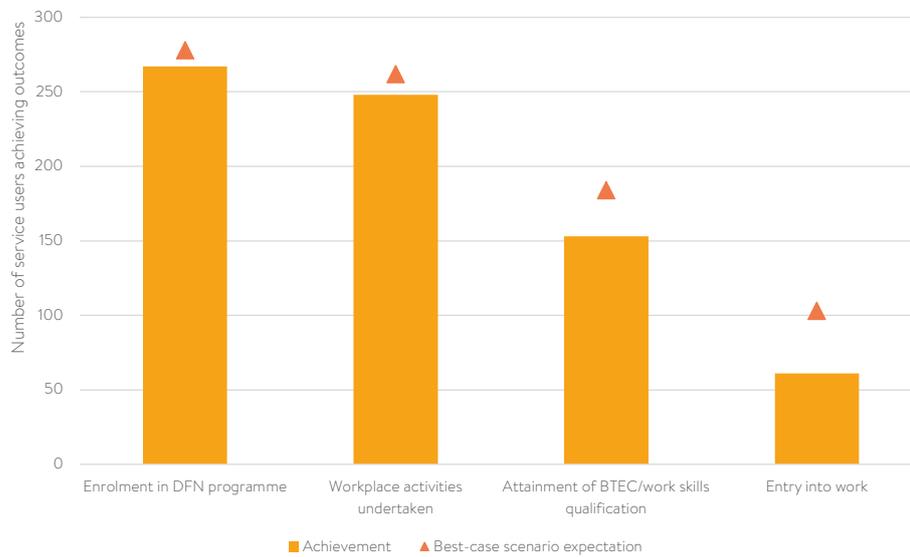


Figure 13.1 Outcomes achieved by DFN (2018-2023)

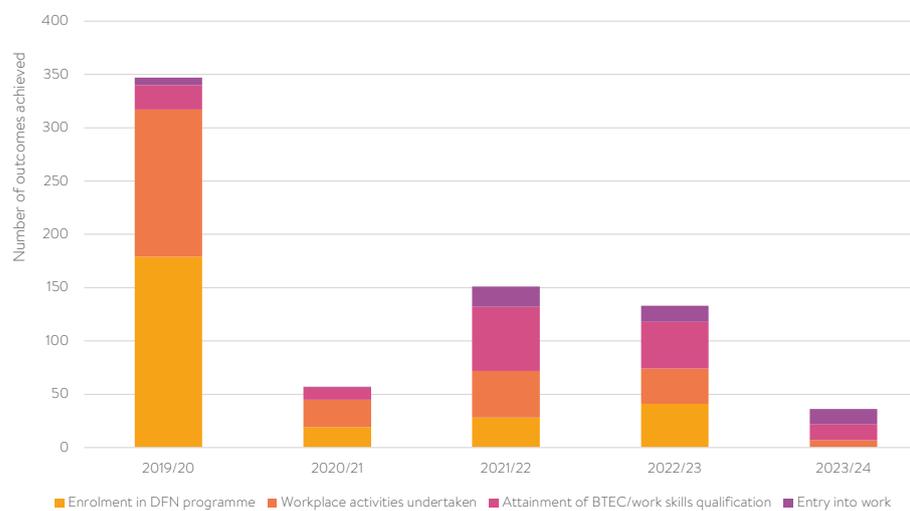


Figure 13.2 Number of outcomes achieved by DFN by fiscal year (2019/20-2023/24)⁹⁶

DFN worked with a cohort of 283 young people with mild to moderate learning disabilities. Figure 13.1 shows outcomes achievements and best-case scenario targets. As Figure 13.1 shows, DFN supported 267 young people to formally enrol in the programme (95% of total cohort). The main goal of the programme was to support service users into sustainable paid employment. Of these 267 young people, 248 (93%) undertook four or more workplace activities to become work-ready, and 153 (57%) gained a BTEC or AQA qualification during the life of the programme.

⁹⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

The project helped 61 young people into a sustained job of 16 hours or more per week (23% of enrolled service users). The pandemic had a severe impact on job outcomes during years 3 and 4 of the programme, during which time 24 of the originally targeted 39 job outcomes were achieved. The project was not able to make up for the missed outcomes in years 5 and 6.

A group of 20 young people (out of the 61 service users in employment) were in part-time employment at the end of the programme. The project found a number of reasons for young people opting for shorter working hours, including studying whilst working; a better fit with physical and mental health needs; and pay levels not crossing the threshold for stopping benefits, with potential impacts on household finances. It also allowed young people to engage in other activities which may support their longer-term outcomes, such as volunteering to gain further experience, or completing driving lessons. In addition, young people in the cohort were going through significant life changes, such as starting to live independently, and part-time hours at the start could support this transition. According to the project, once young people had their ‘foot in the door’, there was more likelihood of increasing their hours to suit their needs and desires. In contrast, if they had started in full-time positions, they might have become overwhelmed and less likely to sustain their job.

Beyond the outcome metrics payable under the social outcomes contract, ThinkForward also supported 90 young people to enter into supported internships to help with the transition into work. At the end of the programme, 11 individuals were still in a supported internship.

ThinkForward also recognised the importance of ensuring that employers were ready to accept young people with learning disabilities as part of their workforce. The project worked with around 50 employers to support them with training and guidance to take on young people, both as supported interns and employees. Employers reported that they valued the expertise and connections enabled by the programme, making engaging with young adults with learning disabilities more efficient and focused.

Figure 13.2 shows the distribution of outcomes across fiscal years, with year 2019/20 being the year with the highest achievements. It is worth noting that the first payment claims from DFN included achievements from 2018/19 and 2019/20 as well.

Outcome payments and project’s cost

Figure 13.3 Outcome payments paid to DFN

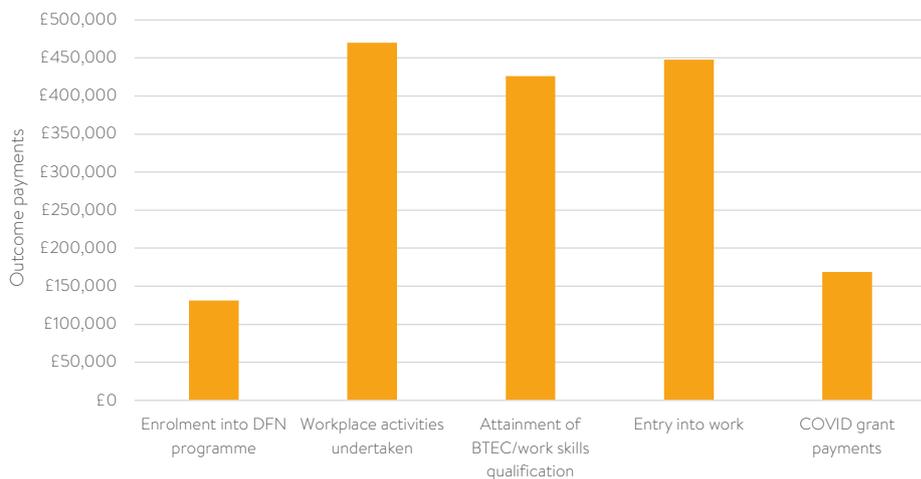




Figure 13.4 Outcome payments paid to DFN across fiscal years (2018/29-2023/24)⁹⁷

As shown by Figure 13.3 the project received £131,500 for enrolment into the programme, £470,000 for workplace activities undertaken, £426,000 for attainment of BTEC or AQA qualifications and £448,000 for young people entering into work. In total, DFN received £1,475,500 in outcome payments and £168,620 in COVID grant payments. In total, the project received payments of £1,644,120.

During the COVID pandemic, DFN switched to a medium-scenario grant payment modality. As shown in Figure 13.4, DFN received a COVID grant for the quarters April-June 2020 and July-September 2020. During this period, DFN received grant-based payments but still reported outcome achievements to the DCMS Data Portal.

	Planned	Actual
Total investment commitment	£450,000	£400,000
Maximum outcome payments under the LCF	£1,683,620	£1,644,120

Table 13.2 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

⁹⁷ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 13.3 Project's cost distribution

	Planned	Actual
Investment cost	£352,860 (15.46%)	£90,082 (4.26%)
Management cost	£240,155 (10.52%)	£372,024 (17.57%)
Evaluation and learning cost	£39,958 (1.75%)	£67,558 (3.19%)
Delivery cost	£1,649,597 (72.27%)	£1,587,399 (74.98%)
Total cost	£2,282,570 (100%)	£2,117,063 (100%)

[Please check the Glossary section to find definitions for these terms]

The final financial reconciliation for this project showed a slightly lower than anticipated number of outcomes achieved. Nevertheless, the project was able to draw down all the LCF funding (£683,620), due to the variation agreed whereby the LCF fully paid for a proportion of the academic qualifications after the inclusion of the AQA qualifications to claim for outcome metric 3 (see Table 13.1). The project was not able to claim for the full amount of outcomes funding from the commissioner.

There was a significant reduction in the cost of investment of the project compared to that modelled at the beginning of the programme, generating a £262,000 saving. This was due to the project not achieving as many job entry outcomes as initially predicted, and therefore the social investor not receiving a return on those missing outcomes. There was an increase in management and evaluation and learning costs.

The total amount of payments received by this project (see Table 13.2) is lower than the total cost of the project. The project also accessed other sources of funding to compensate for the funding gap, such as reserves and donations from schools involved in the programme.

FOURTEEN

BIG PICTURE LEARNING (BPL) DONCASTER



Project delivery dates:

January 2019 –
August 2024



Location:

Doncaster



Planned size of cohort:

541 service users

Actual size of cohort:

531 service users



Planned investment commitment:

£750,000

Actual investment committed:

£750,000



Summary:

The target population is children and young people aged 11-16 who are disengaged from education and showing early signs of crisis. Big Picture Learning works with young people in small advisory groups, as an alternative provision to Learning Centres and Pupil Referral Units. The service provides a stable and supportive learning environment, and designs learning programmes around the individual needs of each learner.



Involved organisations:

- Commissioners: City of Doncaster Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Big Picture Doncaster and Vega College



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£6,194,792

Total outcome payments under the LCF (from the LCF and commissioners):

£5,112,036 [LCF: £1,475,781 (29%)]



Primary outcome:

Personal Learning Plan (PLP) established

- Planned achievement: 465 PLP for KS3 and 65 for KS4
- Actual achievement: 372 PLP for KS3 and 77 for KS4

OUTCOME METRICS

Table 14.1 Outcome metrics for Big Picture Learning in Doncaster between July 2021 and August 2024

Stage	Outcome metric	Payment trigger	Price per payment trigger (per individual)
Key Stage 3 (KS3) ⁹⁸	Metric 1: engagement – Primary Outcome	PT1: Personal Learning Plan (PLP) established.	£2,368
	Metric 2: attendance	PT2: students will achieve an 80% attendance outcome against the attendance target set out in their PLP.	£2,537
	Metric 3: progress	PT3: verification of PLP will demonstrate a consistent standard of planning and impact and will support an overall evaluation of 'good' progress.	£2,537
	Metric 4: reintegration	PT4: review of PLP on completion of programme which will include support to the school and how learning can be continued in a mainstream setting.	£1,691

⁹⁸ Key Stage 3 (KS3) refers to the first three years of secondary school education, typically covering Years 7, 8, and 9, for students aged 11 to 14.

Key Stage 4 (KS4) ⁹⁹	Metric 1: engagement – primary outcome	PT1: PLP established.	£5,767
	Metric 2: attendance	PT2: students will achieve improved attendance as per target set out in PLP.	£1,959
	Metric 3: engagement with workplace	PT3: students will achieve a minimum of one day per week in work-based placement or evidenced engagement with workplace.	£1,959
	Metric 4: workplace skills	PT4: students will achieve good progress in workplace skills as per target set out in PLP.	£356
	Metric 5: achievement	PT5: accredited qualifications achieved.	£356
	Metric 6: Personal Learning Plan refresh	PT6: students will have a PLP refresh at the end of year one.	£4,833

Table 14.1 shows the latest outcome metric structure for Big Picture Learning (BPL) in Doncaster. This structure has changed many times during service delivery. It is not possible to provide a detailed account of all changes, but we provide the list of original outcome metrics below (Table 14.2).

⁹⁹ Key Stage 4 (KS4) covers the ages of 14 to 16, encompassing years 10 and 11 of secondary school.

Table 14.2 Original outcome metric structure for BPL (valid until December 2020)

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: improved engagement in learning – Primary Outcome	PT1.1: young person will have a Personal Learning Plan in place within four weeks of starting the provision.	£10,750
	PT1.2: young person achieves improved overall attendance (reduced fixed-term exclusion and unauthorised absence). Measured monthly, with an individual claim made for each service user reaching the target.	£1,340
Metric 2: students achieving expected progress (against baseline)	PT2: young person makes progress against their Personal Learning Plan. Measured annually from year two. Performance is tracked in year two to validate the outcomes targets.	£1,600
Metric 3: increased resilience (against baseline)	PT3: young person maintains or improves their STEN score on MTQ48 ¹⁰⁰ by +0.35-0.50 against baseline. Measured annually from year 2.	£6,100

Originally, BPL was designed as a service to be provided in a particular school. This was adapted to include a change in outcome metrics, payment triggers and prices. According to the project, the school experienced challenges in the recruitment of staff with the appropriate skills to meet the needs of the cohort and in ensuring that the new staff understood the requirements of the service's contract, timeline, and data collection requirements.

The COVID pandemic meant that the service could not be delivered as initially designed. The service provided online support to young people but full reintegration into mainstream school was difficult as schools were also providing online learning.

¹⁰⁰ The MTQ48 is a Mental Toughness Questionnaire consisting of 48 items designed to assess an individual's ability to withstand pressure and manage challenges in various situations, particularly in workplace environments. A STEN score is a standardised score used to represent an individual's performance relative to a group.

The pandemic made it harder to provide the personalised service that BPL was meant to deliver.

The project decided to take a pause from the outcomes-based contract, and did not take any payments from the Life Chances Fund between March and July 2020. During those months, the Council paid a standard fee to the providers to enable them to continue to support young people. The project used these months to rethink the service and outcome metrics. In November 2020, a variation agreement was approved, which added a separate set of metrics for Key Stage 4 students to the outcome metric structure.

Outcome achievements and results

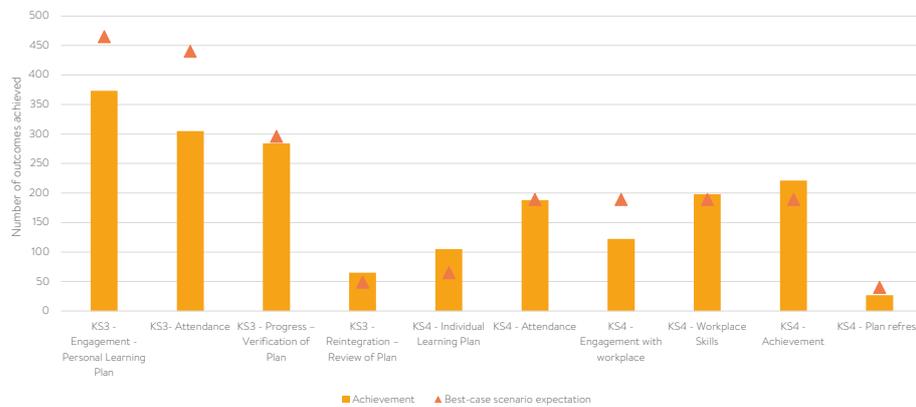


Table 14.1 Outcomes achieved by BPL between January 2021 and August 2024

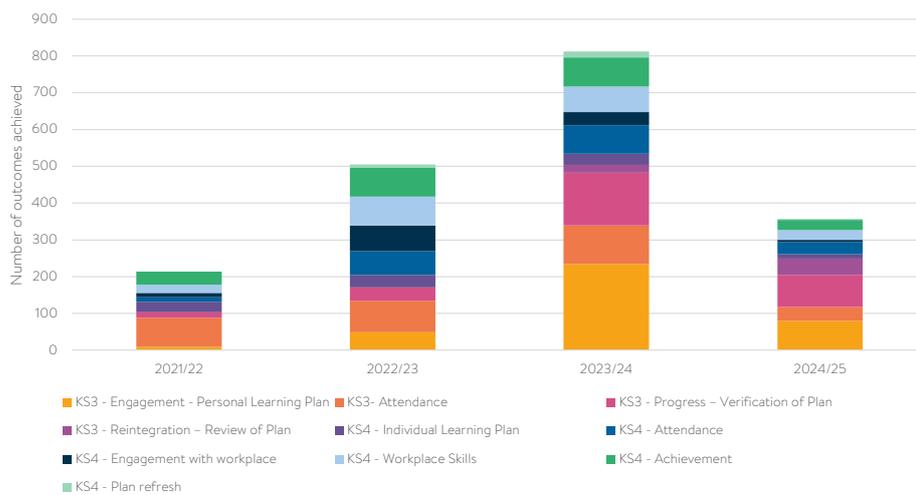


Figure 14.2 Outcomes achieved by BPL across fiscal years 2021/22 and 2024/25¹⁰¹

¹⁰¹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 14.1 shows outcomes achieved by BPL between January 2021 and August 2024, when the project was using the outcome metric structure described in Table 14.1. Figure 14.1 does not include the whole life of service delivery, and we only provide a summary of the achievements of the latest stage of this service. The targets shown in Figure 14.1 are based on a best-case scenario expectation for the period 2021-2024.

BPL managed to achieve their targets for the metrics:

- KS3 – progress (plan verification),
- KS3 – reintegration (plan review),
- KS4 – attendance,
- KS4 – workplace skills,
- KS4 – achievement, and
- KS4 – plan refresh.

The project did not meet their best-case scenario targets for:

- KS3 – engagement (PLP),
- KS3 – attendance, and
- KS4 – engagement with workplace.

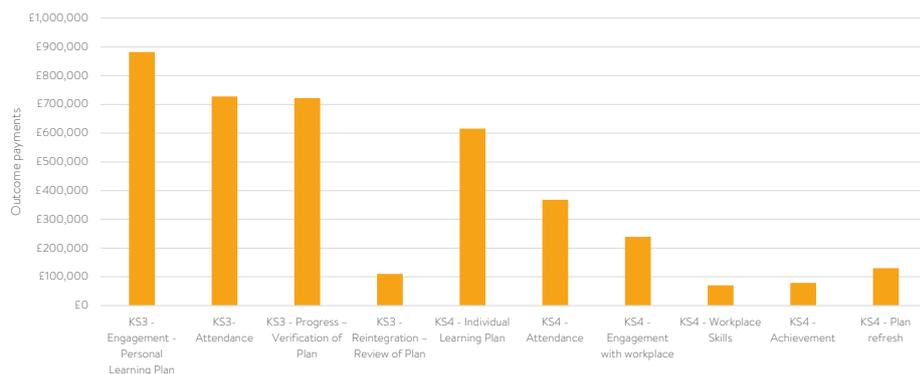
In addition to the COVID pandemic disruptions and the move to an alternative provision service, the project reported that low referral rates at the beginning of the service made it difficult for them to reach all targets.

The project also reported difficulties in collecting and interpreting data on outcome achievements in an objective way. They also had to revise the method of data collection, as they needed to capture the work of the providers more accurately. This was resolved by visiting providers and meeting with them to review data collection methods. The project managed to include more outreach work with schools, which enhanced the quality of the service and improved the number of outcomes around reintegration. Overall, the project highlighted the importance of good communication between stakeholders (especially the outcome payer, City of Doncaster Council) and the wealth of previous experience that all stakeholders brought to the partnership to overcome challenges and navigate contract variations.

Figure 14.2 shows the distribution of BPL outcomes across fiscal years 2021/22 and 2024/25, with the biggest proportion of outcomes being achieved in fiscal year 2023/24.

Outcome payments and project’s cost

Figure 14.3 Outcome payments paid to BPL between 2021 and 2024



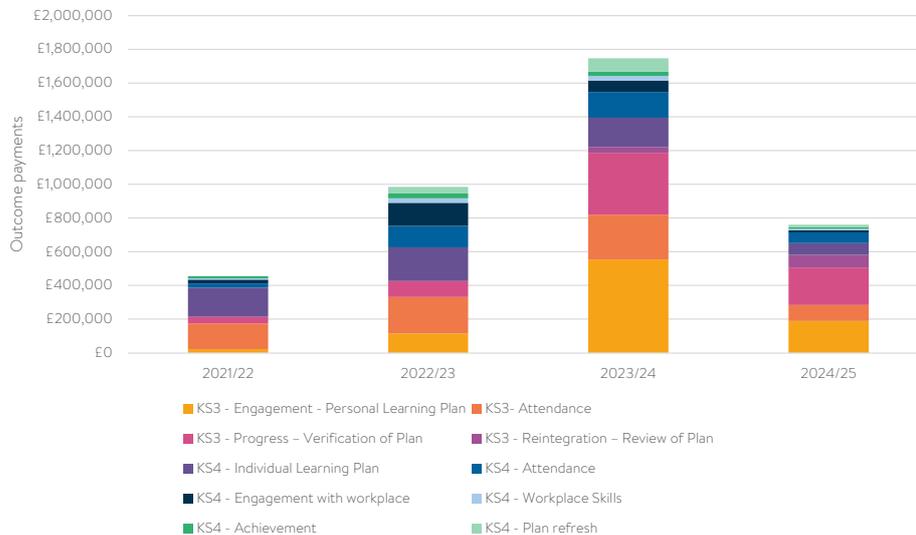


Figure 14.4 Outcome payments paid to BPL by fiscal year (2021/22-2024/25)¹⁰²

Figure 14.3 shows the outcome payments for the latest metrics of the BPL service. As with Figures 14.1 and 14.2, Figure 14.3 does not include the whole life of service delivery. Due to the several changes that this project’s metrics went through, we only provide a summary of the payments for the latest stage of this service.

In total, BPL received

- £822,547 for KS3 – engagement (PLP in place),
- £727,983 for KS3 – attendance,
- £722,278 for KS3 – progress – plan verification,
- £109,915 for KS3 – reintegration – plan review,
- £615,727 for KS4 – PLP in place,
- £368,292 for KS4 – attendance,
- £238,998 for KS4 – engagement with workplace,
- £70,488 for KS4 – workplace skills,
- £79,173 for KS4 – achievement, and
- £130,491 for KS4 – plan refresh

Outcome payments described in Figure 14.3 amount to £3,945,892, which is 77% of the total amount of outcome payments received by BPL between 2019 and 2024. In addition to this amount, BPL also received £1,166,144 for outcomes achieved between 2019 and 2020 using different metrics. Total outcome payments for this project were £5,112,036.

Figure 14.4 shows the distribution of BPL KS3 and KS4 outcomes across fiscal years 2021 and 2024, with the biggest proportion of outcome payments being achieved in fiscal year 2023/24.

¹⁰² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 14.3 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£750,000	£750,000
Maximum outcome Payments under the LCF	£6,194,792	£5,112,036

[Please check the Glossary section to find definitions for these terms]

Table 14.3 shows that Big Issue Invest invested as much funding as originally planned.

Table 14.4 Project's total cost and cost distribution

	Planned	Actual
Investment cost	£671,906 (11%)	£671,906 (13%)
Management cost	£281,729 (5%)	£281,729 (6%)
Evaluation and learning cost	£136,094 (2%)	£33,399 (1%)
Delivery cost	£4,871,168 (82%)	£4,026,874 (80%)
Total cost	£5,960,897 (100%)	£5,013,908 (100%)

[Please check the Glossary section to find definitions for these terms]

Table 14.4 presents the cost distribution for the BPL service as reported in the end of grant form. The project costed less than anticipated, which might be related with the service not being able to engage and work with as many students as expected. Evaluation and learning costs were less than initially forecast, due to a competitive tender process through which a less costly evaluation option was selected.

FIFTEEN

THE SKILL MILL



Project delivery dates:

August 2020 -
September 2024



Location:

Birmingham,
Croydon, Durham,
Leeds, Nottingham,
Rochdale, Surrey,
and West Sussex.



Planned size of cohort:

252 service users

Actual size of cohort:

242 service users



**Planned investment
commitment:**

£1,100,000

**Actual investment
committed:**

£1,100,000



Summary:

Skill Mill service centres around the provision of employment. High risk ex-offenders aged 16-18 are offered paid employment and are encouraged to acquire a Level 2 qualification. In addition, service users are supported through mentoring given by the supervisor on a day-to-day basis.



Involved organisations:

- Commissioners: West Sussex Council, Leeds City Council, Nottingham County Council, Durham County Council, Birmingham City Council, Croydon Council, Surrey County Council, Rochdale Borough Council, and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest, NorthStar Ventures, CAF Venturesome, and Resonance West Midlands SITR
- Service providers: The Skill Mill¹⁰³



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£3,241,776

**Total outcome payments under the LCF
(from the LCF and commissioners):**

£3,176,810 [LCF: £1,418,976 (45%)]



Primary outcome:

No reoffending for 12 months

- Planned achievement: 252 young ex-offenders do not reoffend for 12 months
- Actual achievement (up to September 2024): 162 young ex-offenders did not reoffend for 12 months

103 The Skill Mill is a social enterprise employer and not a service provider.

OUTCOME METRICS

Table 15.1 Outcome metrics for the Skill Mill

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: recruitment to the Skill Mill programme	PT1: young person registers for the Skill Mill programme by signing the registration form.	£320
Metric 2: programme induction completed	PT2: service user has completed at least four weeks on the programme with regular attendance of at least 75% as evidenced by daily attendance register.	£430
Metric 3: completed 5/6 months of the programme	PT3: service user has completed the Skill Mill programme with regular attendance of at least 75%, or completes 5 months of the programme, but departs for purposes of entry into a job position.	£1,310
Metric 4: qualification achieved	PT4: confirmation from AQA that Level 2 award has been achieved.	£4,390
Metric 5: secured job or further training	PT5: letter from employer confirming full or part time employment for service user; or confirmation from HMT that service user has registered as employed; or evidence of enrolment into a NVQ Level 2 or above training course.	£9,340
Metric 6: 12-months no re-offending. Primary Outcome.	PT6: confirmation from Police or another local agency with access to the Police National Computer that the service user has not been reconvicted during this period; or confirmation from the Youth Offending Teams. To be claimed one time per service user.	£8,240

Table 15.1 shows the latest outcome metric structure for the Skill Mill. This structure only changed once. During the second quarter of delivery, West Sussex Council was added as local commissioner to this programme. This inclusion meant that the targets per metric went up to account for the achievements of the new service users.

Although the Skill Mill delivered services during the COVID pandemic, they did not switch to grant-based payments and stayed on outcome payments for the whole contract.



Table 15.1 Outcomes achieved by The Skill Mill (up to September 2024)

Outcome achievements and results

Figure 15.1 shows outcome achievements, according to the DCMS Data Portal, for the Skill Mill and best-case scenario targets. Up to September 2024, the Skill Mill recruited 242 young ex-offenders. This is 10 fewer young ex-offenders than initially anticipated. The project explained that three councils were not able to support the number of cohorts that they had originally planned.

237 of the Skill Mill service users completed the induction to the programme (98% of recruited service users), 179 completed the entire programme (74% of recruited service users), 185 achieved a Level 2 qualification (76%), 74 secured a job or further training (31%) and 162 individuals were verified as not having been reconvicted (67%).

In their end of grant form, the Skill Mill reported achieving more outcomes in October and November 2024 than those claimed and recorded in the DCMS Data Portal. This is due to delays in the Police and Youth Offending Teams in providing evidence of no reconviction for the Skill Mill service users. The final cohorts of the programme started later than expected (October 2023), which meant that the evidence to claim for metric 6 (12 months of no reoffending) could not be achieved and evidenced until November 2024. The project later reported this outcome was achieved 43 times in October and November 2024. Data on the achievements reported by the Skill Mill post-September 2024 can be found in Appendix 1.

According to the project’s final review, the Skill Mill programme performed well. Despite issues with late recruitment and the impact of the pandemic on labour markets, all cohorts achieved the basic outcomes, except for metrics 5 (secure job or further training) and 6 (no reoffending). The COVID pandemic had a significant impact on the ability of young people to move into a permanent job or training.

The Skill Mill reported a reconviction rate of 7.3%, which was considered successful as it is lower than the reconviction rate for other national programmes for ex-offenders aged 15-18. The employment that the Skill Mill provides is mainly outdoors and physical, which was appreciated by young people as the physical nature of the work helped them improve their physical and mental health.

Figure 15.2 Outcomes achieved by the Skill Mill across fiscal years 2020/21-2024/25¹⁰⁴



Figure 15.2 shows the distribution of outcomes across fiscal years. The Skill Mill appears to have achieved fewer outcomes in 2024/25, but this may be due to the delays explained in paragraphs above and caps with local commissioners.

104 Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Outcome payments and project's costs

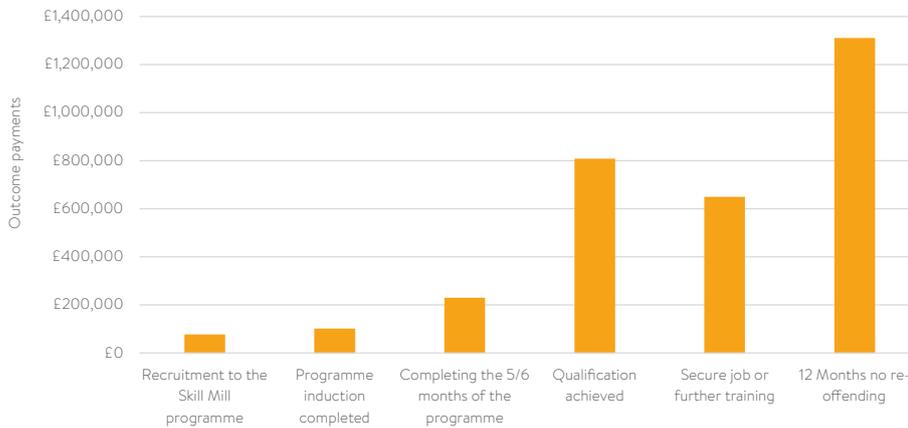


Figure 15.3 Outcome payments paid to the Skill Mill

Figure 15.3 shows the amount of outcome payments received by the Skill Mill up to September 2024. The Skill Mill was paid £77,440 for recruitment to the programme, £101,480 for complete induction, £229,650 completion of programme, £807,760 for qualification achieved, £649,560 for job secured or further training and £1,310,920 for 12 months of no reconviction. In total, the Skill Mill received £3,176,810 for outcome payments. However, the total value of the outcomes produced until September 2024 was £3,194,120. The Skill Mill received £17,310 less due to a series of caps in their contracts with local commissioners.

Figure 15.4 (below) shows the distribution of outcome payments across fiscal years. The Skill Mill received £228,770 in 2020, £976,050 in 2021, £845,480 in 2022, £968,600 in 2023 and £157,910 in 2024.

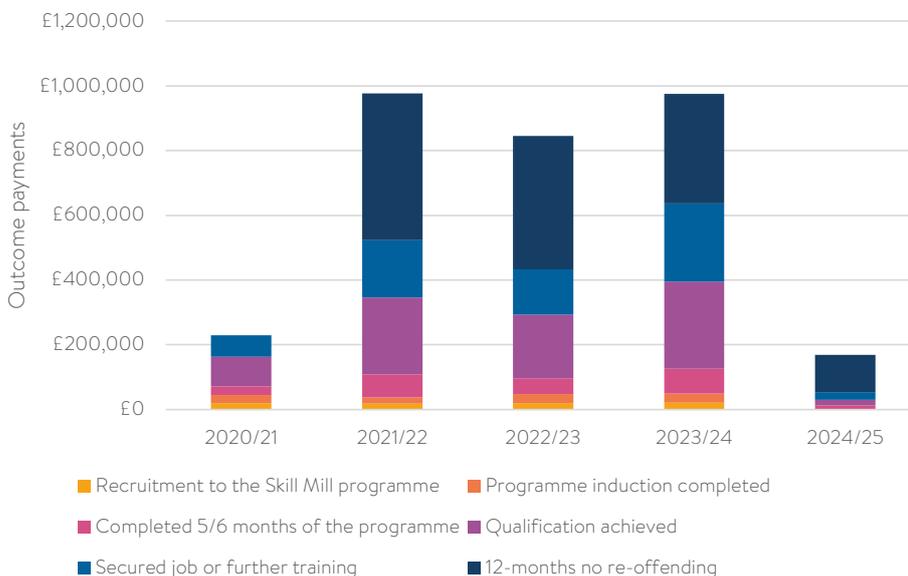


Figure 15.4 Outcome payments paid to the Skill Mill across fiscal years (2020/21-2024/25)¹⁰⁵

¹⁰⁵ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 15.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£1,100,000	£1,100,000
Maximum outcome payments under the LCF	£3,241,776	£3,176,810

Table 15.2 shows that the social investors for the Skill Mill invested as much funding as originally planned. The Skill Mill was initially designed as a project where income would come from two sources: outcome payments from the LCF and commissioners, and employers' fees¹⁰⁶. Employers were expected to pay a fee for every Skill Mill service user that they were onboarding¹⁰⁷. As employer fees were not capped, achieving employer fees was critical for the sustainability of the project. The COVID pandemic meant that there were fewer paid employment opportunities for the cohort, so the Skill Mill placed service users in voluntary, community-based projects. In sum, the project ensured that service users were placed into a job (achieving the employment metric) but could not ensure that they would receive a fee for those placements.

As of September 2024, the Skill Mill was very close to reaching the maximum potential outcome payment. The project agreed with local commissioners to account for the late outcomes that would be evidenced later than September 2024. The new cutoff date for claiming and evidencing outcomes was November 2024. By November, the Skill Mill reported to have an achievement of £3,237,216.

Table 15.3 Project's cost distribution

	Planned	Actual
Investment cost	£340,653 (7%)	£340,000 (7%)
Management cost	£383,725 (8%)	£385,173.57 (8%)
Evaluation and learning cost	£28,715 (1%)	£59,994.48 (1%)
Delivery cost	£3,975,666 (84%)	£3,964,154.58 (84%)
Total cost	£4,728,759 (100%)	£4,749,322.63 (100%)

¹⁰⁶ For more information about the financial model behind The Skill Mill, readers can download the [Skill Mill final evaluation](#) (Baines, Webster, Fox and Armitage, 2025)

¹⁰⁷ The Skill Mill service users would undertake paid employment in areas such as ground maintenance and landscaping, flood recovery assistance, bench building and installation, tree work, fence repairs, hedge laying and cleaning services.

Table 15.3 shows the cost distribution for the Skill Mill. There are no significant changes between planned and actual costs, except for the cost of evaluation and learning. The project reported that the budget for evaluation and learning was originally planned to be £50,000, but this figure was reduced during the application process of the LCF. The Skill Mill's aim was to enhance the power of the evaluation and learning activities, so they applied for and won a separate grant and used that funding to improve the evaluation plans.

In total, the Skill Mill costed £4,749,322.63, which is only £20,563 more than forecasted.

SIXTEEN

CHANCES

**Project delivery dates:**

October 2020 -
August 2024

**Locations:**

Birmingham,
Bristol, Coventry,
Devon, Doncaster,
Hartlepool,
Middlesborough,
Newcastle,
North Tyneside,
Northumberland,
Oxford, Redcar and
Cleveland, Shropshire,
Stockton, Sunderland,
Southampton,
Wigan, and London
Boroughs of Islington,
Lambeth, Harrow,
and Waltham Forest.

**Planned size of cohort:**

6,720 service users

Actual size of cohort:

6,608 service users

**Summary:**

The aim of Chances was to use sport and physical activity to provide new opportunities and alternative life pathways for children and young people in disadvantaged areas whilst improving their health and wellbeing. The service specifically targeted children and young people aged between 8-17 with specific issues – excluded from school or with low school attendance, previous offenders, looked after children, NEETs (not in education, employment or training), at risk of becoming NEETs, or young people with low levels of physical literacy.

**Involved organisations:**

- Commissioners: Sport England, Middlesborough Council, Stockton Council, Redcar and Cleveland Council, Hartlepool Council, Oxford City Council, Active Oxford, Northumberland County Council, Teesside Police and Crime Commissioner, Newcastle City Council, North Tyneside Council, London Borough of Islington, London Borough of Harrow, Birmingham Children's Trust, Doncaster Council¹⁰⁸, Coventry City Council, Southampton City Council, Wigan Metropolitan Borough Council, London Borough of Waltham Forest, Shropshire Council¹⁰⁹, Bristol City Council, Lambeth London Borough Council, Sunderland City Council, and Devon County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Flying Futures Doncaster¹¹⁰, Positive Youth Foundation Coventry, Leyton Orient Trust, Aston Villa Foundation, Foundation of Light, Youth Moves Bristol, Wigan Athletic Community Trust, Exeter City Community Trust, Energise STW and Bright Stars Boxing Club, Palace for Life, Watford FC Community Sports and Education Trust, Arsenal in the Community, Oxfordshire Youth, Newcastle United Foundation, Middlesborough FC Foundation, and Saints Foundation¹¹¹
- Intermediary: Substance

¹⁰⁸ The project has clarified that this is Doncaster Metropolitan Borough Council.

¹⁰⁹ The project has clarified that this is Shropshire County Council.

¹¹⁰ The project has clarified that this service provider is also known as Flying Futures.

¹¹¹ Also known as Saints.



Planned investment commitment:

£1,245,000

Actual investment committed:

£1,250,000



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£4,104,000

Total outcome payments under the LCF (from the LCF and commissioners):

£3,878,283¹¹² [LCF: £1,208,856 (31%)]



Primary outcome:

Improved engagement and attitude to physical activity and sport.

- Planned achievement: 11,040 outcomes around improved engagement and attitude to physical activity and sport (one person could achieve several outcomes)¹¹³.
- Actual achievement: 11,046 outcomes around improved engagement and attitude to physical activity and sport

¹¹² There is a discrepancy between the total outcome payment made according to the DCMS Data Portal (£3,878,283) and the record held by the project (£4,081,641).

¹¹³ We have combined targets from payment triggers 1, 2 and 3.

OUTCOME METRICS

Table 16.1 Outcome metrics for Chances

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: improved engagement and attitude to physical activity and sport. Primary Outcome.	PT1: staff assessment of the programme 'engagement' level – between 12 and 24 weeks after enrolment.	£80
	PT2: midpoint questionnaire (on perceptions of physical literacy) completed and assessed as being 'involved' – between 12 to 24 weeks.	£150
	PT3: endpoint questionnaire (on perceptions of physical literacy) completed – between 36 to 52 weeks after enrolment.	£200
Metric 2: reduction in re-offending of those who have offended once or are subject to a Pre-Court Disposal Order in year prior to referral.	PT4: local authority confirmation on behaviour, for those who have offended once – to be paid every quarter the service user is on the programme and does not re-offend.	£750
Metric 3: reduction of those who have offended three times or more in year prior to referral - by one third over the year after referral.	PT5: local authority confirmation on behaviour, for those who have offended 3 times – to be paid every quarter the service user is on the programme and does not re-offend.	£1,000
Metric 4: improvements in school or PRU attendanc.	PT6: local authority school or PRU (Pupil Referral Unit) confirm attendance rate – to be paid after three full school terms after the service user has started the programme.	£700

Metric 5: decrease in the number of 16–17-year-olds who are NEET.	PT7: a young person achieves a recognised qualification or award. The delivery organisation provides certification of the achievement.	£750
	PT8: organisation hosting volunteering/work placement provides documentation of length and type of placement.	£850
	PT9: a young person enrolls in college or sixth form and provides evidence of enrolment (added in July 2022).	£1,000

Table 16.1 shows the latest outcome metric structure for Chances. This structure was slightly changed in July 2022, when Chances was allowed to charge for service users enrolling in college or sixth form as proof of the achievement of metric 5. In addition, metric 3 was initially designed to pay for improvements in school attendance for every service user that could demonstrate a 10% improvement against previous attendance rate. In July 2022, Chances requested that metric 3 could be claimed for 5% improvements in school attendance, which was granted by the LCF and local commissioners.

In September 2022, Sport England agreed to increase the prices for two of the payment triggers linked to metric 1 (improved engagement and attitude to physical activity and sport). With this agreement, the new price for payment trigger 2 was £200 and for payment trigger 3 was £250. The LCF did not increase their contributions towards these two payment triggers.

Outcome achievements and results

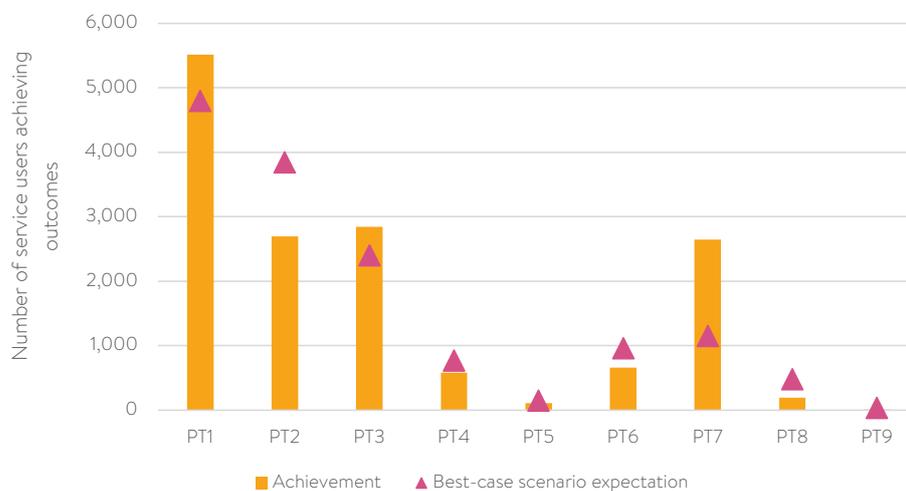


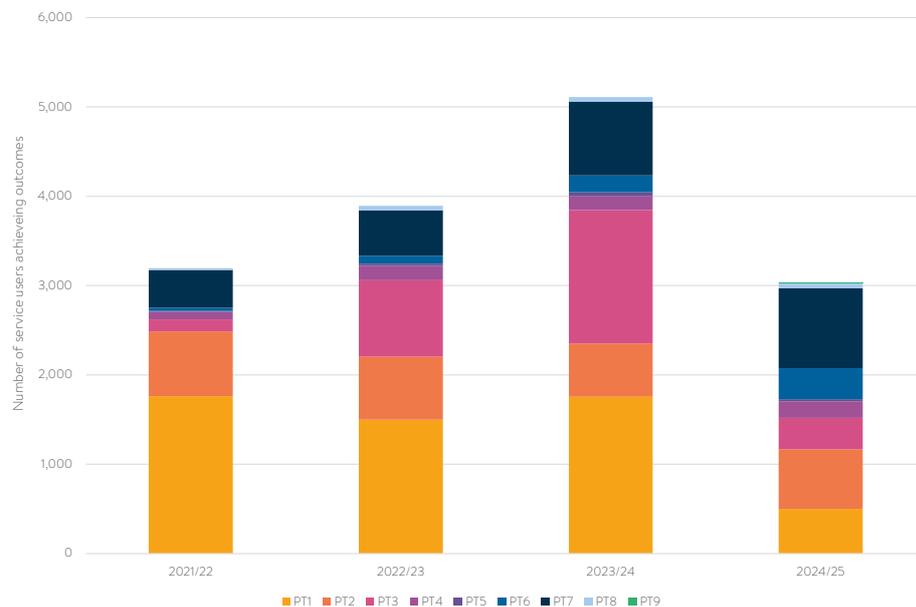
Figure 16.1 Outcomes achieved by Chances (2020-2024)

Figure 16.1 shows outcome achievements and best-case scenario targets for Chances. 5,513 young people were assessed by Chances staff to determine their engagement level after enrolment, 2,693 young people completed a mid-point questionnaire measuring perceptions of physical literacy, 2,840 young people completed an end-point questionnaire, 580 young people who had offended once did not reoffend after their involvement with the programme, 109 young people who had offended a minimum of three times did not reoffend after their involvement in the programme, 660 students improved their attendance rate to school by 5% or 10% against previous attendance rates, 2,646 young people achieved a recognised qualification or award, 188 young people went into volunteering and 2 young people enrolled into college or sixth form. In total, Chances achieved 15,231 different outcomes (104% of the best-case scenario expectations for the total amount of outcomes¹¹⁴).

Although Chances did not achieve their best-case scenario target for payment trigger 2 (completing a mid-point questionnaire measuring perception around physical activity), the project overachieved their targets around engagement (payment trigger 1), completing of end-point questionnaires (payment trigger 3), reducing reoffending for people who have offended three or more times (payment trigger 5), and were very close to reaching the targets for the rest of their metrics. They significantly overachieved the initial expectation for payment trigger 7 (young people achieving a recognised qualification or award).

Despite the largest proportion of referrals coming from schools, it was difficult for the project to secure the data to demonstrate the improvement in school attendance (payment trigger 6). Data received was often either incomplete or not provided at all, which generated a gap for the programme in their understanding of their impact on school attendance rates. The school attendance outcome was measured across 3 school terms which made the process more onerous and difficult. Chances undertook a deep dive into the barriers with school data, and subsequently provided training to and shared learning with project staff. This resulted in the project using different data collection methods with schools in the final year of the programme, generating more useful and usable attendance data.

Figure 16.2 Outcomes achieved by Chances across fiscal years 2021/22 - 2024/25¹¹⁵



¹¹⁵ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

¹¹⁴ Chances was expected to achieve 14,576 outcomes for children and young people in disadvantaged areas.

Figure 16.2 shows the distribution of outcomes across fiscal years 2021/22-2024/25. Although Chances started in October 2020, they claimed for outcome payments for the first time in September 2021.

The year with the highest achievements was 2023/24. A group of outcomes around engagement, completion of a mid-point questionnaire, non-reoffending and school attendance were capped (ie. outcomes above the cap were not paid by the LCF and commissioners, despite the project continuing to generate and report outcomes over and above these caps).

Outcome payments and project's costs

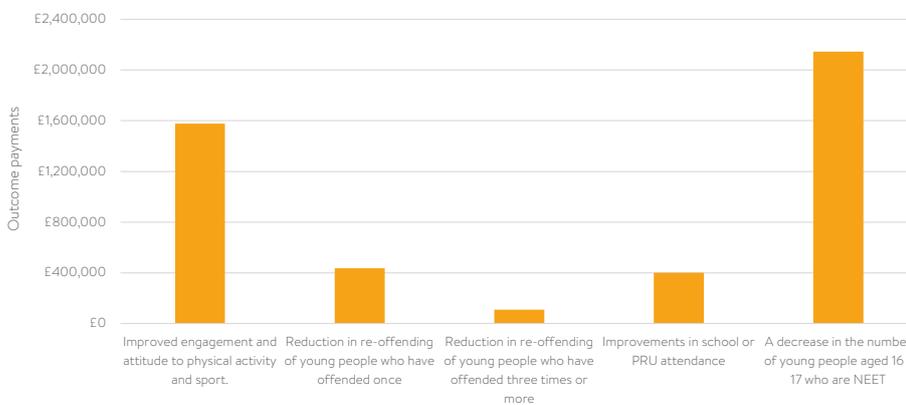


Figure 16.3 Outcomes value produced by Chances between 2020-2024

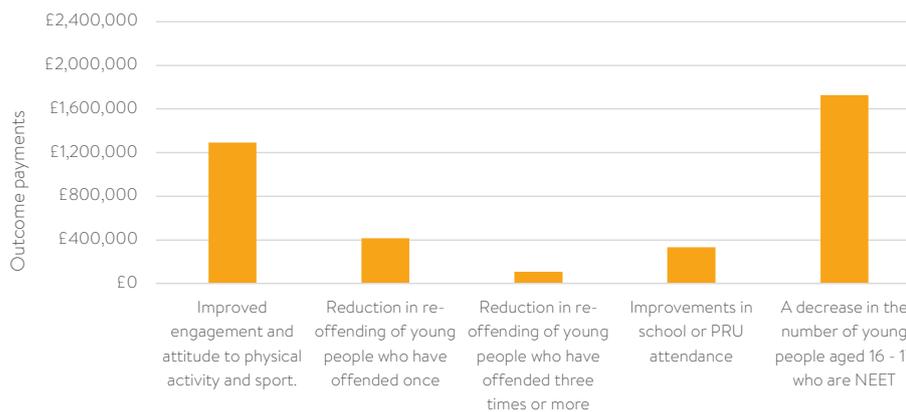


Figure 16.4 Outcome payments paid to Chances

Figure 16.3 shows the monetary value of Chances outcomes, while Figure 16.4 shows the actual payments paid to Chances. Both figures present outcome values and payments at the outcome metric level (not payment trigger) to facilitate the interpretation of the figures. This comparison is only possible for projects that have been consistent in reporting the number of outcomes, value of those outcomes, and capped and non-capped payments for those outcomes.

Figure 16.3 shows that Chances produced a total outcomes value for £4,666,490, of which £1,576,890 was for improved engagement and attitude to physical activity (payment trigger 1, payment trigger 2 and payment trigger 3), £435,000 was for reduction in reoffending of young people who offended once (payment trigger 4), £109,000 was for reduction in reoffending of young people who offended three or more times (payment trigger 5), £399,300 was for improvements in school attendance (payment trigger 6) and £2,146,300 was for a decrease in the number of young people aged 16-17 who were NEET (payment triggers 7, 8 and 9).

Figure 16.4 shows that Chances was paid £3,878,283, of which £1,293,650 was for improved engagement and attitude to physical activity, £416,600 for reduction in reoffending of young people who offended once, £109,000 for reduction in reoffending of young people who offended three or more times, £333,650 for improvements in school attendance and £1,725,383 for a decrease in the number of young people aged 16-17 who were NEET. The difference between the outcomes value created and outcomes payment disbursed was £788,207. This is mainly due the project overperforming on a number of outcomes metrics over and above the caps in the contract with the LCF and local commissioners.

Figure 16.5 Outcome payments paid to Chances across fiscal years (2021/22-2024/25)¹¹⁶

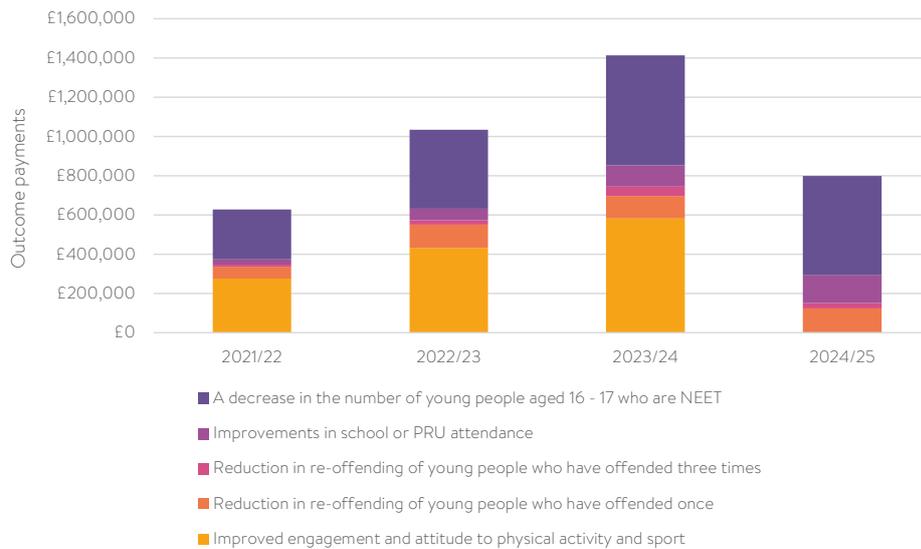


Figure 16.5 shows the distribution of outcome payments for Chances across fiscal years. In total, Chances received £628,710 in 2021, £1,035,690 in 2022, £1,414,167 in 2023 and £799,716 in 2024.

¹¹⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

	Planned	Actual
Total investment commitment	£1,245,000	£1,250,000
Maximum outcome payments under the LCF	£4,104,000	£3,878,283

Table 16.2 Planned and actual investment and maximum potential outcome payment

Table 16.2 indicates that Big issue Invest invested more funding (£5,000) than originally anticipated in Chances. In total, Substance paid £289,952 of interest to Big Issue Invest over the lifetime of the project (23.2% of total investment commitment/loan).

Chances was very close to reaching the maximum potential outcomes payment. The project explained that underperformance in two delivery locations resulted in Chances not claiming the maximum potential amount.

	Planned	Actual
Investment cost	£318,751 (8%)	£318,751 (8%)
Management cost	£100,208 (2%)	£100,208 (2%)
Evaluation and learning cost	£230,756 (6%)	£230,756 (6%)
Delivery cost	£3,454,285 (84%)	£3,454,285 (84%)
Total cost	£4,104,000 (100%)	£4,104,000 (100%)

Table 16.3 Project's cost distribution

Table 16.3 shows that Chances cost plans and actual costs do not differ. The project spent 84% of their total cost in service delivery, 8% in investment costs, 6% in evaluation and learning and 2% in management costs.

SEVENTEEN

GLOUCESTERSHIRE POSITIVE
BEHAVIOUR SUPPORT (PBS)**Project delivery dates:**October 2020 –
June 2029**Location:**

Gloucestershire

**Planned size of cohort:¹¹⁷**

14 service users

**Planned size of cohort
up to September 2024:**

14 service users

**Actual size of cohort
as of September 2024:**

10 service users

**Planned investment
commitment:**

£501,000

**Actual investment
committed as of
September 2024:**

£501,000

**Summary:**

Gloucestershire Positive Behaviour Support's target cohort is young people with a learning disability and/or autism and displaying challenging behaviour, who are at risk of going into residential care. The service delivers practical solutions to improve the individual's quality of life, reducing the need for residential placements, with a focus on them remaining at home or in other supported homes.

**Involved organisations:**

- Commissioners: Gloucestershire County Council, Gloucestershire Clinical Commissioning Group and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Social and Sustainable Capital
- Service providers: Affinity Trust
- Intermediaries: Social Finance (advisory support to develop the business case and the application to the Life Chances Fund)

**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£1,774,925

**Expected outcome payments under the LCF by September 2024
(from the LCF and commissioners):**

£889,000

**Total outcome payments under the LCF received by September 2024
(from the LCF and commissioners):**

£840,500 [LCF: £319,390 (38%)]

**Primary outcome:**

Avoidance of full-time residential care for the young people accessing the Positive Behaviour Support (PBS) Service (this does not preclude the family from accessing respite care and short breaks).

- Planned achievement (for the entire project up to 2029): to support at least 10 children avoiding full-time residential care
- Actual achievement (up to September 2024): 9 children supported in avoiding full-time residential care¹¹⁸

¹¹⁷ In the end of grant form, the project reported aiming for a cohort of 10 people.

¹¹⁸ The project self-reported having engaged with 14 children at the end of September 2024 outcomes for 9 children could be verified on the DCMS Data Portal.

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: avoidance of full-time residential care. This does not preclude the family from accessing respite care and short breaks. Primary Outcome.	PT1: young person stays out of residential care for three months	£10,250
	PT2: young person stays out of residential care for another three months (6 months)	£10,250
	PT3: young person stays out of residential care for another three months (9 months)	£10,250
	PT4: young person stays out of residential care for another three months (12 months)	£10,250
	PT5: young person stays out of residential care for another three months (15 months)	£10,250
	PT6: young person stays out of residential care for another three months (18 months)	£10,250
	PT7: young person stays out of residential care for another three months (21 months)	£10,250
	PT8: young person stays out of residential care for another three months (24 months)	£10,250
	PT9: young person stays out of residential care for another three months (27 months)	£10,250
	PT10: young person stays out of residential care for another three months (30 months)	£10,250
	PT11: young person stays out of residential care for another three months (33 months)	£10,250
	PT12: young person stays out of residential care for another three months (36 months)	£10,250
	PT13: young person stays out of residential care for another three months (39 months)	£10,250
	PT14: young person stays out of residential care for another three months (42 months)	£10,250

Table 17.1 Outcome metrics for Gloucestershire PBS

Table 17.1 shows the latest outcome metric structure for Gloucestershire PBS. This structure remained the same during the entire part of the LCF contract with Gloucestershire PBS. This is a service that will continue until 2029. All data in this chapter should be understood as interim data collected between 2020 and 2024 through the DCMS Data Portal.

Outcome achievements and results

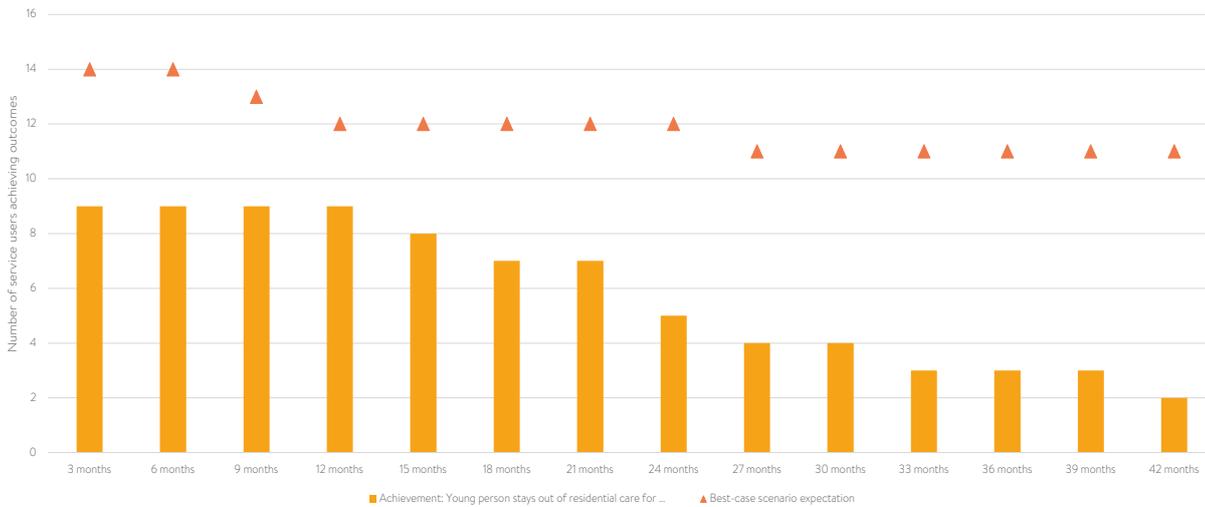


Figure 17.1 Outcomes achieved by Gloucestershire PBS between 2020 and 2024

Figure 17.1 shows outcome achievements for the duration of the LCF contract with Gloucestershire PBS. In total, Gloucestershire PBS worked with a cohort of 10 people, as was expected for the project up to September 2024. Of those 10 people, 9 stayed out of residential care for at least three months. The project has not yet reached best-case scenario targets, as service delivery will continue until June 2029. For these 10 children, the Gloucestershire PBS service has achieved 82 quarters (246 months) of residential care avoidance.

The project used the social outcomes partnership model to test the effect of different workloads on PBS practitioners. The Gloucestershire PBS service operated under the assumption that one practitioner could work with one child. The delivery partnership decided to test if practitioners could work with 2 children. This was piloted with additional children referred to the service who did not have the same level of complexities as the original cohort. No outcome payments were claimed for the children that did not have the level of complexities specified in the cohort criteria. This pilot was unsuccessful, as supporting multiple children with differing levels of need was perceived as causing too much additional pressure for Gloucestershire PBS practitioners.

For the future of the service, Gloucestershire PBS is taking the learnings from Gloucestershire and other services across the country, and proposing a tiered model where children with different levels of complexities are supported. The service provider would complete a triage assessment to determine the level of need of the young person after referral. Following this triage assessment, the provider would explore the needs of the young person and family to determine the intensity and duration of the work required. Intervention would still focus on skills building with a means to improve the quality of life and reduce challenging behaviours.

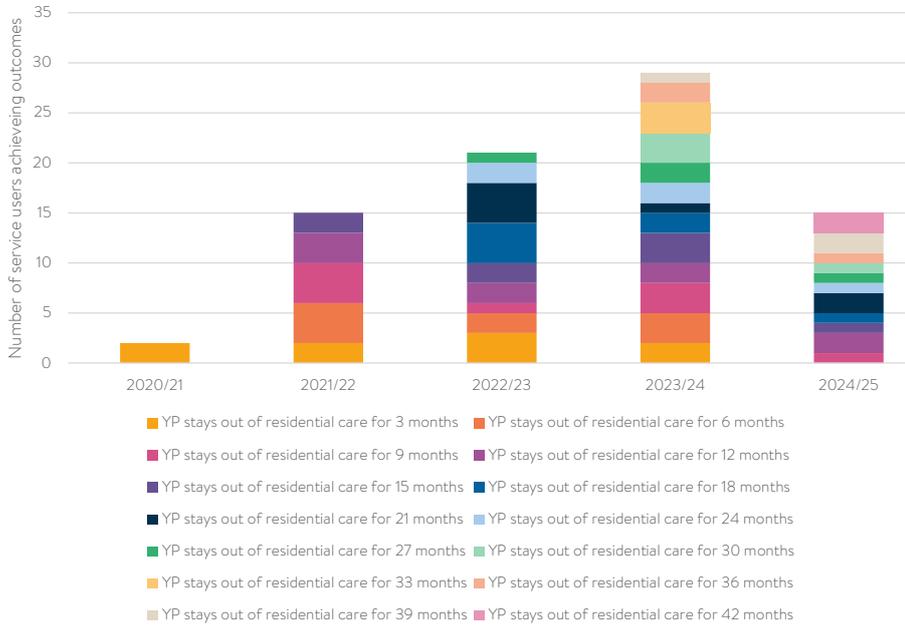


Figure 17.2 Outcomes achieved by Gloucestershire PBS across fiscal years 2020/21 to 2024/25¹¹⁹

Figure 17.2 shows the distribution of outcome achievements across fiscal years, with the fiscal year 2023/24 being the year with the highest number of outcomes claimed. There might be more outcomes achieved after September 2024, which would increase the height of the bar for year 2024/25, but they are not captured in the DCMS Data Portal.

Outcome payments and project’s cost

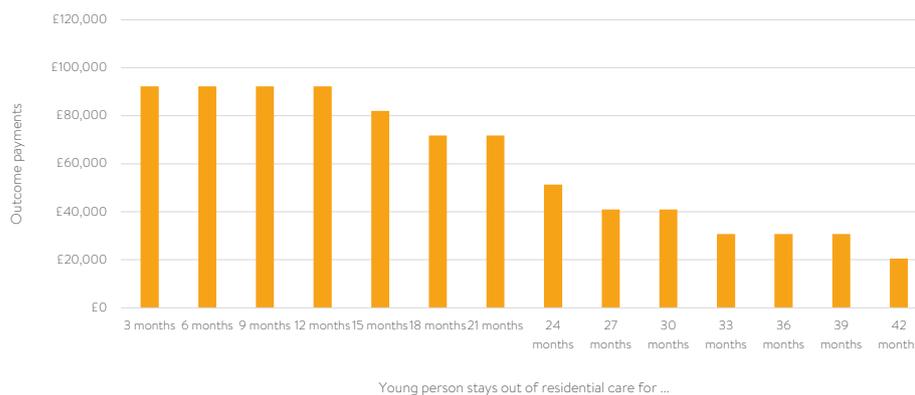


Figure 17.3 Outcome payments paid to Gloucestershire PBS between 2020 and 2024

¹¹⁹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 17.4 Outcome payments paid to Gloucestershire PBS across fiscal years (2020/21 to 2024/25)¹²⁰



Figure 17.3 shows outcome payments for Gloucestershire PBS between 2020 and 2024. In total, Gloucestershire PBS received £840,500 for avoidance of full-time residential care. Each quarter out of care was priced at £10,250, which means that this project achieved 82 quarters of children avoiding residential care. In the end of project reporting, Gloucestershire PBS expressed that the approximate cost of just one of these children going into residential care over a period of 3 years would be approximately £900,000.

Figure 17.4 presents the distribution of outcome payments across fiscal years. Gloucestershire PBS received £20,500 in 2020/21, £153,750 in 2021/22, £215,250 in 2022/23, £297,250 in 2023/24 and £153,750 in 2024/25.

Table 17.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£501,000	£501,000
Maximum outcome payments under the LCF	£1,774,925 (for entire project up to 2029) £889,000 (expectation for September 2024)	£840,500

¹²⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 17.2 shows that Social and Sustainable Capital have invested as much funding as originally planned. There was an expectation to have claimed £889,000 from both the LCF and local commissioners by September 2024. Gloucestershire PBS has claimed £840,500 by September 2024 (95% of the expectation for September 2024).

	Planned (2029)	Planned (Sept 2024)	Actual
Investment cost	£193,000 (12%)	£193,000 (22%)	£144,500 (17%)
Management cost	£8,000 (1%)	£8,000 (1%)	£8,000 (1%)
Evaluation and learning cost	£10,000 (1%)	£10,000 (1%)	£10,000 (1%)
Delivery cost	£1,251,000 (86%)	£678,000 (76%)	£678,000 (81%)
Total cost	£1,462,000 (100%)	£889,000 (100%)	£840,500 (100%)

Table 17.3 Project's cost distribution

Table 17.3 shows the distribution of costs for Gloucestershire PBS. 81% of the outcomes payment has been used for service delivery, 1% for evaluation and learning costs, 1% for management costs and 17% for investment costs. The project reported that the figure for investment cost is sensitive to other outcome payments and might be different in the future.

LCF EVALUATION REPORT

OLDER PEOPLE'S SERVICES PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
Enhanced Dementia Care Service	April 2021	Hounslow	DCMS Data Portal	

EIGHTEEN

ENHANCED DEMENTIA CARE SERVICE

Project delivery dates:
 April 2021 – March 2024

Location:
 London Borough of Hounslow

Planned size of cohort:
 300 service users

Actual size of cohort:
 513 service users

Planned investment commitment:
 £345,000

Actual investment committed:
 £355,950

Summary:
 The service targeted people affected by dementia with a high rate of admissions (two or more avoidable admissions in the preceding 12 months). Enhanced Dementia Care Service (EDCS) offered coordinated and integrated services using evidence-based care pathways, case management and personalised care planning. The aim of the service was to anticipate and avoid deterioration of conditions and support reduction in hospital admissions.

Involved organisations:

- Commissioners: London Borough of Hounslow and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Care and Wellbeing Fund
- Service providers: Alzheimer's Society, Hestia Housing and Support, Harlington Hospice, and Hounslow and Richmond Community Healthcare NHS Trust
- Intermediaries: Social Finance UK

Maximum potential outcome payments under the LCF (from the LCF and commissioners):
 £810,000

Total outcome payments under the LCF (from the LCF and commissioners):
 £810,000 [LCF: £267,300 (33%)]

Primary outcome:
 Reduction in avoidable hospital admissions

- Planned achievement: 300 reductions of avoidable hospital admissions
- Actual achievement: 180 reductions of avoidable hospital admissions (DCMS Data Portal)¹²¹

¹²¹ In the end of grant form, where projects self-report their achievements, the project reported achieving 620 outcomes around avoidable hospital admissions. The project explained that they did not record all outcomes on the DCMS Data Portal because they had already reached their payment caps with the LCF and local commissioner.

OUTCOME METRICS

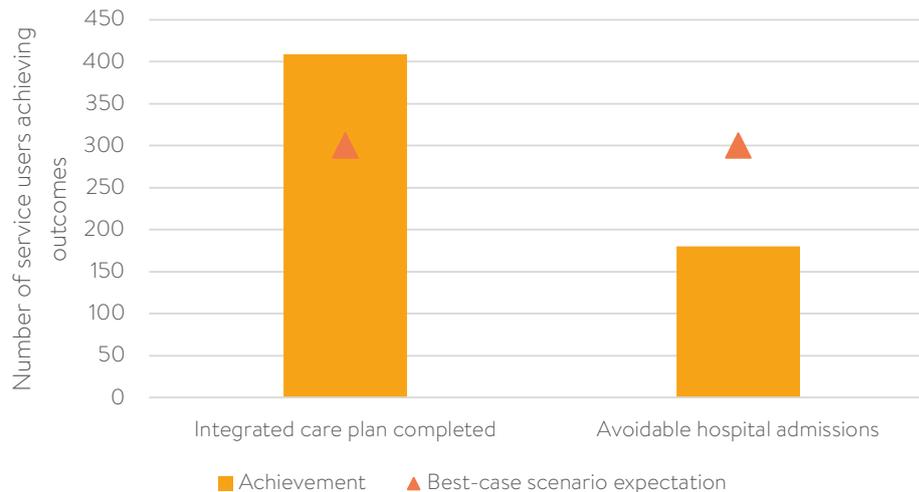
Table 18.1 Outcome metrics for EDCS

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: reduction in avoidable hospital admissions. Primary Outcome.	PT1: avoided non-elective admissions within 12 months ¹²²	£3,000 (per individual). Can be claimed once.
Metric 2: integrated care plan completed	PT2: completed and integrated care plan within 3 months	£900 (per individual). Can be claimed once.

Table 18.1 presents the latest outcome metric structure for EDCS¹²³. During the life of the service, the project kept the same metrics and prices. Both outcome metrics were capped at 300 outcomes each. EDCS started after the COVID pandemic, so did not apply to any COVID grants or COVID adjustments.

Outcome achievements and result

Figure 18.1 Outcomes achieved by EDCS (2021-2023)



122 In NHS England, admissions are split into two types, elective and non-elective. Non-elective admissions are emergency admissions, and elective admissions include all other types.

123 This project had a different rate card with more outcome metrics and different prices, but it was changed before the start of service delivery. This initial variation agreement included a change in the rate card (2 metrics around carers training and home improvements for patients were dropped), a reduction in the LCF award from £420,000 to about £270,000, an increase in the LCF top-up percentage from 30% to 33% and a reduction in the duration of the project from 5.5 to 3 years.

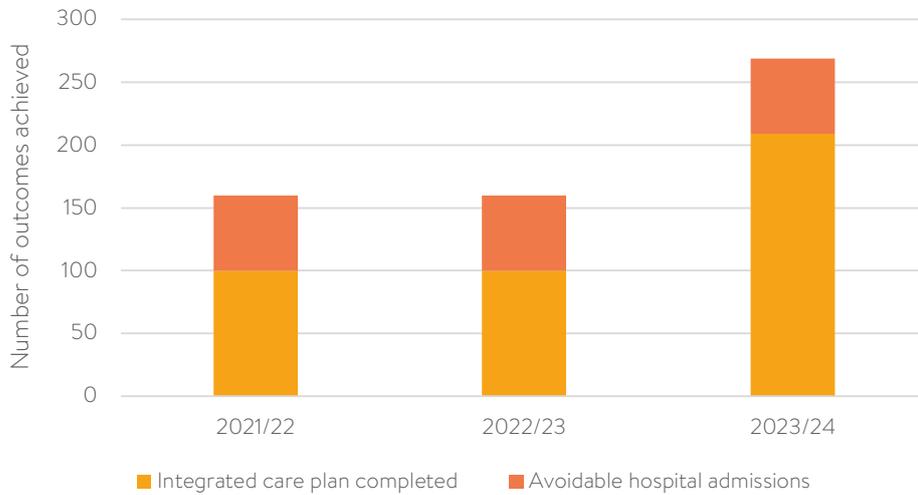


Figure 18.2 Outcomes achieved by EDCS across fiscal years (2021/22 -2023/24)¹²⁴

Figure 18.1 shows outcome achievements for EDCS. 409 individuals completed an integrated care plan with this service (80% of cohort). The outcome around avoiding non-elective hospital admissions was claimed 180 times. As both metrics were capped at 300, the project claimed for payments for 300 integrated care plans, and did not get paid for the remaining 109. The project exceeded the integrated care plans best-case scenario target.

With regards to the metric around avoidable hospital admissions, data from the DCMS Data Portal indicates that the project claimed for this outcome 180 times until September 2024. In the end of grant form, where projects self-report their achievements, EDCS reports achieving 620 outcomes around avoidable hospital admissions. The project explained that they did not record these on the DCMS Data Portal because they had already reached their payment caps with the LCF and local commissioner.

Figure 18.2 shows the distribution of EDCS outcomes across fiscal years, with 2023/24 being the year with the highest achievements.

Outcome payments and project's cost

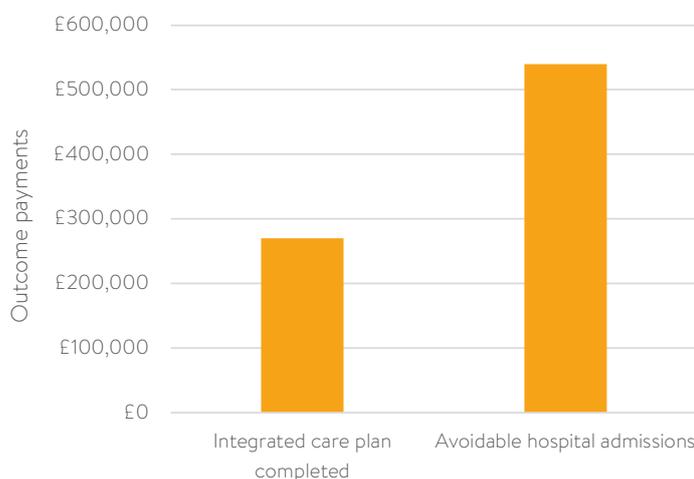


Figure 18.3 Outcome payments paid to EDCS between 2021 and 2023

¹²⁴ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 18.4 Outcome payments paid to EDCS by fiscal year (2021/22-2023/24)



Figure 18.3 shows the outcome payments for the two metrics of EDCS. The project received £270,000 for integrated care plan completions and £540,000 for avoided hospital admissions. In total, the project received outcome payments of £810,000.

Figure 18.4 shows the distribution of outcome payments across fiscal years. EDCS received £270,000 each fiscal year due to the caps on both outcome metrics.

Table 18.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£345,000	£355,950
Maximum outcome payments	£810,000	£810,000

Table 18.2 indicated that the Care and Wellbeing Fund, the investors for EDCS, invested more funding than anticipated in the project. However, the project reported that the initial investment agreed was £355,950, so this figure might have been outdated in the DCMS Data Portal.

	Planned	Actual
Investment cost	£68,000 (8%)	£68,100 (8.5%)
Management cost	£60,000 (7%)	£60,000 (7.5%)
Evaluation and learning cost	£0 (0%)	£0 (0%)
Delivery cost	£750,000 (85%)	£672,000 (84%)
Total cost	£878,000 (100%)	£800,100 (100%)

Table 18.3 Project's total cost and cost distribution

Table 18.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. EDCS's actual total cost is lower than initially planned. The project reported the actual amount approved for delivery cost was £672,000, so it is possible that the forecast for delivery cost in the DCMS Data Portal was outdated. This may be related to the fact that EDCS was originally designed to be a larger project than was eventually realised.

LCF EVALUATION REPORT

HEALTHY LIVES
PROJECTS

Project name	Service delivery start date	Location	Data source	Project continues after Sep 2024
MHEP Haringey And Barnet	May 2019	London Borough of Haringey and Barnet	DCMS Data Portal	
Promoting Independence	November 2019	Sheffield	DCMS Data Portal	✓
Midlands Regional Pause Hub	February 2020	Derbyshire, Northamptonshire, Plymouth, and Worcestershire	DCMS Data Portal	✓
MHEP Enfield	April 2020	London Borough of Enfield	DCMS Data Portal	
MHEP Tower Hamlets SMI	April 2020	London Borough of Tower Hamlets	DCMS Data Portal	
MHEP Shropshire	April 2020	Shropshire	DCMS Data Portal	
MHEP Tower Hamlets LD	July 2020	London Borough of Tower Hamlets	DCMS Data Portal	
Norfolk Carers SIB	September 2020	Norfolk	DCMS Data Portal	✓
Social Prescribing Service Northamptonshire	July 2021	Northamptonshire	DCMS Data Portal	✓

NINETEEN

MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP (MHEP) HARINGEY AND BARNET¹²⁵



Project delivery dates:

May 2019 - April 2023



Location:

London Borough of Haringey and Barnet



Planned size of cohort:

985 service users

Actual size of cohort:

972 service users



Planned investment commitment:

£227,000

Actual investment committed:

£227,000



Summary:

Individual Placement Support aimed at getting people with enduring and severe mental health issues back or into paid employment.



Involved organisations:

- Commissioners: Haringey Council, Haringey Clinical Commissioning Group and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Twining's Enterprise



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£1,421,234

Total outcome payments (under the LCF) (from the LCF and commissioners):

£1,431,647 [LCF: £596,918 (42%)]



Primary outcome:

Job start.

- Planned achievement: 379 job starts
- Actual achievement: 212 job starts

¹²⁵ For more information on the Mental Health and Employment Partnership delivery see the Mental Health and Employment Partnership Evaluations for the Life Chances Fund reports [here](#).

OUTCOME METRICS

Table 19.1 Outcome metrics for MHEP Haringey And Barnet

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: successful engagement with the IPS service	PT1: completion of three appointments with the employment coordinator or when the vocational profile is completed	£569
Metric 2: individual obtains competitive employment and starts job	PT2: individual spends at least one full day (or 4 hours for part time work) in paid competitive employment	£4,224
Metric 3: individual sustains job at less than 16 hours a week	PT3: individual sustains paid employment for at least 13 weeks where they work less than 16 hours per week	£6,379
Metric 4: individual sustains job for more than 16 hours a week	PT4: individual sustains paid competitive employment for at least 13 weeks where they work more than 16 hours per week	£7,845

Table 19.1 shows the latest version of the outcome metric structure for the Mental Health and Employment Partnership in Haringey and Barnet. During the life of this service, one main adjustment impacted this structure:

To mitigate the impact of the COVID pandemic, MHEP Haringey And Barnet switched to a grant-based payment mechanism between January and September 2020. This means that the payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.

Outcome achievements and results

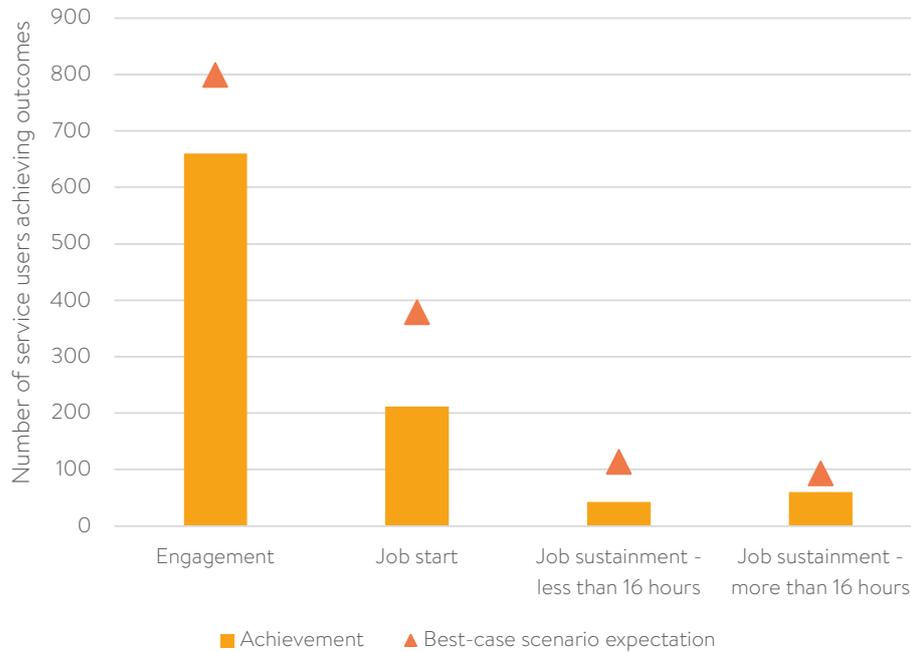


Figure 19.1 Outcomes achieved by MHEP Haringey And Barnet (2019-2022)

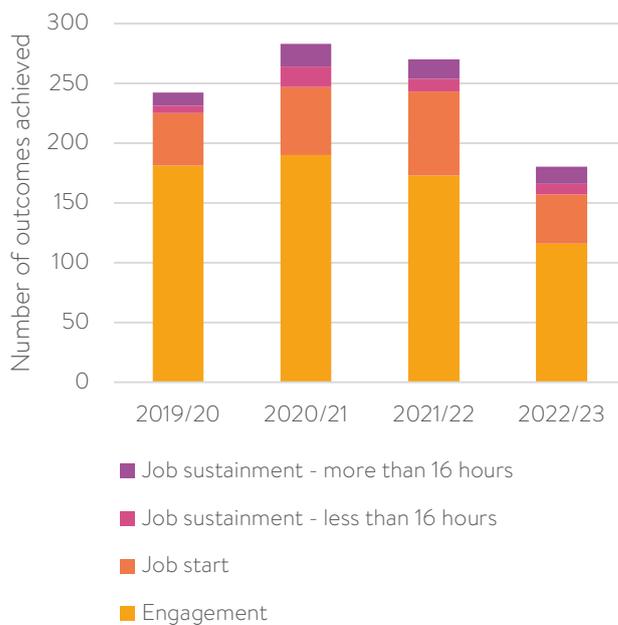


Figure 19.2 Outcomes achieved by MHEP Haringey And Barnet across fiscal years (2019/20 – 2022/23)¹²⁶

¹²⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

MHEP Haringey And Barnet worked with a cohort of 972 people. Of those 972 people, 660 successfully engaged with the programme. 212 individuals (32% of the engaged cohort) went into employment and 103 (16% of the engaged cohort) sustained their jobs (43 for less than 16 hours a week, and 60 for more than 16 hours a week). The project did not meet their best-case scenario targets for several reasons, mostly related to the impact of the COVID pandemic. These include a challenging job market with fewer positions available for people with mental health problems, difficulties engaging with service users online and difficulties retaining staff working for the programme. It is worth noting that 32% of engaged service users starting a job is in line with what is considered a successful result in the IPS literature ([Evaluation of the WDP IPS Into Work service, p6](#)).

Outcome payments and project’s cost

Figure 19.3 Outcome payments paid to MHEP Haringey And Barnet

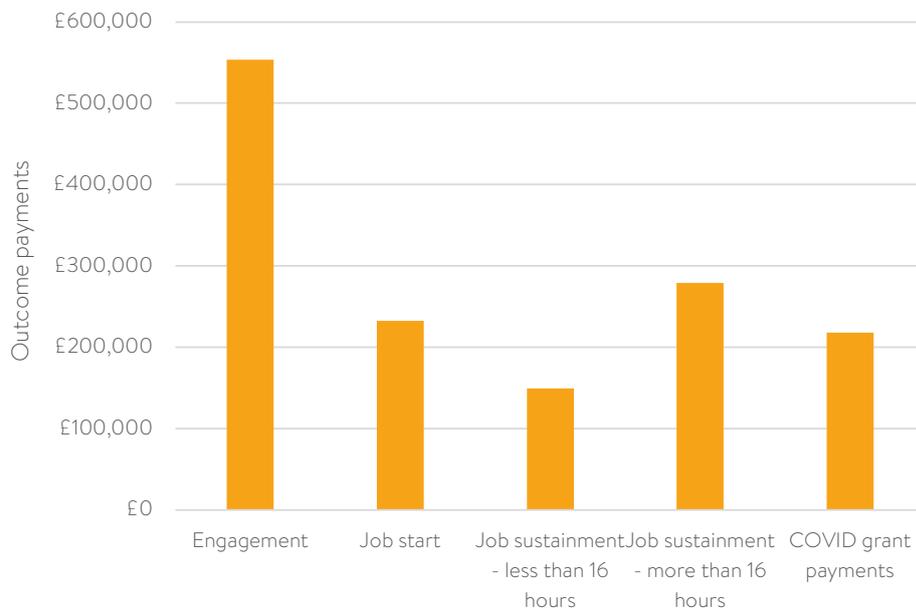


Figure 19.3 shows the outcome payments to MHEP Haringey and Barnet between 2019 and 2022. MHEP Haringey and Barnet received £553,472 for engagement outcomes, £232,235 for job start outcomes, £149,135 for job sustainment – less than 16 hours a week, and £278,825 for job sustainment – more than 16 hours a week. In total, MHEP Haringey and Barnet received £1,213,667 in outcome payments and £217,980 in COVID grant payments. Total payments for the project were £1,431,647. This is a higher amount than originally agreed with the LCF and commissioners. MHEP Haringey and Barnet negotiated an increase in the amount of outcome funding available from the local commissioner that was not recorded in the DCMS Data Portal. The originally agreed LCF award did not change during the life of this contract.

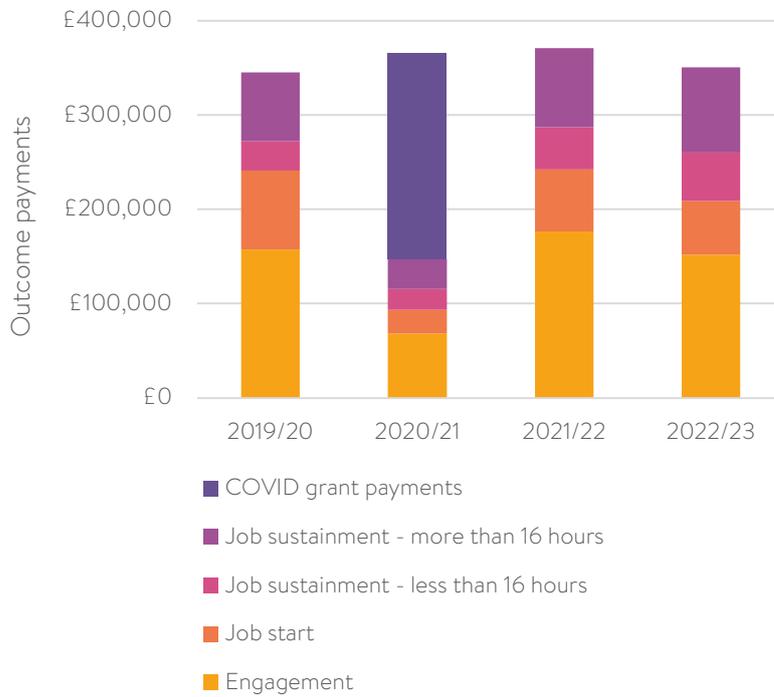


Figure 19.4 Outcome payments paid to MHEP Haringey And Barnet by fiscal year (2019/20 – 2022/23)

Figure 19.4 presents the distribution of payments for MHEP Haringey And Barnet across fiscal years. In total, the project received £345,121 in fiscal year 2019, £365,165 in 2020 (including COVID grants), £370,751 in 2021 and £350,610 in 2022.

	Planned	Actual
Total investment commitment	£227,000	£227,000
Maximum outcome payments	£1,421,234	£1,431,647

Table 19.2 Planned and actual investment and maximum potential outcome payment

Big Issue Invest, the social investor for MHEP Haringey And Barnet, invested the same amount of funding as originally planned. The project reported having a surplus that was greater than projected at the outset of the SOP due to positive financial performance. The project hit the maximum potential outcome payment, achieving payments from the LCF and local commissioner of £1,431,647.

Table 19.3 Project's total cost and cost distribution

	Planned	Actual
Investment cost	£250,909 (17.4%)	£201,208 (14%)
Management cost	£98,715 (6.9%)	£92,155 (7%)
Evaluation and learning cost	£19,200 (1.3%)	£19,584 (1%)
Delivery cost	£1,071,611 (74.4%)	£1,094,907 (78%)
Total cost	£1,440,435 (100%)	£1,407,854 (100%)

Table 19.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. MHEP Haringey and Barnet's actual total cost is more than £30,000 lower than initially planned. There was a decrease in the cost of investment, reportedly due to the early repayment of loans, which lowered some interest for the programme.

TWENTY

PROMOTING INDEPENDENCE



Project delivery dates:

October 2019 –
March 2026



Location:

Sheffield



Planned size of cohort:

105 service users

Actual size of cohort:

116 service users



Planned investment commitment:

£725,000

Actual investment committed:

£800,000



Summary:

Individual support to assist adults with mental health issues to live independently in the community.



Involved organisations:

- Commissioners: Sheffield City Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: South Yorkshire Housing Association



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£2,744,750

Total outcome payments (under the LCF) (from the LCF and commissioners):

£2,376,250 [LCF: £686,187 (29%)]



Primary outcome:

Increase in the number of people who move from 24/7 provision into their own tenancy and sustain this move.

- Planned achievement: 74 people moving into their own tenancy
- Actual achievement (up to September 2024): 73 people moving into their own tenancy

OUTCOME METRICS

Table 20.1 Outcome metrics for Promoting Independence

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: engagement of individual onto the programme.	PT1: extra payment for engagement into the programme (temporary payment trigger valid between December 2020 to December 2021)	£2,000
	PT2: individual engages and completes well-being plan and recovery star (from January 2022 onwards).	£2,000
Metric 2: increase in the number of people who move from 24/7 provision into their own tenancy and sustain this move. Primary Outcome.	PT3: exit from 24/7 residential care into independently maintained tenancy.	£6,000
	PT4: sustainment of tenancy for 6 months.	£10,000
	PT5: sustainment of tenancy for 12 months.	£12,500
	PT6: sustainment of tenancy for 18 months.	£22,000

Table 20.1 shows the latest outcome metric structure for Promoting Independence. This structure went through two main changes during the life of service delivery.

In December 2020, the lead organisation for Promoting Independence (Sheffield City Council) proposed a variation. Sheffield City Council suggested the addition of a temporary payment trigger associated with outcome metric 1. The project would get a £2,000 payment for every new person engaging with the service between December 2020 and December 2021, which was paid after six weeks of engagement and completion of a recovery plan (payment trigger 1). In 2022, the outcome payers agreed to keeping the temporary outcome in the project (they stopped using payment trigger 1 and created payment trigger 2).

A second contract variation in 2022 also included a reduction in the number of individuals expected to achieve outcomes, an increase in the prices per outcomes and a replacement of the original payment trigger 6 ‘sustainment of tenancy for 24 months’ with ‘sustainment of tenancy for 18 months’. With regards to the changes in prices, payment trigger 3 was increased from £2,750 to £6,000, payment trigger 4 from £6,500 to £10,000, payment trigger 5 from £10,000 to £12,500 and payment trigger 6 from £17,000 to £22,000.

The rationale for these changes was related to the project receiving less referrals than initially expected, which was due to the effect of the COVID pandemic on the project. The pandemic restricted the interaction between referring agencies and Link Workers who could interact with individuals who would have been referred to the service.

Outcome achievements and results

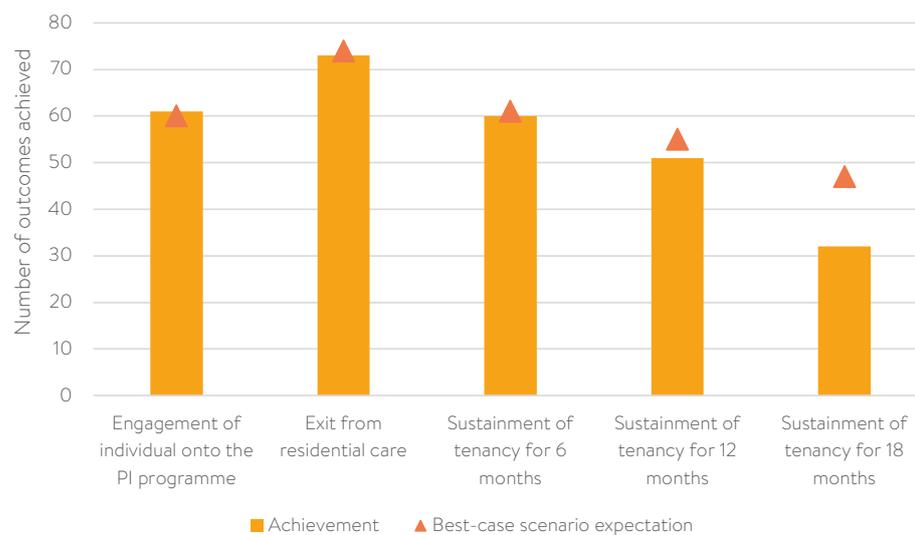


Figure 20.1 Outcomes achieved by Promoting Independence up to September 2024

The project Promoting Independence will continue delivering services until March 2026. The data presented in Figure 20.1 should be considered as interim data up to September 2024.

Figure 20.1 shows outcome achievements for Promoting Independence between 2020 and 2024. Promoting Independence has achieved all best-case scenario targets, except for the metrics ‘sustainment of tenancy for 12 months’ and ‘sustainment of tenancy for 18 months’. The project forecasts that they will exceed these targets by 2026.

The project highlighted several factors behind their achievements, including a strong working partnership approach and the partners’ shared vision. The strong partnership approach enabled openness and transparency within the group and was key to addressing the barriers faced by the project. In addition, the project highlighted the effect of the transfer of the Mental Health Adult Social Work function from the Sheffield Health and Social Care Trust (SHSC) to Sheffield City Council. Having the Mental Health Adult Social Care function within the City Council allowed the team to attend specialised forums where they could raise the profile of the project, increasing the number of referrals.

Additionally, the project highlighted the importance of the variation agreements negotiated with the commissioners (Sheffield City Council and DCMS). These changes allowed the project to forecast more realistically based on actual performance data.

Although the project delivered services during the COVID pandemic, they did not switch to grant-based payments.

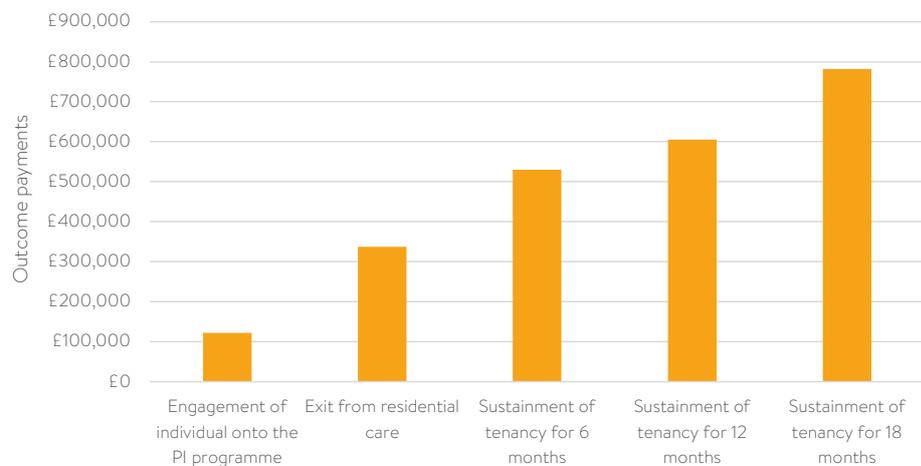
Figure 20.2 Outcomes achieved by Promoting Independence across fiscal years 2020/21 – 2024/25¹²⁷



Figure 20.2 shows the distribution of outcomes across fiscal years. The project Promoting Independence continues delivering services until March 2026. The data presented in Figure 20.2 should be considered as interim data up to September 2024.

Outcome payments and project’s costs

Figure 20.3 Outcome payments paid to Promoting Independence (2020-2024)



¹²⁷ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.



Figure 20.4 Outcome payments paid to Promoting Independence by fiscal year (2020-2024)

Figure 20.3 shows the total outcome payments by metric. Promoting Independence received £122,000 for engagement onto the programme (this includes both the temporary outcome payment trigger 1 and the final outcome on engagement payment trigger 2), £337,250 for individuals exiting residential care, £530,000 for individuals sustaining their tenancy for 6 months, £605,000 for individuals sustaining their tenancy for 12 months and £782,000 for individuals sustaining their tenancy 18 or 24 months.

Figure 20.4 shows the distribution of outcome payments across fiscal years. In total, Promoting Independence received £116,000 in 2020, £327,250 in 2021, £747,000 in 2022, £718,000 in 2023 and £468,000 in 2024.

Both Figures 20.3 and 20.4 should be read as interim payment data, as Promoting Independence will deliver services until November 2026.

	Planned	Actual
Total investment commitment	£725,000	£800,000
Maximum outcome payments	£2,744,750	£2,376,250

Table 20.2 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

Table 20.2 shows that Big Issue Invest, the social investor for Promoting Independence, invested £75,000 more than initially planned.

Promoting Independence has claimed £2,376,250 for outcome payments as of September 2024. All LCF outcomes funding has been drawn down (£686,187).

Table 20.3 Project's cost distribution

	Planned	Actual
Investment cost	£299,066	£198,000
Management cost	£198,000	£198,000
Evaluation and learning cost	Not reported in Grant Baseline Block	£45,000
Delivery cost	£2,693,377	£2,471,801
Total cost	Not reported in Grant Baseline Block	Not reported in end of grant form

[Please check the Glossary section to find definitions for these terms]

Table 20.3 presents the cost distribution for Promoting Independence. The project planned to spend £299,066 in investment costs, £198,000 in management cost and £2,693,377 in service delivery. The baseline form does not have data on evaluation and learning cost given that the project did not have an evaluation plan or evaluation team in place at the beginning of the contract. Due to this missing cost item, it is not possible to calculate planned total cost of the service.

It is also not possible to calculate the actual investment cost given that full capital and interest repayment will not be realised until 2026. The project reported that £198,000 is an interim figure. Due to this missing cost item, it is not possible to calculate actual total cost of the service. The project reported the actual cost of evaluation and learning as being £45,000.

TWENTY-ONE

MIDLANDS REGIONAL PAUSE HUB¹²⁸



Project delivery dates:

February 2020 –
September 2026



Location:

Derbyshire,
Northamptonshire,
Worcestershire,
and Plymouth



Planned size of cohort:

166 women

Actual size of cohort:

188 women



**Planned investment
commitment:**

£2,150,000

**Planned investment
commitment up to
Sep 2024:**

£1,429,000

**Actual investment
committed up to
Sep 2024:**

£1,429,000



Summary:

The service aims to help women who have experienced or are at risk of experiencing at least two episodes of care proceedings leading to the removal of one or more of their children into care. Pause is an intensive, relationship-based support intervention in which the trauma-informed support offered is practical, behavioural and therapeutic.



Involved organisations:

- Commissioners: North Northamptonshire Council, West Northamptonshire Council, Plymouth City Council, Worcestershire County Council, and Derbyshire County Council and the Department for Culture, Media and Sport (DCMS)¹²⁹
- Investors/fund managers: Bridges Fund Management
- Service providers: Pause National, Trevi House, Ripplez CIC (up to Dec 2020) and Catch 22 (from Jan 2021 until Mar 2024)
- Intermediaries: Bridges Fund Management (Bridges Outcomes Partnerships – from Apr 2024 onwards)



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£5,643,426

**Total outcome payments (under the LCF)
(from the LCF and commissioners):**

£4,933,934 [LCF: £1,997,446 (40.5%)]



Primary outcomes:

Women are supported to focus on themselves, increase their wellbeing, employability, sense of self and engage with other services whilst taking a 'pause' from pregnancy

- Planned achievement: 121 women engage with the Pause programme and 108 women successfully complete the Pause programme
- Actual achievement: 175 women engaged with the Pause programme and 149 women successfully completed the Pause programme

128 This project is also known as 'Forward Outcomes Partnerships'

129 Along with these commissioners, Plymouth Household Fund and Northamptonshire Household Support Fund provided additional funding for the project.

OUTCOME METRICS

Table 21.1 Outcome metrics for Midlands Regional Pause Hub

Outcome metric	Payment trigger	Price per payment trigger
Metric 1: women are supported to focus on themselves, increase their wellbeing, employability, sense of self and engage with other services whilst taking a 'pause' from pregnancy (Primary outcome)	PT1: woman is engaged with Pause programme	£1,287 per engagement outcome, each woman can claim for this outcome up to ten times
	PT2: woman successfully completes Pause programme	£15,736 to be claimed only once per woman
Metric 2: women do not become subject to the instigation of further care proceedings for removal of a child for a period of 18 months from the point when they complete the Pause programme	PT3: women avoid further care proceedings and are able to adequately care for further children	£22.80 per day up to £12,483 per woman.

Table 21.1 shows the latest outcome metric structure for Midlands Regional Pause Hub. This metric and payment trigger structure has not changed at any point in the life of the project. The project was originally designed to provide services in Derbyshire. Northamptonshire joined the partnership in September 2020 and adopted the same outcome metric structure. Worcestershire joined in February 2021, and Plymouth was the last local authority to join the partnership. The first outcomes payments for Northamptonshire, Worcestershire and Plymouth were triggered in July-September 2021, July-September 2022 and January-March 2024 respectively.

Outcome achievements and results

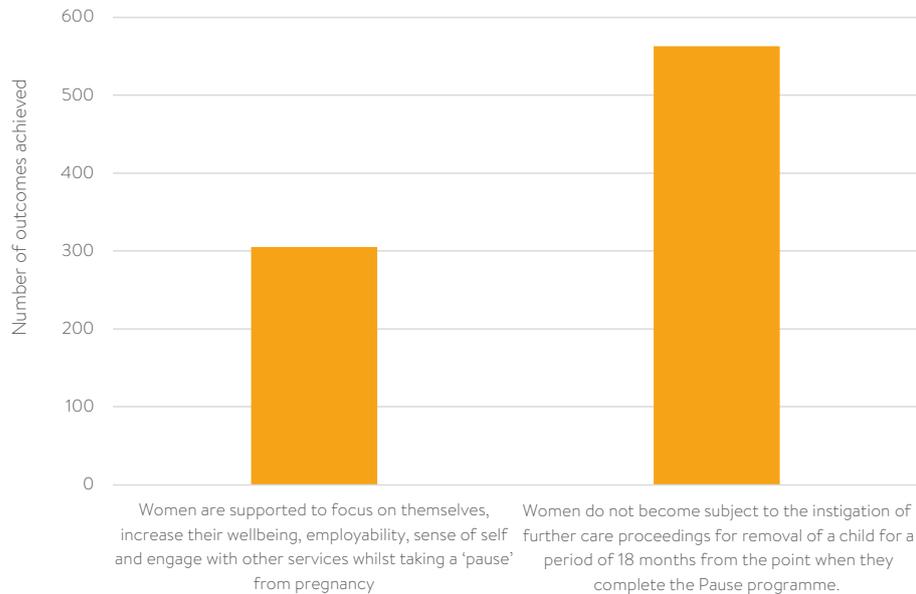


Figure 21.1 Outcomes achieved by Midlands Regional Pause Hub between 2020 and 2024

Figure 21.1 shows outcome achievements for the Midlands Regional Pause Hub. The DCMS Data Portal team asked the project to only report on a simplified set of outcome measures, not the granular data used by the local authorities to make payments against. Figures 21.1 to 21.4 show achievements at the outcome metric level. In addition, this is a project that will deliver services up to September 2026. All data shown in Figures 21.1 to 21.4 should be understood as interim data representing performance up to September 2024.

Midlands Regional Pause Hub was paid for metric 1 (women are supported to focus on themselves (...) whilst taking a 'pause' from pregnancy) 305 times. Metric 1 includes both payment trigger 1 (engagement with the programme) and payment trigger 2 (programme completion). Given that each woman could claim for the engagement achievements up to ten times, this figure does not count a unique number of women, but rather the number of times the metric has been paid for.

The project was paid 563 times for metric 2 (women do not become subject to the instigation of further care proceedings for removal of a child for a period of 18 months). Similarly to metric 1, each woman could claim for this achievement more than once. This figure does not count unique number of women, but the number of times the metric has been paid for.

Both metrics were subject to caps due to the LCF and local commissioner contracts. This means that the number of times that an outcome was paid for is not necessarily equal to the number of times that it was achieved. This project has achieved the potential outcome payment (under the LCF) and achievement beyond the caps were not captured on the DCMS Data Portal.

In the end of project reporting, the Midlands Regional Pause Hub claimed they had delivered outcomes for a total value of £6,727,667, having engaged, as of September 2024:

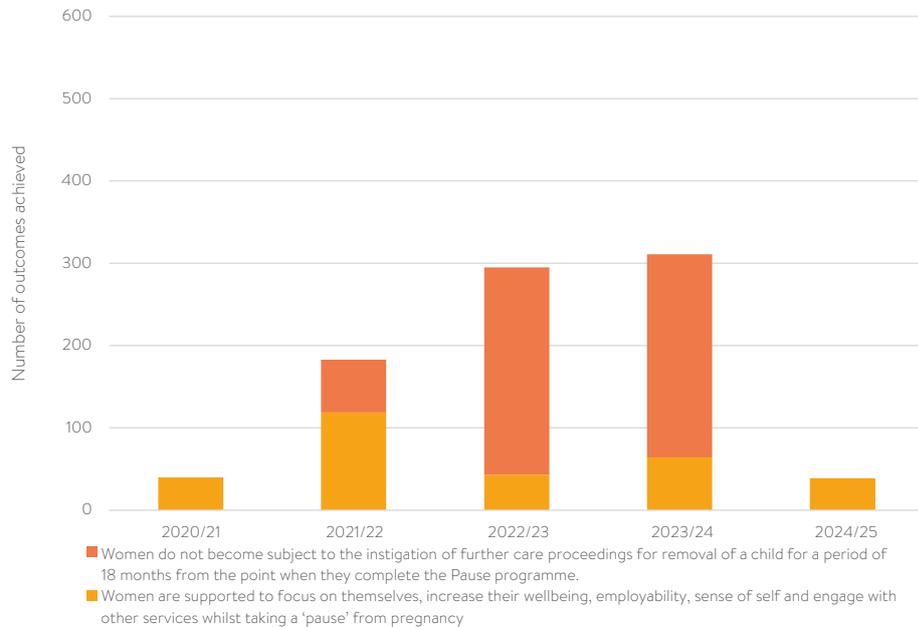
- 175 engaged with the programme, overachieving the target of 121 (payment trigger 1),
- 149 completed the programme, overachieving the target of 108 women (payment trigger 2) and,
- 149 were able to adequately care for their children, overachieving the 143 target (payment trigger 3).

In addition to this, 10 children who had been taken into care have been reunified with women that have been supported by the project.

These achievements were enabled by a series of delivery innovations, such as:

- Including stepdown support to ensure an effective transition after the programme,
- Including increased support for the delivery team, which boosted team stability and reduced staff turnover,
- Providing additional clinical supervision to staff to protect them from compassion fatigue and burnout,
- The distribution of laptops, tablets, and other tools to ensure that women could still be supported during the COVID pandemic.

Figure 21.2 Outcomes achieved by Midlands Regional Pause Hub across fiscal years 2020/21 – 2024/25¹³⁰



130 Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 21.2 shows the distribution of outcomes across fiscal years, with 2023/24 being the year with the highest achievements. Figure 21.2 does not show outcomes achieved beyond the caps.

Outcome payments and project's cost

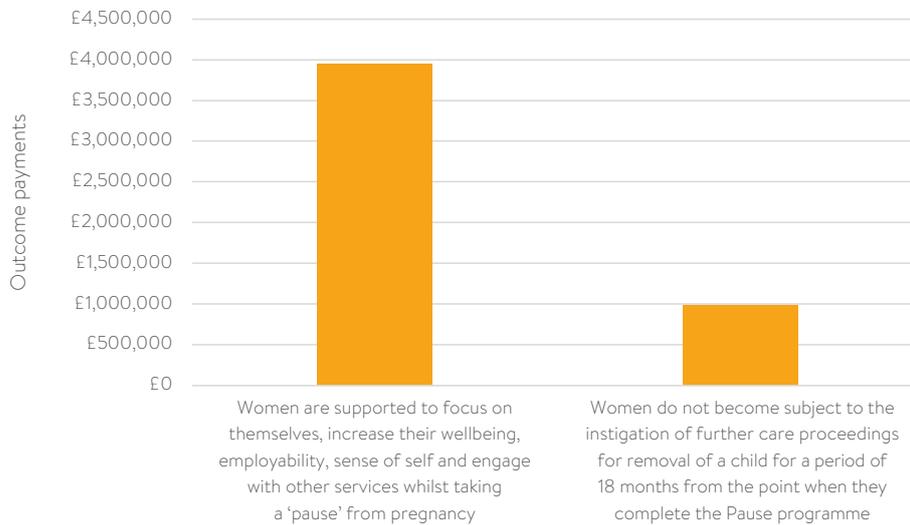


Figure 21.3 Outcome payments for Midlands Regional Pause Hub between 2020 and 2024

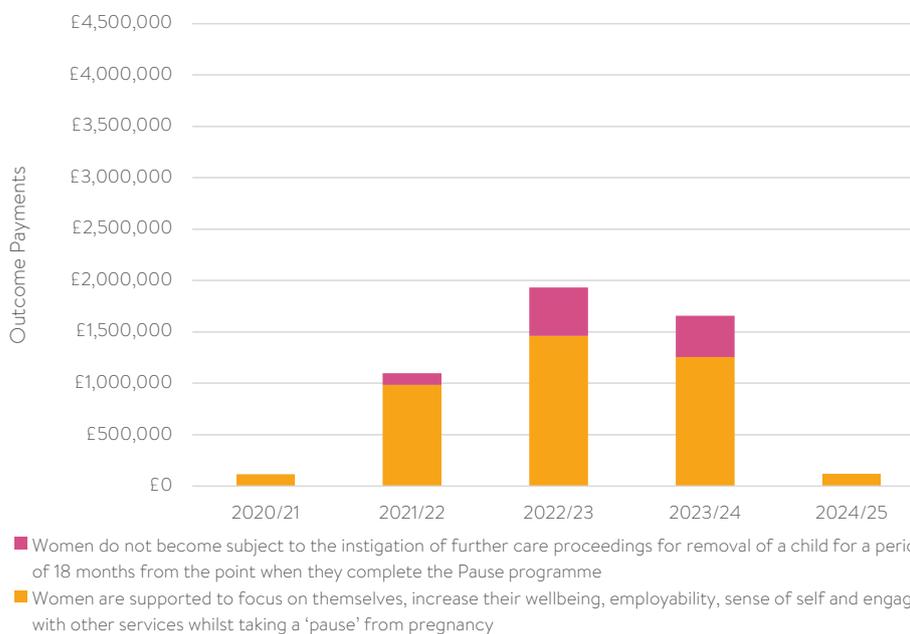


Figure 21.4 Outcome payments for Midlands Regional Pause Hub across fiscal years 2020/21 – 2024/25¹³¹

Figure 21.3 shows outcome payments for Midlands Regional Pause Hub. According to the payments recorded on the DCMS Data Portal, the project received £3,947,390 for metric 1 achievements (women are supported to focus on themselves (...) whilst taking a 'pause' from pregnancy) and £986,544 for metric 2 achievements (women do not become subject to the instigation of further care proceedings for removal of a child for a period of 18 months). As of September 2024, the project had received £4,933,934 in outcome payments.

Figure 21.4 shows the distribution of outcome payments across fiscal years, with 2022/23 being the year with the highest number of payments.

¹³¹ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 21.2 Planned and actual investment and maximum potential outcome payment

	Planned	Planned (up to Sep 2024)	Actual
Total investment commitment	£2,150,000	£1,429,000	£1,429,000
Maximum outcome payments	£5,643,426	£4,948,981	£4,933,934

[Please check the Glossary section to find definitions for these terms]

As Midlands Regional Pause Hub is an ongoing project, Tables 21.2 and 21.3 show the expectations for the project as of September 2024 ('planned up to Sep 2024') and their current status as of September 2024. Table 21.2 indicates that the project has drawn down as much investment as expected for September 2024.

Table 21.3 Project's cost distribution

	Planned	Planned (up to Sep 2024)	Actual
Investment cost	£548,000 (10%)	£0 (0%)	£0 (0%)
Management cost	£325,000 (6%)	£10,000 (0.2%)	£10,749 (0.22%)
Evaluation and learning cost	£30,000 (1%)	£14,000 (0.3%)	£4,000 (0.08%)
Delivery cost	£4,740,426 (83%)	£4,602,837 (99.5%)	£4,772,088 (99.7%)
Total cost	£5,643,426 (100%)	£4,626,837 (100%)	£4,786,837 (100%)

[Please check the Glossary section to find definitions for these terms]

Table 21.3 presents the total cost and cost distribution for the Midlands Regional Pause Hub. In end of grant reporting, the project explained that the investment cost was reported as £0 as they had access to pro-bono support for legal advice and delivery partnership set up. Evaluation and learning costs were lower than expected, as although the project had originally planned to run two different evaluations, one of these could not be undertaken due to staffing challenges in the organisation in charge of the evaluation. In total, the Midlands Regional Pause Hub costed £4,786,837 as of September 2024, with more than 99% of the cost spent on service delivery.

TWENTY-TWO

MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP – ENFIELD¹³²



Project delivery dates:

April 2020 -
March 2024



Location:

London Borough
of Enfield



Planned size of cohort:

674 service users

Actual size of cohort:

254 service users



**Planned investment
commitment:**

£126,000

**Actual investment
committed:**

£126,000



Summary:

Individual Placement Support aimed at getting people with enduring and severe mental health issues into paid employment.



Involved organisations:

- Commissioners: Enfield Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Working Well Trust



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£620,689

**Total outcome payments (under the LCF)
(from the LCF and commissioners):**

£604,044 [LCF: £254,072 (42%)]



Primary outcome:

Job start.

- Planned achievement: 181 job starts
- Actual achievement: 88 job starts

132 For more information on the Mental Health and Employment Partnership delivery see the Mental Health and Employment Partnership Evaluation for the Life Chances Fund reports [here](#).

OUTCOME METRICS

Table 22.1 Outcome metrics for MHEP Enfield

Outcome metric	Payment trigger	Price per individual achieving this outcome
Metric 1: engagement	PT1: completion of three appointments with the employment coordinator or when the vocational profile is completed	£414
Metric 2: job start (Primary outcome)	PT2: individual spends at least one full day (or 4 hours for part time work) in paid competitive employment	£1,759
Metric 3: job sustainment (less than 16 hours a week)	PT3: individual sustains paid employment for at least 13 weeks where they work less than 16 hours per week	£2,724
Metric 4: job sustainment (more than 16 hours a week)	PT4: individual sustains paid competitive employment for at least 13 weeks where they work more than 16 hours per week	£4,138

Table 22.1 shows the latest version of the outcome metric structure for the Mental Health and Employment Partnership (MHEP) in Enfield. During the life of this service, two main adjustments impacted this structure:

- To mitigate the impact of the COVID pandemic, MHEP Enfield switched to a grant-based payment mechanism between January and September 2020. This meant that payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.
- Between October 2020 and December 2021, the LCF agreed to a change in the pricing of outcomes. During this period, the LCF and the local commissioner paid £1,122 for engagement and completion of a vocational profile, £2,220 for job start, £3,209 for job sustainment less than 16 hours and £4,700 for job sustainment more than 16 hours. For the LCF, this change meant that they paid more for the engagement outcome, but still paid the same price for the other three outcomes. The price difference for the outcomes around job start and sustainment was covered by the local commissioner. The rationale behind this variation agreement was to allow the MHEP Enfield project to recover after the COVID pandemic. MHEP Enfield went back to the originally agreed prices in January 2022.

Outcome achievements and results

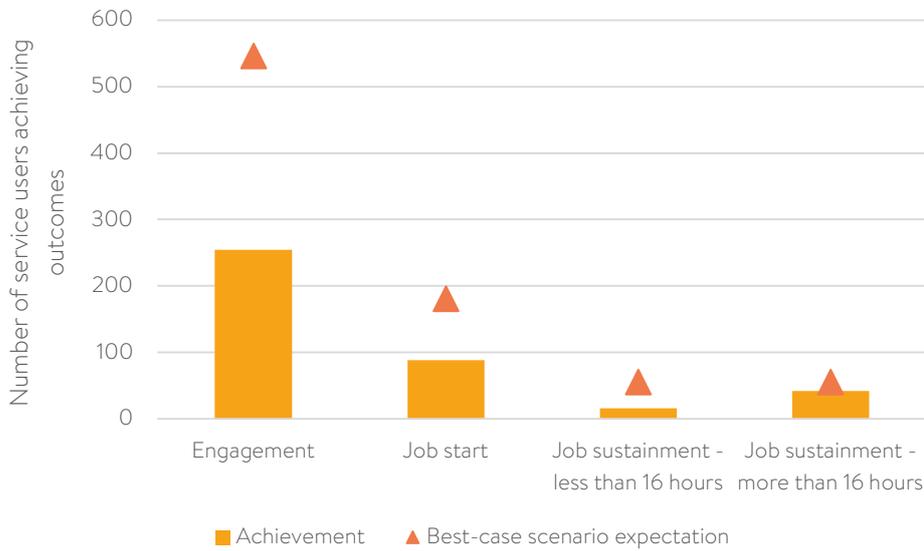


Figure 22.1 Outcomes achieved by MHEP Enfield (2020-2023)

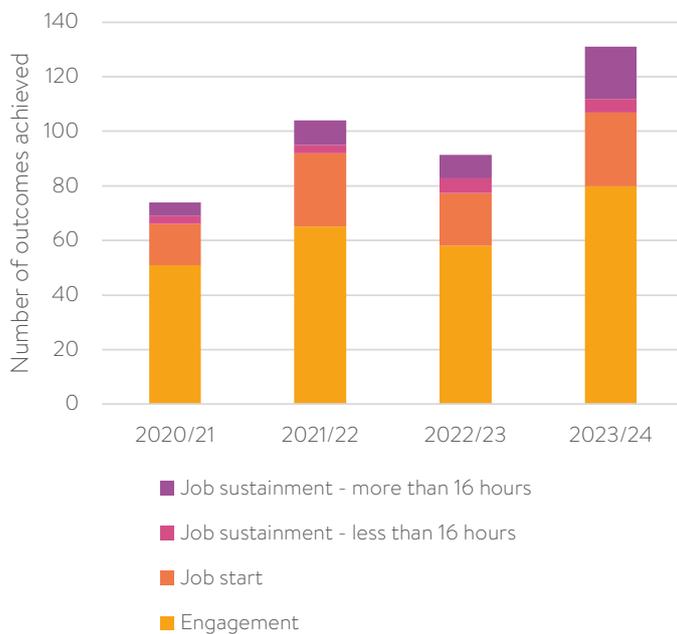


Figure 22.2 Number of outcomes achieved by MHEP Enfield by fiscal year (2020/21 – 2023/24)¹³³

¹³³ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year.

Figure 22.1 shows that MHEP Enfield worked with a cohort of 254 service users with severe and enduring mental health issues who actively engaged with the programme. After the service, 35% of the cohort (88 individuals) started a job and 23% of the cohort (58 individuals) sustained a job of either less or more than 16 hours a week. The service performed below the best-case scenario targets for most tracked outcomes, with the notable exception of job sustainment for more than 16 hours a week, which exceeded expectations.

There were several reasons for performance challenges. As mentioned above, the COVID pandemic severely affected these services, not only by disrupting delivery, but also changing the patterns and ways of working of Employment Specialists and the labour market as a whole. In addition, the project reported having experienced challenges with maintaining the profile of the service among clinicians, many of whom were not familiar with IPS or the MHEP service. The provider, commissioners and MHEP management team (staffed by Social Finance) worked collaboratively to find solutions that ensured that Employment Specialists were properly integrated in clinical teams and that IPS was a standing item on clinical team meetings. Internal changes in the NHS generated a disruption in referral pathways, which may have affected the overall performance of the project.

MHEP Enfield struggled to maintain a fully resourced team. The project reported having experienced challenges around high staff churn. This was a particular challenge for Enfield in its last year, with a significant proportion of the team leaving and newcomers joining in the last year of the contract, leaving the service without any MHEP management team staff for two months. The MHEP management team supported staff through regular check-ins and clearly communicating expectations on behalf of the Enfield team to the board, setting the right expectations.

While the service experienced challenges that caused performance to differ from initial plans, the project demonstrated capacity to learn, adapt and achieve positive outcomes during challenging times. The 88 individuals who started a job, and the 58 individuals who sustained a job supported by the Working Well Trust through MHEP Enfield, represent a major step towards recovery for people with severe mental health conditions.

It is worth noting that as highlighted above, 38% of service users went on to start a job, which is in line with what is considered a successful result in the IPS literature¹³⁴.

Figure 22.2 shows the distribution of outcomes across fiscal years, with 2023/24 being the year with the highest achievements, despite the reported issues with staff turnover.

134 Whitworth, A. & Cullen, A. M. (2023). Evaluation of the WDP IPS Into Work service. Scottish Centre for Employment Research, Department for Work, Employment and Organisation, Strathclyde Business School, University of Strathclyde. Access it [here](#). (p.6).

Outcome payments and project's cost

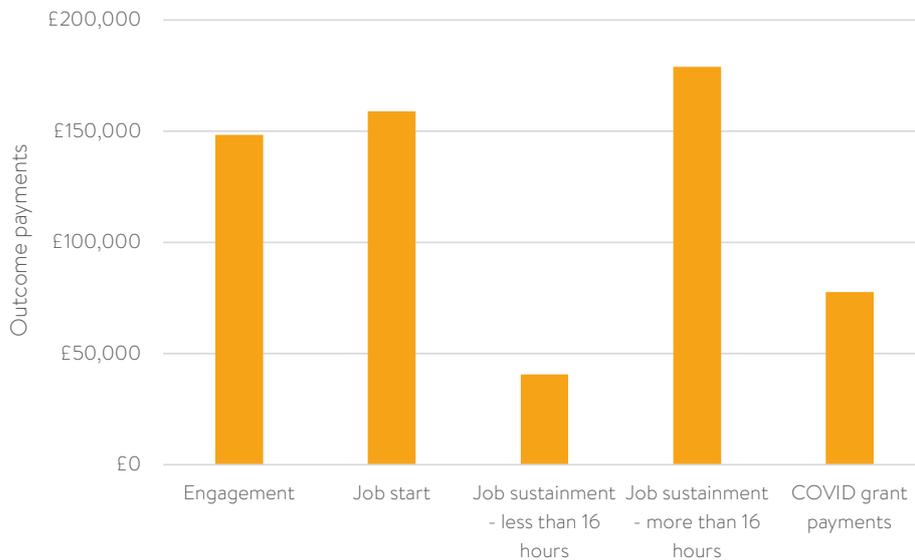


Figure 22.3 Outcome payments paid to MHEP Enfield (2020-2023)

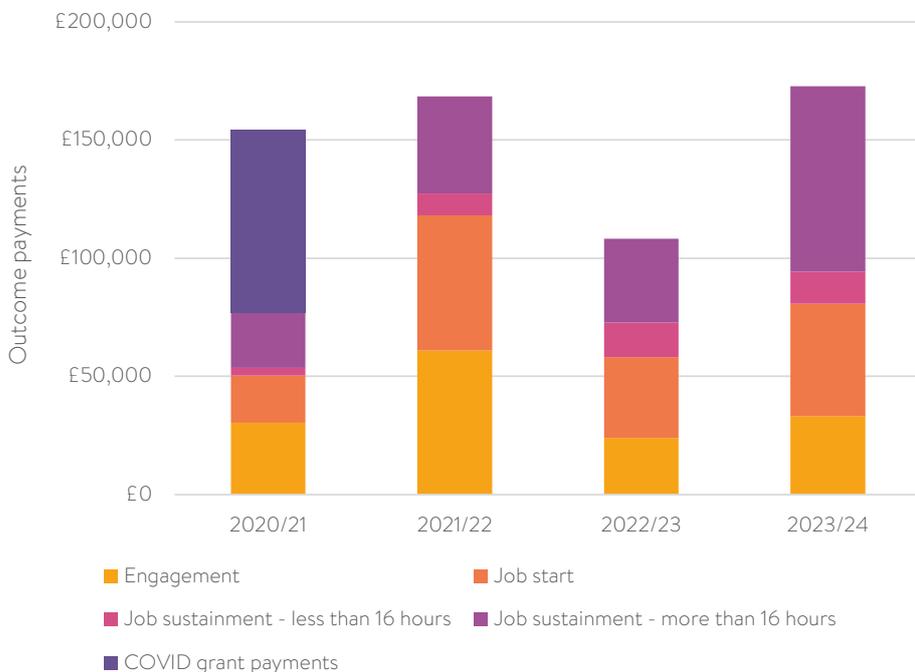


Figure 22.4 Outcome payments paid to MHEP Enfield by fiscal year (2020/21 - 2023/24)¹³⁵

As shown by Figure 22.3, MHEP Enfield received £148,363 for engagement outcomes, £158,739 for job starts, £40,528 for job sustainment less than 16 hours a week and £178,935. In total, the project received £526,565 in outcome payments and £77,479 in COVID grant payments. The total payment for MHEP Enfield was £604,044. Figure 22.4 shows the distribution of outcome payments and COVID grant payments across fiscal years.

¹³⁵ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year.

Table 22.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual
Total investment commitment	£126,000	£126,000
Maximum outcome payments	£620,689	£604,044

[Please check the Glossary section to find definitions for these terms]

Table 22.2 indicates that Big Issue Invest, the social investor for MHEP Enfield, invested the same amount of funding as originally planned (£126,000).

The maximum potential outcome payments (under the LCF) for MHEP Enfield was £620,689, and the project managed to drawdown £604,044. This is due to the project not achieving as many outcomes as initially expected due to the COVID pandemic, staffing issues, reporting complexities, and other systemic pressures affecting the broader public health system in the UK.

Table 22.3 Project's cost distribution

	Planned	Actual
Investment cost	£58,046 (9.3%)	£55,306 (8.76%)
Management cost	£78,084 (12.6%)	£120,554 (19.11%)
Evaluation and learning cost	£9,360 (1.5%)	£4,222 (0.67%)
Delivery cost	£475,200 (76.6%)	£450,916 (71.46%)
Total cost	£620,690 (100%)	£630,998 (100%)

[Please check the Glossary section to find definitions for these terms]

MHEP Enfield was originally designed to cost as much as was available for the maximum potential outcome payment offered by the LCF and local commissioner. In that original plan, 9.3% of the cost was allocated to investment cost, 12.6% to management costs, 1.5% for evaluation and learning costs and 76.6% to service delivery.

After the end of the service, MHEP Enfield reported that the total cost of the project was higher than anticipated at the baseline. There was a small decrease in investment, delivery and evaluation and learning costs. The delivery cost agreed at baseline assumed that the provider would achieve all possible outcome payments, which did not occur, resulting in lower delivery cost.

There was an increase in management costs, which went up to 19.11%. The project explained that reporting, modelling, and performance support demands were higher than anticipated over the life of the project. This resulted in higher management fees, which were approved by the board.

TWENTY-THREE

MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP (MHEP) TOWER HAMLETS¹³⁶ – SEVERE MENTAL ILLNESS (SMI)¹³⁷



Project delivery dates:

April 2020 -
March 2024



Location:

London Borough
of Tower Hamlets



Planned size of cohort:

3,644 service users

Actual size of cohort:

1,171 service users



**Planned investment
commitment:**

£300,000

**Actual investment
committed:**

£300,000



Summary:

Individual Placement Support aimed at getting people with enduring and severe mental health issues back or into paid employment.



Involved organisations:

- Commissioners: Tower Hamlets Clinical Commissioning Group and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Working Well NHS Trust



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£2,068,270

**Total outcome payments (under the LCF)
(from the LCF and commissioners):**

£1,724,693 [LCF: £720,452 (42%)]



Primary outcome:

Job start.

- Planned achievement: 718 job starts
- Actual achievement: 359 job starts

¹³⁶ Tower Hamlets commissioned two projects with the MHEP service, one for a cohort with severe mental illness and another for a cohort with learning disabilities.

¹³⁷ For more information on the Mental Health and Employment Partnership delivery see the Mental Health and Employment Partnership Evaluation for the Life Chances Fund reports [here](#).

OUTCOME METRICS

Table 23.1 Outcome metrics for MHEP Tower Hamlets – Severe Mental Illness (SMI)

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: engagement with IPS programme and completion of vocational profile	PT1: completion of three appointments with the employment co-ordinator or when the vocational profile is completed	£645
Metric 2: individual gains competitive employment and starts Job (Primary outcome)	PT2: individual spends at least one full day (or 4 hours for part time work) in paid competitive employment	£1,145
Metric 3: job sustainment (less than 16 hours a week)	PT3: individual sustains paid employment for at least 13 weeks where they work less than 16 hours per week	£1,993
Metric 4: job sustainment (more than 16 hours a week)	PT4: individual sustains paid competitive employment for at least 13 weeks where they work more than 16 hours per week	£2,302

Table 23.1 shows the latest version of the outcome metric structure for the Mental Health and Employment Partnership in Tower Hamlets – Severe Mental Illness (MHEP TH SMI). During the life of this service, two main adjustments impacted this structure:

- To mitigate the impact of the COVID pandemic, MHEP TH SMI switched to a grant-based payment mechanism between April and September 2020. This means that payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.
- Between October 2020 and September 2021, the LCF agreed to pay a different price for the outcomes. During this period, the LCF and the local commissioner paid £1,278 for engagement and completion of a vocational profile, £1,419 for job start outcomes, £2,324 for job sustainment – less than 16 hours a week and £2,673 for job sustainment – more than 16 hours a week. MHEP TH SMI went back to the originally agreed prices in October 2021.

Outcome achievements and results

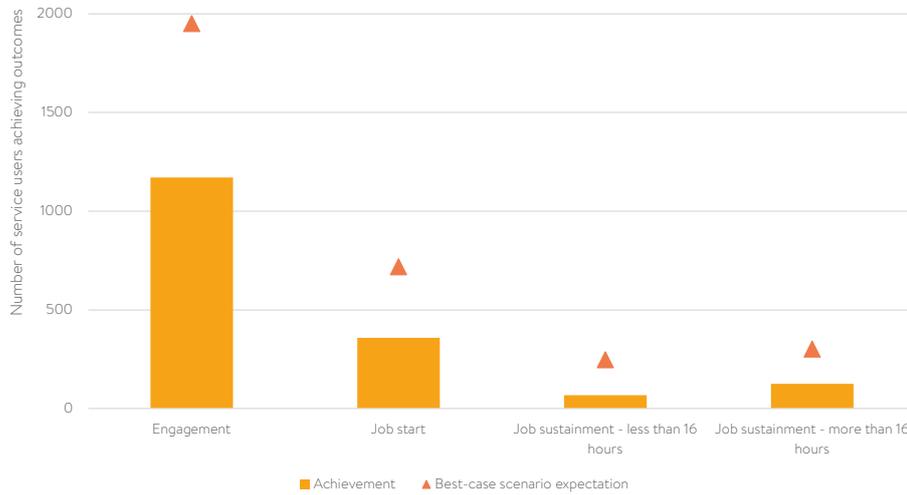


Figure 23.1 Outcomes achieved by MHEP TH SMI (2020-2023)

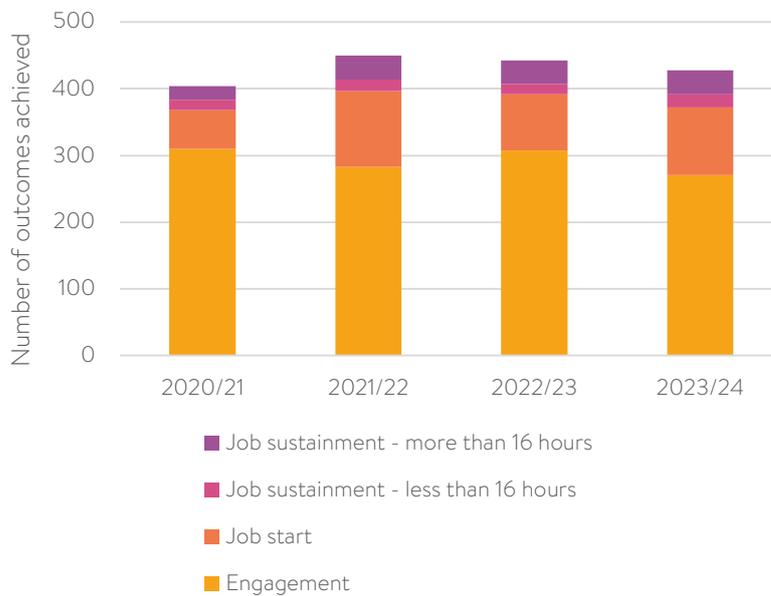


Figure 23.2 Outcomes achieved by MHEP TH SMI across fiscal years (2020/21 – 2023/24)¹³⁸

¹³⁸ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year.

As shown in Figure 23.1, MHEP TH SMI engaged with 1,171 service users. Of those 1,171 engaged users, 358 (31% of engaged users) went into employment and 194 (17% of engaged users) sustained their jobs. The project did not achieve the best-case scenario targets, due to a series of challenges that are common to most MHEP projects. As mentioned above, the MHEP management team was severely impacted by the COVID pandemic, with social distancing causing challenges for service delivery and the labour market having less positions open for people with mental illnesses. The MHEP management team also reported struggling with staff churn and experiencing a long process to incorporate new Employment Specialists into the team.

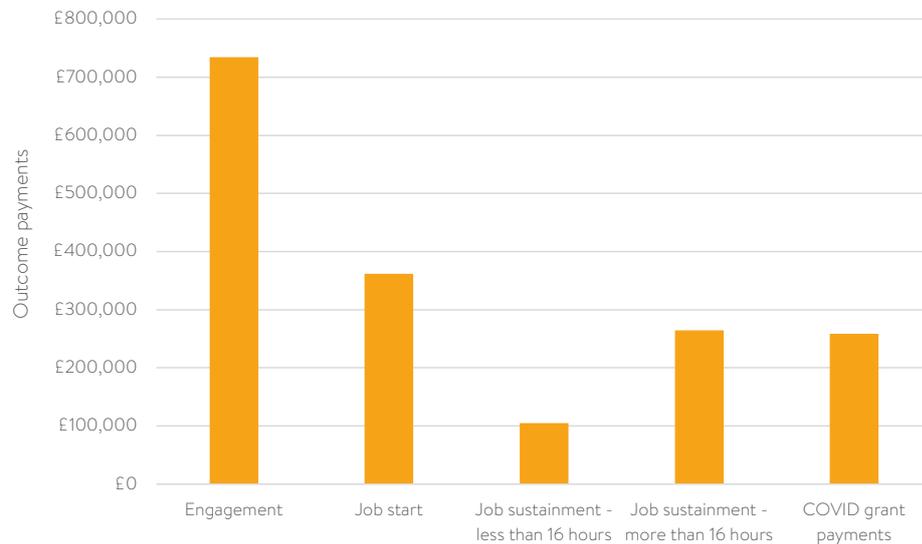
The MHEP TH SMI service, in contrast to other services, particularly struggled with achieving agreed referral numbers. Referrals were not tied to any payment or outcome metric, but they generated repercussions for all other outcomes. The MHEP management team carried out specific analysis into referral sources to highlight fluctuations in their numbers over a contract year, which helped the MHEP TH SMI team structure their engagement with the clinical teams and other sources to improve the flow of users.

It is worth noting that the achievement of 31% of engaged users going into employment is considered a successful result based on the IPS methodology¹³⁹.

Figure 23.2 shows the distribution of MHEP TH SMI outcomes across fiscal years.

Outcome payments and project’s cost

Figure 23.3 Outcome payments paid to MHEP TH SMI



139 Whitworth, A. & Cullen, A. M. (2023). Evaluation of the WDP IPS Into Work service. Scottish Centre for Employment Research, Department for Work, Employment and Organisation, Strathclyde Business School, University of Strathclyde. Access it [here](#). (p.6).

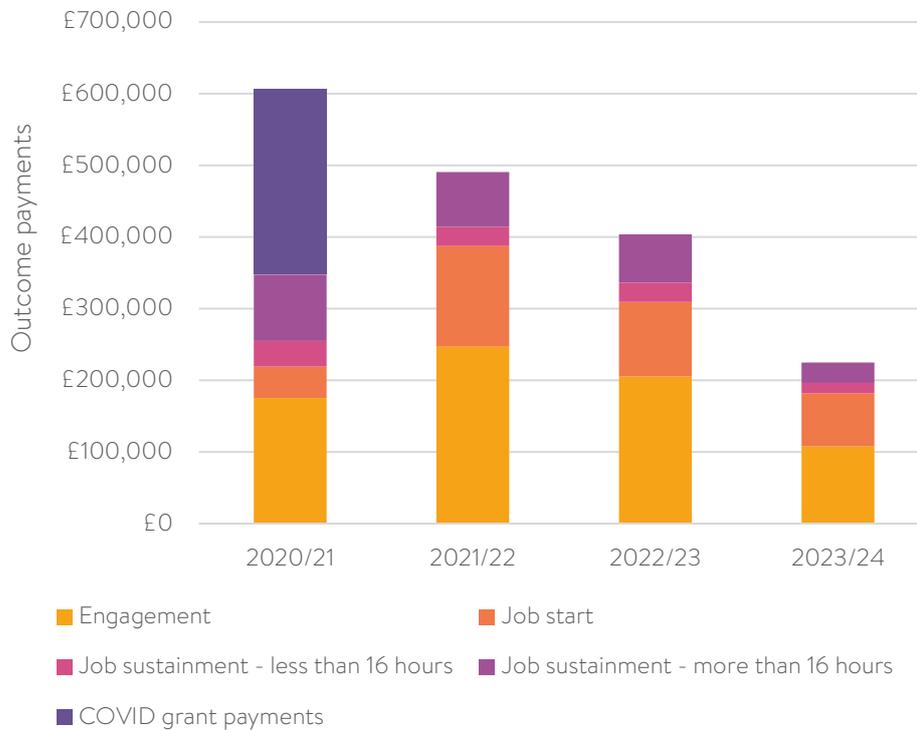


Figure 23.4 Outcome payments paid to MHEP TH SMI by fiscal year (2020/21 – 2023/24)¹⁴⁰

Figure 23.3 shows that MHEP TH SMI received £734,774 for engagement and completion of vocational profile, £361,704 for job starts, £104,836 for job sustainment – less than 16 hours a week, and £264,759 for job sustainment – more than 16 hours a week. In total, MHEP TH SMI received £1,466,073 in outcome payments and £258,620 under COVID grants.

Figure 23.4 presents the distribution of payments for MHEP TH SMI across fiscal years. In total, MHEP TH SMI received £605,618 in fiscal year 2020 (including COVID grant funding), £490,737 in 2021, £403,271 in 2022 and £225,067 in 2023.

	Planned	Actual
Total investment commitment	£300,000	£300,000
Maximum outcome payments	£2,068,270	£1,724,693

Table 23.2 Planned and actual investment and maximum potential outcome payment

Table 23.2 indicates that Big Issue Invest, the social investor for MHEP TH SMI, invested the same amount of funding as originally planned (£300,000). The project did not hit the maximum potential outcome payment, achieving payments from the LCF and local commissioner of £1,724,693.

¹⁴⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year.

Table 23.3 Project's total cost and cost distribution

	Planned	Actual
Investment cost	£162,099 (9%)	£113,559 (6%)
Management cost	£98,736 (5%)	£131,442 (7%)
Evaluation and learning cost	£20,160 (1%)	£15,984 (1%)
Delivery cost	£1,632,000 (85%)	£1,591,000 (86%)
Total cost	£1,912,995 (100%)	£1,851,985 (100%)

Table 23.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. MHEP TH SMI's actual total cost does not differ significantly from the planned total cost. There was a slight decrease in the cost of investment. The project reported that the cost of investment was lower due to the early repayment of loans, which lowered some interest for the programme. As reported for other MHEP projects, there was a slight increase in management cost, given that reporting, modelling and performance support demands were higher than anticipated at baseline.

TWENTY-FOUR

MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP – SHROPSHIRE¹⁴¹



Project delivery dates:

April 2020 –
April 2024



Location:

Shropshire



Planned size of cohort:

582 service users

Actual size of cohort:

439 service users¹⁴²



**Planned investment
commitment:**

£204,000

**Actual investment
committed:**

£204,000



Summary:

Individual Placement Support aimed at getting people with mental health issues back or into competitive employment.



Involved organisations:

- Commissioners: Shropshire Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: Enable Employment Services



**Maximum potential outcome payments under the LCF
(from the LCF and commissioners):**

£1,034,487

**Total outcome payments (under the LCF)
(from the LCF and commissioners):**

£1,034,487 [Life Chances Fund: £434,484 (42%)]



Primary outcome:

Job starts.

- Planned achievement: 197 job starts
- Actual achievement: 148¹⁴³ job starts

141 For more information on the Mental Health and Employment Partnership delivery see the Mental Health and Employment Partnership Evaluation for the Life Chances Fund reports [here](#).

142 At the end of the grant the project self-reported having engaged with 496 service users. As the project hit a cap this additional performance could not be verified through the DCMS Data Portal.

143 The project self-reported an actual achievement of 170 job starts by the end of the project.

OUTCOME METRICS

Table 24.1 Outcome metrics for MHEP Shropshire

Outcome metric	Payment trigger	Price per individual achieving this outcome
Metric 1: engagement with IPS programme and completion of a vocational profile	PT1: completion of three appointments with the employment co-ordinator or when the vocational profile is completed	£578
Metric 2: individual obtains competitive employment and starts job (Primary outcome)	PT2: individual spends at least one full day (or 4 hours for part time work) in paid competitive employment	£2,422
Metric 3: job sustainment (less than 16 hours a week)	PT3: individual sustains paid employment for at least 13 weeks where they work less than 16 hours per week	£3,517
Metric 4: job sustainment (more than 16 hours a week)	PT4: individual sustains paid competitive employment for at least 13 weeks where they work more than 16 hours per week	£4,293

Table 24.1 shows the latest version of the outcome metric structure for the Mental Health and Employment Partnership (MHEP) in Shropshire. During the life of this service, two main adjustments impacted this structure:

- To mitigate the impact of the COVID pandemic, MHEP Shropshire switched to a grant-based payment mechanism between April and September 2020. This means that the payments were based on the medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported achievements during this period to the DCMS Data Portal.
- Between October 2020 and December 2021, the LCF agreed to pay a different price for the engagement metric. During this period, the LCF and the local commissioner paid £2,030 for engagement and completion of a vocational profile. MHEP Shropshire went back to the originally agreed price for engagement in January 2022.

Outcome achievements and results

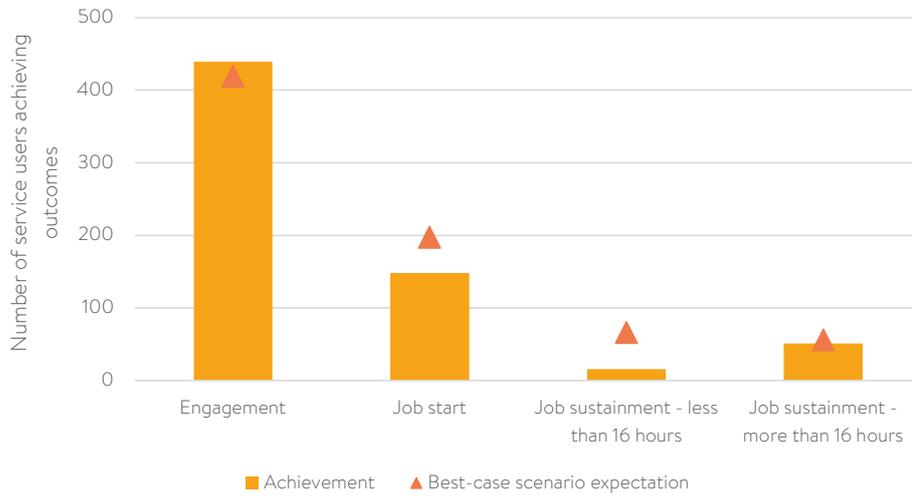


Figure 24.1 Outcomes achieved by MHEP Shropshire (2020-2023)

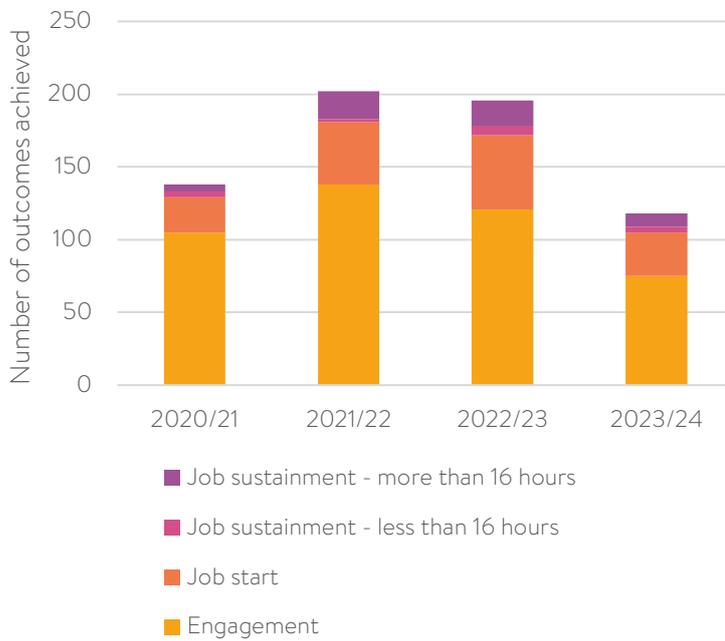


Figure 24.2 Number of outcomes achieved by MHEP Shropshire by fiscal year 2020/21 - 2023/24

496 individuals were referred to the MHEP Shropshire service. Of those 496 individuals, 439 completed their appointments with the employment co-ordinator and their vocational plan. As shown in Figure 24.1, MHEP Shropshire claimed for the engagement payments for 439 individuals. Of those 439, 148 people (34% of the engaged cohort) went into a new job and 67 people (15% of the engaged cohort) sustained a job for more or less than 16 hours a week. MHEP Shropshire exceeded their targets for engagement and job sustainment for more than 16 hours a week. In addition, the project was very close to achieving the best-case scenario expectations for job start and job sustainment for less than 16 hours a week. Figure 24.2 shows the distribution of MHEP Shropshire outcomes across fiscal years.

Overall, the project had positive results but faced similar challenges as the other MHEP contracts in the LCF, such as the COVID pandemic. The long-term impact of the pandemic on the ways of working of Employment Specialists and the labour market as a whole had an effect on the capacity of the project to achieve job start and job sustainment outcomes in the subsequent years. Social distancing guidelines made it significantly more difficult for the provider to be physically present and maintain good working relationships with clinical teams. The move to remote working made it more convenient for users to engage, but some Employment Specialists noted that it was more difficult to foster a trusting and productive relationship with service users.

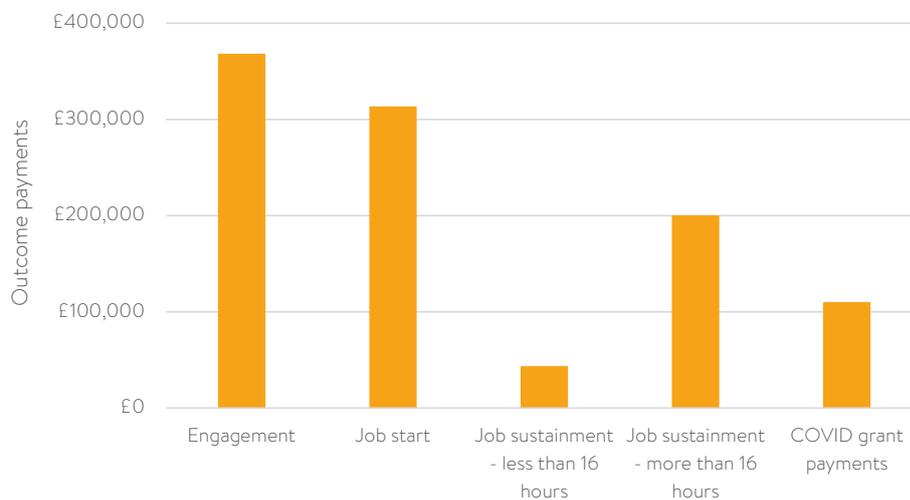
As mentioned before for other MHEP contracts, the MHEP management team had challenges with staff churn and it was a lengthy process to incorporate new Employment Specialists into the team.

The team at Shropshire struggled to evidence some of the job sustainment outcomes throughout the lifetime of the project, as there was some confusion around the level of evidence required to demonstrate this outcome. The MHEP management team helped identify this issue, clarified the evidence requirements among Employment Specialists and expanded this practice across the wider services.

It is worth noting that the achievement of 34% of engaged users going into employment is considered a successful result based on the IPS methodology¹⁴⁴.

Outcome payments and project’s cost

Figure 24.3 Outcome payments paid to MHEP Shropshire



144 Whitworth, A. & Cullen, A. M. (2023). Evaluation of the WDP IPS Into Work service. Scottish Centre for Employment Research, Department for Work, Employment and Organisation, Strathclyde Business School, University of Strathclyde. Access it [here](#). (p.6).

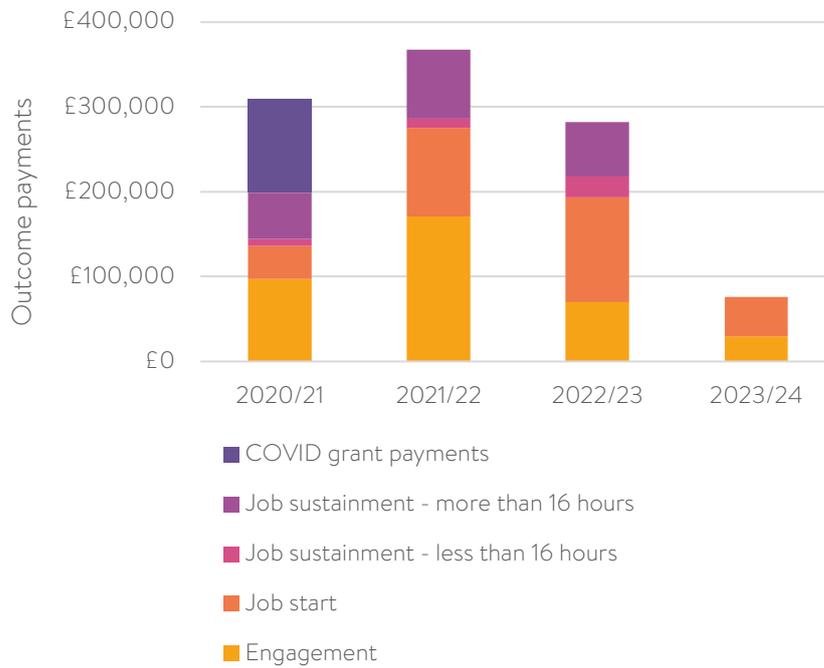


Figure 24.4 Outcome payments paid to MHEP Shropshire by fiscal year (2020/21 -2023/24)

Figure 24.3 shows that MHEP Shropshire received £367,942 for engagement and completion of the vocational profile, £313,137 for job start outcomes, £43,179 for job sustainment – less than 16 hours a week and £200,305 for job sustainment- more than 16 hours a week. In total, MHEP Shropshire received £924,563 in outcome payments and £109,924 in COVID grant payments. The total amount of payments for the project was £1,034,487.

Figure 24.4 shows the distribution of outcome payments across fiscal years, with 2021/22 being the year with the highest number of payments.

	Planned	Actual
Total investment commitment	£204,000	£204,000
Maximum outcome payments	£1,034,487	£1,034,487

Table 24.2 Planned and actual investment and maximum potential outcome payment

[Please check the Glossary section to find definitions for these terms]

Table 24.2 indicates that Big Issue Invest, the social investor for MHEP Shropshire, invested the same amount of funding as originally planned (£204,000). The project reached the maximum potential outcome payment (£1,034,487).

Table 24.3 Project's total cost and cost distribution

	Planned	Actual
Investment cost	£102,000 (10%)	£60,995 (6%)
Management cost	£99,803 (10%)	£131,842 (12.9%)
Evaluation and learning cost	£21,600 (2%)	£15,984 (1.6%)
Delivery cost	£810,000 (78%)	£810,000 (79.5%)
Total cost	£1,033,403 (100%)	£1,018,821 (100%)

[Please check the Glossary section to find definitions for these terms]

Table 24.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. MHEP Shropshire's actual total cost does not differ significantly from the planned total cost. There was a decrease in the cost of investment. The project reported that the cost of investment was lower due to the early repayment of loans, which lowered some interest for the programme. As reported for other MHEP projects, there was an increase in management cost, given that reporting, modelling and performance support demands were higher than anticipated at baseline.

TWENTY-FIVE

MENTAL HEALTH AND EMPLOYMENT PARTNERSHIP – TOWER HAMLETS – LEARNING DISABILITIES¹⁴⁵



Project delivery dates:

July 2020 -
September 2023



Location:

London Borough
of Tower Hamlets



Planned size of cohort:

441 service users

Actual size of cohort:

75 service users



Planned investment commitment:

£328,000

Actual investment committed:

£328,000



Summary:

Delivering services using Individual Placement and Support (IPS) principles to clients with learning disabilities in Tower Hamlets.



Involved organisations:

- Commissioners: Tower Hamlets Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Big Issue Invest
- Service providers: The Tower Project, Job Enterprise and Training Service (JET)



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£1,307,059

Total outcome payments (under the LCF) (from the LCF and commissioners):

£1,243,387 [LCF: £522,220 (42%)]



Primary outcome:

Job starts.

- Planned achievement: 182 job starts
- Actual achievement: 135 job starts

¹⁴⁵ For more information on the Mental Health and Employment Partnership delivery see the Mental Health and Employment Partnership Evaluation for the Life Chances Fund reports [here](#).

OUTCOME METRICS

Table 25.1 Outcome metrics for MHEP Tower Hamlets – Learning Disabilities

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: engagement	PT1: completion of three appointments with the employment co-ordinator or when the vocational profile is completed	1st 60% of cohort paid £2,164 and 2nd 40% of cohort paid £712
Metric 2: job start (Primary outcome)	PT2: individual spends at least one full day (or 4 hours for part time work) in paid competitive employment	1st 60% of cohort paid £4,569 and 2nd 40% of cohort paid £1,522
Metric 3: job sustainment (less than 16 hours a week)	PT3: individual sustains paid employment for at least 13 weeks where they work less than 16 hours per week	1st 60% of cohort paid £9,665 and 2nd 40% of cohort paid £3,219
Metric 4: job sustainment (more than 16 hours a week)	PT4: individual sustains paid competitive employment for at least 13 weeks where they work more than 16 hours per week	1st 60% of cohort paid £10,862 and 2nd 40% of cohort paid £3,621

Table 25.1 shows the latest version of the outcome metric structure for the Mental Health and Employment Partnership in Tower Hamlets – Learning Disabilities (MHEP TH LD). During the life of this service, two main adjustments impacted this structure:

- To mitigate the impact of the COVID pandemic, MHEP TH LD switched to a grant-based payment mechanism between July and December 2020. This meant that payments were based on a medium-case scenario forecast for the project, not the outcomes that were achieved. The project still reported outcome achievements during this period to the DCMS Data Portal.
- Between January and June 2021, the LCF agreed to pay a different price for the outcomes. During this period, the LCF and the local commissioner paid £4,569 for engagement and completion of a vocational profile, £5,712 for job start outcomes, £9,655 for job sustainment – less than 16 hours a week and £10,862 for job sustainment – more than 16 hours a week. MHEP TH LD went back to the originally agreed prices in July 2021.

Outcome achievements and results



Figure 25.1 Outcomes achieved by MHEP Tower Hamlets – Learning Disabilities (2020-2023)

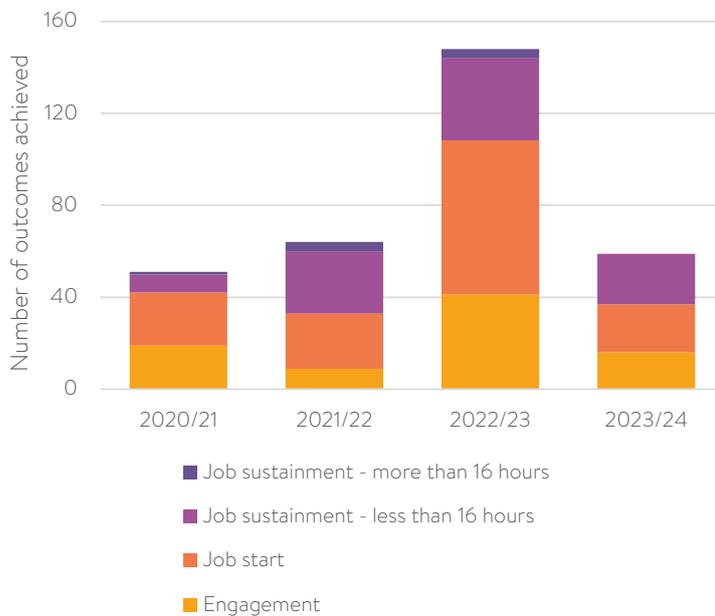


Figure 25.2 Outcomes achieved by MHEP Tower Hamlets – Learning Disabilities across fiscal years (2020/21 – 2023/24)¹⁴⁶

¹⁴⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year.

The key aim of this particular SOP under the MHEP management team was to test and facilitate the expansion of supported employment to new cohorts (eg. those experiencing learning disabilities) and facilitate learning and insight into how outcomes-based commissioning can improve the impact of employment support programmes.

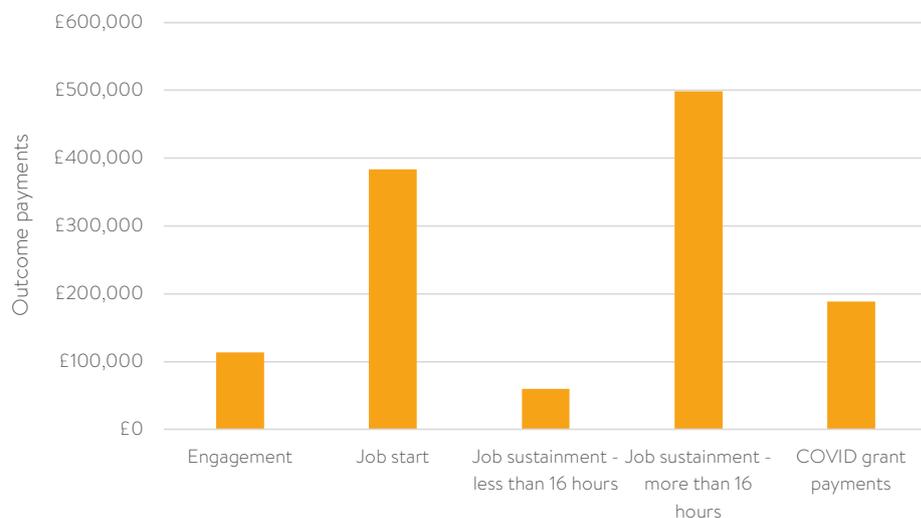
As shown in Figure 25.1, MHEP TH LD engaged with 75 individuals with learning disabilities. The project did not meet the best-case scenario target for the engagement metric, but the provider reported identifying significant differences between the learning disabilities cohort and other IPS client groups, particularly in terms of referrals and engagement objectives. Unlike other MHEP projects in which engagement outcomes were the most common, MHEP TH LD recorded most outcomes in relation to job starts. 135 individuals in the programme went into employment and 102 people sustained their jobs. The number of individuals achieving employment and sustaining employment is higher than the number of individuals engaging with the programme. This is because the service provider (JET) already had service users who had been referred and who engaged with the support programme before the MHEP contract started.

Overall, the project did not meet the best-case scenario targets, except in the area of sustainment, where job sustainment for 13 weeks (less than 16 hours a week) achieved more than double the expected outcomes. The project found that the learning disabilities cohort tends to require more support than other severe mental illness groups. MHEP TH LD offered that extra support to this cohort, which proved important for achieving good job sustainment rates. In addition, the project found that working with a learning disabilities cohort also requires the support service to engage more with the employers, as it takes time to build a trusting relationship with potential employers who will be offering positions to this cohort.

Figure 25.2 shows the distribution of MHEP TW MH outcomes across fiscal years, with 2022/23 being the year with the highest achievements.

Outcome payments and project’s cost

Figure 25.3 Outcome payments paid to MHEP Tower Hamlets – Learning Disabilities



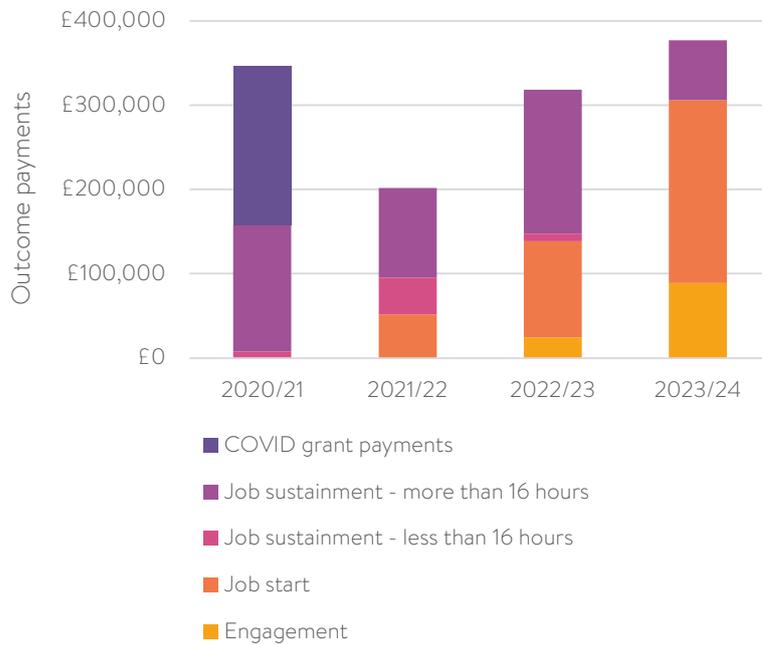


Figure 25.4 Outcome payments paid to MHEP Tower Hamlets – Learning Disabilities by fiscal year (2020/21 – 2023/24)

Figure 25.3 shows that MHEP TH LD received £113,380 for engagement and completion of vocational profile, £383,156 for job starts, £60,096 for job sustainment – less than 16 hours a week, and £498,375 for job sustainment – more than 16 hours a week. In total, MHEP TH LD received £1,055,007 for outcome payments and £188,380 through COVID grant payments.

Figure 25.4 presents the distribution of payments for MHEP TH LD across fiscal years. In total, MHEP TW LD received £346,389 in fiscal year 2020 (including COVID grant payments), £201,452 in 2021, £318,493 in 2022 and £377,053 in 2023.

	Planned	Actual
Total investment commitment	£328,000	£328,000
Maximum outcome payments	£1,307,059	£1,243,387

Table 25.2 Planned and actual investment and maximum potential outcome payment

Table 25.2 indicates that Big Issue Invest, the social investor for MHEP TH LD, invested less funding than originally planned. The project explained that this is due to differences between initial modelling and final project investment needs.

The project did not hit the maximum potential outcome payment, achieving payments from the LCF and local commissioner of £1,243,387.

Table 25.3 Project's total cost and cost distribution

	Planned	Actual
Investment cost	£157,433 (12.3%)	£76,293 (6%)
Management cost	£124,009 (9.7%)	£168,557 (13.5%)
Evaluation and learning cost	£15,600 (1.2%)	£20,782 (1.7%)
Delivery cost	£985,523 (76.8%)	£985,523 (78.8%)
Total cost	£1,282,565 (100%)	£1,251,155 (100%)

Table 25.3 shows the planned and actual cost of the programme, and a disaggregation across cost types. MHEP TH LD's actual total cost does not differ significantly from the planned total cost. There was a decrease in the cost of investment. The project reported that the cost of investment was lower due to the early repayment of loans, which lowered some interest for the programme. As reported for other MHEP projects, there was a slight increase in management costs, given that reporting, modelling and performance support demands were higher than anticipated at baseline.

TWENTY-SIX

A NORFOLK SIB FOR CARERS



Project delivery dates:

September 2020
– August 2026



Location:

Norfolk



Planned size of cohort:

16,000 referrals with 8,419 individuals achieving at least one outcome¹⁴⁷

Actual size of cohort (to Sept 2024):

12,439 individuals achieving at least one outcome



Planned investment commitment:

£2,500,000

Actual investment committed:

£2,500,000



Summary:

The Norfolk Carers Partnership supports adult unpaid carers and transitioning carers (aged 16 to 24) to improve their wellbeing and enable them to sustain their caring role.



Involved organisations:

- Commissioners: Norfolk County Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Voluntary Norfolk, Norfolk and Suffolk Care Support, Carers Voice, and Caring Together



Maximum potential outcome payments under the LCF (from the LCF and commissioners):

£11,872,775

Total outcome payments under the LCF (from the LCF and commissioners):

£9,238,784 [LCF: £4,082,470 (44%)]



Primary outcome:

Sustainment of the caring role at 6 and 12 months since care support was agreed

- Planned achievement (2026): 1,797 and 1,284 outcomes at 6 months and 12 months respectively
- Planned achievement (up to Sep 2024): 1,564 and 1,102 outcomes at 6 and 12 months respectively
- Actual achievement (up to Sep 2024): 1,257 and 779 outcomes at 6 and 12 months respectively – according to the end of grant form

147 The original planned cohort reported in the DCMS Data Portal was 16,000 referrals. The project reported information on service users achieving at least one outcome.

OUTCOME METRICS

Table 26.1 Outcome metrics for A Norfolk SIB for Carers

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: sustainment of the caring role. Primary Outcome	PT1: sustainment of caring role (6 months)	£1,200
	PT2: sustainment of caring role (12 months)	£1,200
Metric 2: increased number of carers known and understood by Norfolk	PT3: increased number of carers known and understood by Norfolk	£100
	PT4: increased number of carers known and understood by Norfolk and triaged	£300
	PT5: increased number of carers known and understood by Norfolk – wellbeing assessments and action plan completed	£1,200
Metric 3: wellbeing improvement	PT6: wellbeing improvement (6 months)	£1,200
	PT7: wellbeing improvement (12 months)	£1,200

Table 26.1 shows the latest outcome metric structure for A Norfolk SIB For Carers. Originally, the project was designed to work with lower-needs and higher-needs cohorts. The lower-needs cohort was comprised of carers with specific queries and in need of guidance to navigate the system but were identified as being able to continue in the caring role. The higher-needs cohort included all carers already in a critical situation with risk of not being able to continue with their caring role.

The outcome metrics and payment triggers for both cohorts were the same as Table 26.1, but there was a specific payment trigger for the lower-needs cohort, which would pay a smaller price than the payment trigger for the higher-needs cohort. In January 2022, building on the experience of the first year of delivery, the delivery partnership decided to simplify the metric structure and created a new set of payment triggers that would apply for all cohorts and that would best facilitate personalised delivery.

Outcome achievements and results

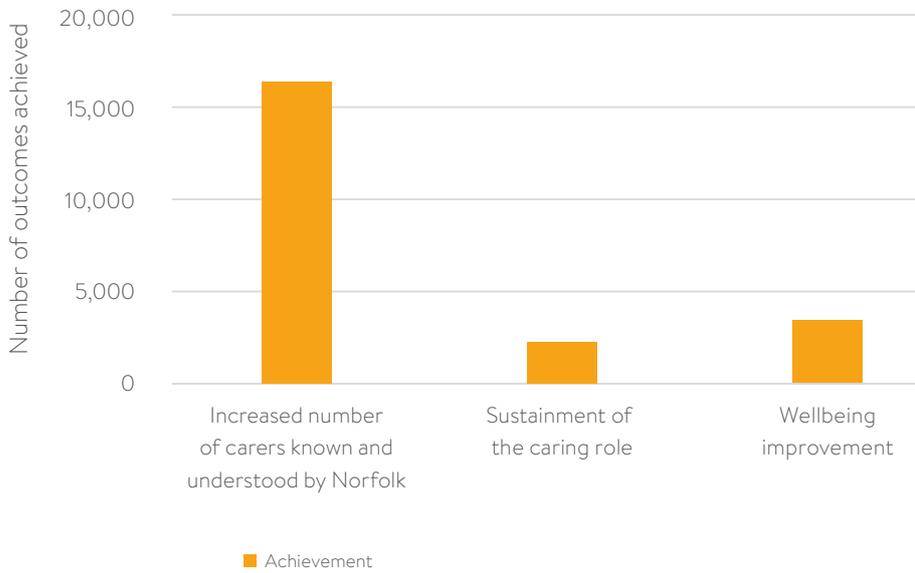


Figure 26.1 Outcomes achieved by A Norfolk SIB for Carers between September 2020 and September 2024



Figure 26.2 Outcomes achieved by A Norfolk SIB for Carers across fiscal years 2020/21 to 2024/25¹⁴⁸

148 Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 26.1 shows outcome achievements for A Norfolk SIB for Carers¹⁴⁹. The project received payments for 16,491 outcomes linked to carers being known and understood by Norfolk County Council, for 2,198 outcomes linked to sustainment of the caring role, and for 3,418 outcomes for wellbeing improvement. As the DCMS Data Portal only reported data at the outcome metric level and not at the individual, we include here comments shared by the projects (as per end of grant form included in Appendix 1, as of September 2024):

- the service helped identify 11,849 new carers to Norfolk County Council
- of that group of carers, 6,034 (51%) required support from the service and, therefore, completed an action plan
- 4,180 (69%) required light touch support, which was provided by the advice line. The remaining 1,859 (31%) completed a carers assessment and received dedicated support from community service
- of those that completed a carers assessment: 1,008 carers had completed their action plan and improved their wellbeing; 629 had done their one-year carers assessment review and improved their wellbeing. 1,257 were still in their caring role after 6 months; and 779 were still in their caring role after 12 months

Figure 26.2 shows the distribution of outcome achievements across fiscal years, with 2023/24 being the year with the highest achievements. The years 2020/21 and 2024/25 do not include full year data. The project claims to have developed a number of delivery innovations to have enabled better coordinated support to individuals, by bringing together their information, advice and prevention offer alongside the carers assessment offer. The project clarified they deliver carers breaks and a Health and Wellbeing Fund for carers to help with streamlining the journey through services for carers, who no longer need to go to Carers Matter Norfolk and Norfolk County Council for support and assessment. Alongside this they claimed to have improved that pathway further by introducing a self-assessment Tool, which Carers could complete at their own pace and in their own time, which replaced a lengthy assessment process. The project claims to have improved partnership working, particularly between the delivery partners working on the project and between the project and Norfolk County Council. With clearer roles defined between the delivery partners, they report to have been able to better work together to support carers.

Being the first outcomes contract focused on unpaid carers, the delivery partnership collaborated with experts and practitioners to design the outcome metrics. Metric 1 was the primary outcome and was designed to reward carers sustaining their roles. Metric 2 was included to increase the Council's knowledge about carers in the area, as previous research has shown that local councils often do not have proper records of unpaid carers. For instance, in Norfolk, over 100,000 people are estimated to be carers, but the council initially knew of only around 3,000. Metric 3 was designed to support carer's wellbeing and prevent breakdowns in their roles. Wellbeing is measured with a co-designed tool called 'You Matter', which replaced the previous 'Carers Star Tool'. 'You Matter' better reflected the needs and priorities of carers.

¹⁴⁹ The DCMS Data Portal could not capture the unique number of people triggering the different payment triggers, hence outcome achievements are presented at the outcome metric level (not payment trigger level). The breakdown of individuals achieving the payment triggers was provided by the project and is included in Appendix 1.

Most of the difficulties reported by this project are associated with the issues around following up with carers once an action plan is in place or keeping track of their wellbeing journey to measure their improvements six or twelve months later. The project managed to overcome these challenges and as of September 2024, had exceeded their targets for metric 2 and 3.

Outcome payments and project’s costs

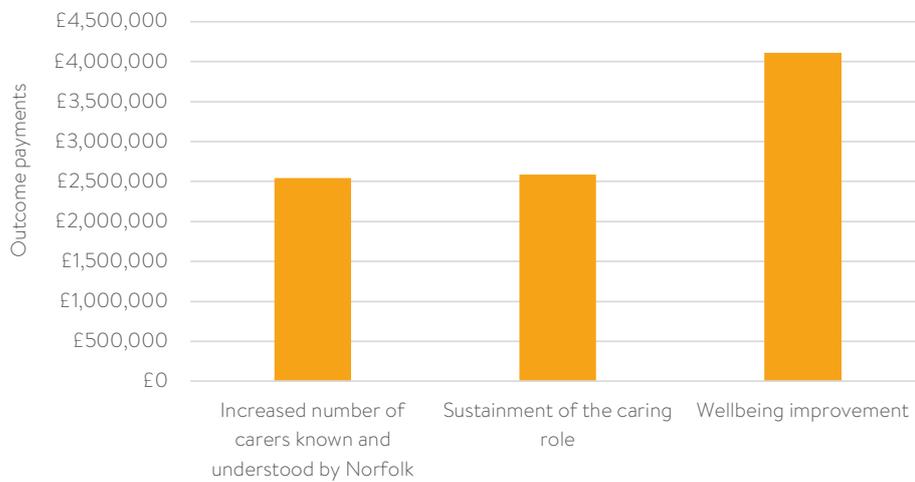


Figure 26.3 Outcome payments paid to A Norfolk SIB For Carers between September 2020 and September 2024

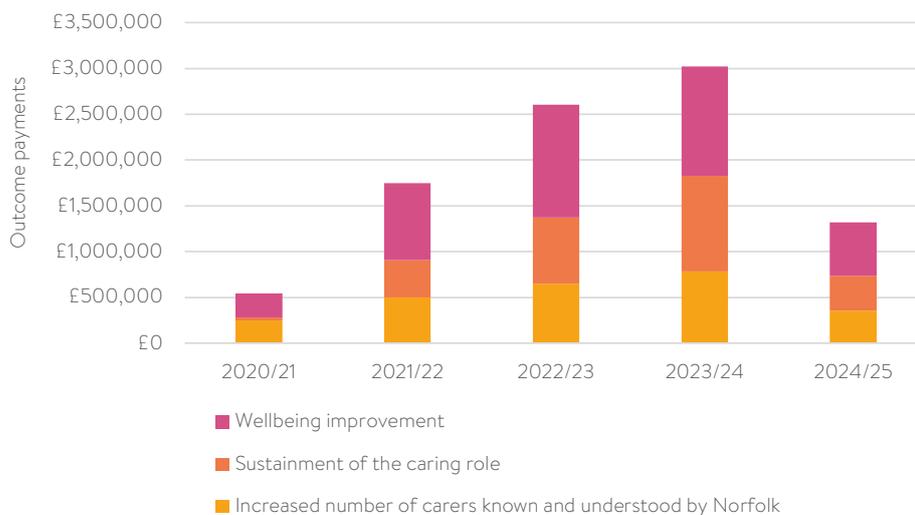


Figure 26.4 Outcome payments paid to A Norfolk SIB For Carers across fiscal years 2020/21 – 2024/25¹⁵⁰

¹⁵⁰ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 26.3 shows outcome payments for A Norfolk SIB For Carers. The project received £2,541,800 for the increased number of carers known and understood by Norfolk, £2,587,743 for carers sustaining their caring role and £4,109,241 for wellbeing improvements. In total, A Norfolk SIB For Carers received £9,238,784 in outcome payments as of September 2024.

Figure 26.4 shows the distribution of outcome payments across fiscal years, with 2023/24 being the year with the highest value of outcome payments. The years 2020/21 and 2024/25 don't include full year data.

Table 26.2 Planned and actual investment and maximum potential outcome payment

	Planned to the end of the programme (Aug 2026)	Planned (up to Sep 2024)	Actual
Total investment commitment	£2,500,000	£2,500,000	£2,500,000
Maximum outcome payments	£11,872,775	£10,935,786	£9,238,784

A Norfolk SIB For Carers will finish service delivery in August 2026. In addition, the delivery partnership is looking into the possibility of extending the service. In end of project reporting, the project reported having received as much initial investment as originally planned. As of September 2024, the project had received £9,238,784 in outcome payments from the LCF and Norfolk County Council. We note that this project was subject to contract caps and could not claim payments over and above the cap.

Table 26.3 Project's cost distribution

	Planned to the end of the programme (Aug 2026)	Planned (up to Sep 2024)	Actual
Investment cost	£500,000 (5%)	£0 (0%)	£0 (0%)
Management cost	£229,600 (2%)	£265,798 (4%)	£265,798 (4%)
Evaluation and learning cost	£170,000 (1%)	£170,000 (2%)	£170,000 (2%)
Delivery cost	£10,973,175 (92%)	£6,531,982 (94%)	£6,531,982 (94%)
Total cost	£11,872,775 (100%)	£6,967,780 (100%)	£6,967,780 (100%)

Table 26.3 shows the cost distribution for A Norfolk SIB For Carers. The project shared the original project expectations for August 2026 with the DCMS Data Portal. In end of project reporting, the project also shared their interim plans for September 2024 and actual costs. As of September 2024, the project reported investment cost of £0 given that they accessed pro-bono legal support and support in setting up the delivery partnership. Management costs increased by £36,000 (approximately) due to higher investment into IT systems than expected (when compared to the baseline).

All other actual costs are according to the project's plans for September 2024. In total, the project expects to have £4.5 million of delivery costs in the last 2 years of delivery.

TWENTY-SEVEN

PROVISION OF A SOCIAL PRESCRIBING FRAMEWORK AND OFFER AT SCALE ACROSS NORTHAMPTONSHIRE¹⁵¹

**Project delivery dates:**

July 2021 –
May 2027

**Location:**

Northamptonshire

**Planned size of cohort:**

5,832 service users

Planned size of cohort (up to Sep 2024):

2,652 service users

Actual size of cohort (as of Sep 2024):

2,652 service users

**Summary:**

Social prescribing focuses on prevention of ill health and the promotion of positive health and wellbeing through community-based services. This programme works to create sustained lifestyle changes and improved self-care for people living with long-term health conditions in Northamptonshire. The service specifically targets people with long-term health conditions and one or more of the following characteristics: high co-morbidity levels; low levels of emotional and mental well-being; high levels of social isolation; frequent attender at GP or hospital; or are a caregiver.

**Involved organisations:**

- Commissioners: West Northamptonshire Council and North Northamptonshire Council, Integrated Care Northamptonshire and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Northamptonshire Carers, Mayday Trust (to April 2023), Age UK, and General Practice Alliance

**Maximum potential outcome payments under the LCF (from the LCF and commissioners):**

£8,455,774

Expected outcome payments by September 2024 (from the LCF and commissioners):

£2,989,123

Total outcome payments under the LCF received by September 2024 (from the LCF and commissioners):

£2,991,017 [LCF: £1,465,600 (49%)]

¹⁵¹ We will also refer to this project as 'Social Prescribing in Northamptonshire'



**Planned investment
commitment:**

£1,350,000

**Planned investment
committed (up to
Sep 2024):**

£1,480,000

**Actual investment
committed (as of
Sep 2024):**

£1,480,000



Primary outcome:

Wellbeing improvement, measured by changes in the Well-being Star and Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) measurement tools

- Planned achievement: 3,696 service users to show improvements after 6 months and 3,328 service users to show improvements after 12 months.
- Planned achievement (up to Sep 2024): 1,084 service users to show improvements after 6 months and 546 service users to show improvements after 12 months.
- Actual achievement (as of Sep 2024): 1,084 service users showed improvements after 6 months and 546 service users showed improvements after 12 months.

OUTCOME METRICS

Table 27.1 Outcome metrics for Social Prescribing in Northamptonshire

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: engagement on programme	PT1: initial assessment taken place with action plan completed.	£500
	PT2: person is identified as complex patient.	£40
Metric 2: improvement in wellbeing (Primary outcome)	PT3: Well-being Star – improvement after 6-month assessment.	£600
	PT4: Well-being Star – improvement after 12-month assessment.	£850 for cohort 1 and £600 for cohort 2+
Metric 3: improvement in mental health	PT5: Warwick-Edinburgh Mental Wellbeing Scale – improvement after 6-month assessment.	£400
	PT6: Warwick-Edinburgh Mental Wellbeing Scale – improvement after 12-month assessment.	£650 for cohort 1 and £400 for cohort 2+
Metric 4: improvement in physical health	PT7: reduction in GP consultations.	£500 for cohort 2+

Table 27.1 shows the latest outcome metric structure for Social Prescribing in Northamptonshire. This metric and payment trigger structure has not changed at any point in the life of the project.

Outcome achievements and results

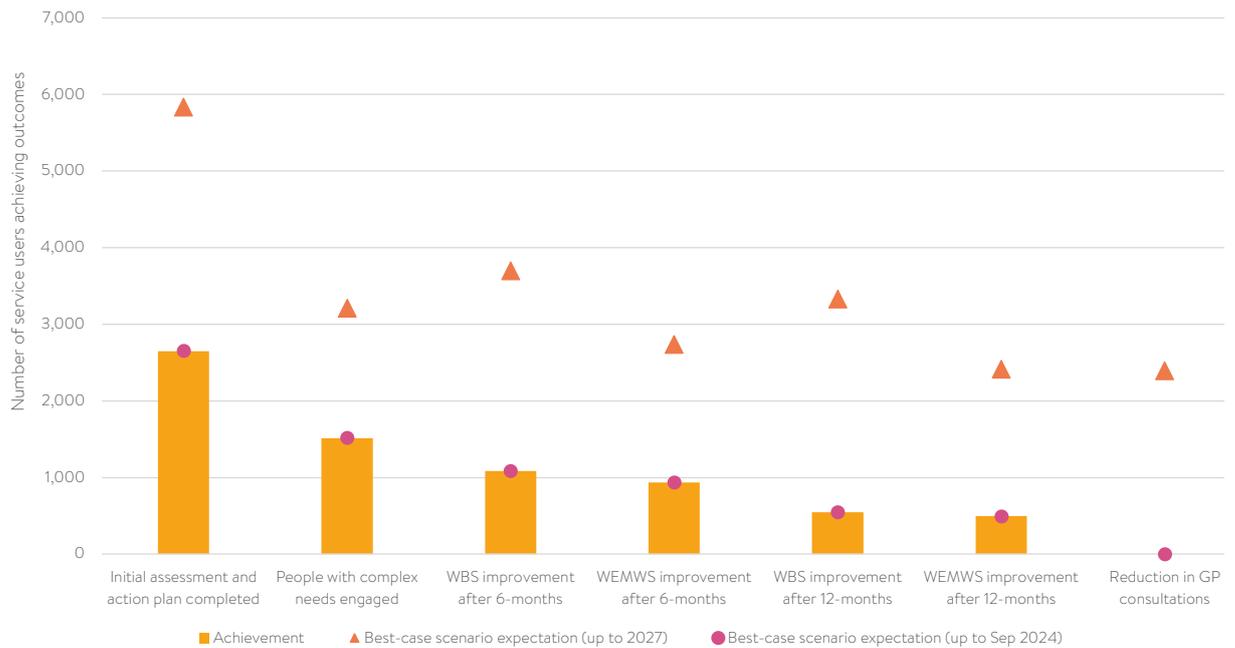


Figure 27.1 shows outcome achievements for Social Prescribing in Northamptonshire between 2021 and 2024. Orange triangles represent the project’s best-case scenario targets for the entire life of the service (up to 2027). Pink circles represent the interim targets for the project up to September 2024. Social Prescribing in Northamptonshire is an ongoing project. All data shown in Figures 27.1 to 27.4 should be understood as interim data up to September 2024.

Figure 27.1 Outcomes achieved by Social Prescribing in Northamptonshire between 2021 and 2024

Social Prescribing in Northamptonshire has worked with a cohort of 2,652 individuals. Service users have achieved 2,648 initial assessments and action plans completed (almost 100% of the cohort), 1,512 patients have been identified as complex and therefore triggered PT2 (57% of the cohort), 1,084 service users have improved their well-being after 6 months measured by the Well-being Star survey, 937 users have improved their wellbeing after 6 months using the Warwick-Edinburgh Mental Wellbeing Scale, 546 users have improved their well-being after 12 months measured by Well-being Star survey and 496 users have improved their wellbeing after 12 months using the Warwick-Edinburgh Mental Wellbeing Scale. There are no achievements recorded for PT7, as the project was unable to access data form GP practices to evidence the achievement of the outcome ‘reduction in GP consultations’ before September 2024.

Figure 27.2 Outcomes achieved by Social Prescribing In Northamptonshire across fiscal years 2021/22 – 2024/25¹⁵²

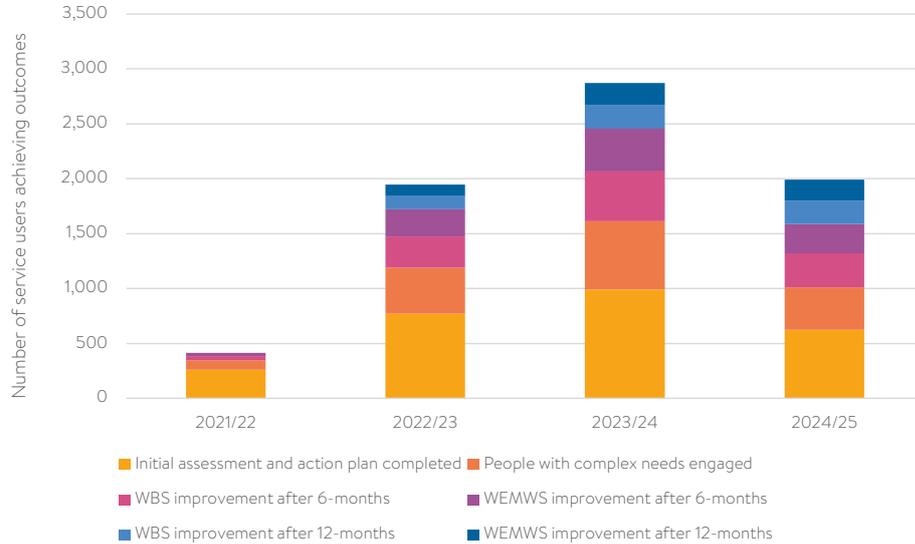
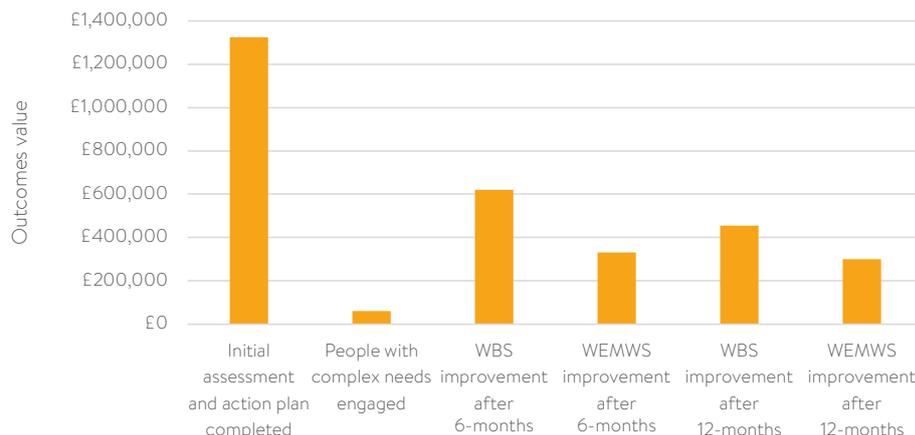


Figure 27.2 shows the distribution of outcome achievements across fiscal years, with 2023/24 being the year with the highest achievements.

In the end of grant reporting, the project explained that they went through significant delivery and operational challenges in the early years of delivery, given that they launched during the COVID pandemic. In addition to the pandemic disruptions and subsequent restructuring across health and social care, the project faced challenges with fragmentation among delivery partners, which produced inconsistent case management practices. The project implemented a new case management system, which took some time for delivery partners to adopt. Since April 2024, a series of measures have generated an improvement in the performance of the project. These included resetting relationships with delivery partners to establish a consistent approach to the programme and a shared vision, introducing a new performance management tool, introducing monthly manager’s meetings to discuss performance and exchange good practices, enhancing data collection methods and reporting processes to monitor the service user’s journeys and prevent potential problems.

Outcome payments and project’s cost

Figure 27.3 Outcomes value for Social Prescribing In Northamptonshire between 2021 and 2024



¹⁵² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

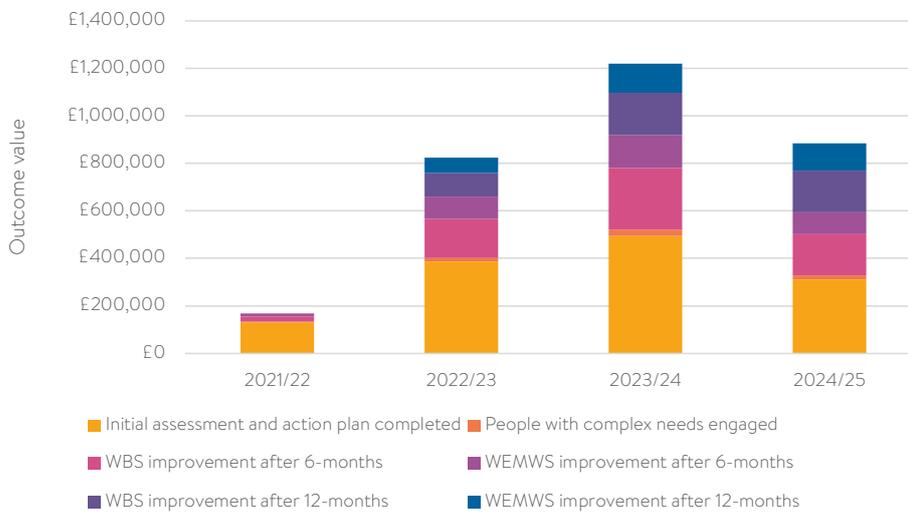


Figure 27.4 Outcomes value for Social Prescribing In Northamptonshire across fiscal years 2021/22 – 2024/25¹⁵³

Figure 27.3 shows the value of the outcomes achieved by Social Prescribing In Northamptonshire between 2021 and 2024. The initial assessments and action plans completed were worth £1,324,000; the additional metric for patients with higher levels of complexity was worth £60,520; improvements in Well-being Star survey after 6 months was worth £621,300; Warwick-Edinburgh Mental Wellbeing Scale improvements after 6 months was worth £332,400; improvements in Well-being Star survey after 12 months was worth £454,750; and Warwick-Edinburgh Mental Wellbeing Scale improvements after 12 months was worth £300,625.

In total, the project should have received £3,093,595 for outcome achievements. However, the payments were capped at different points due to contract caps with the LCF and local commissioners. The project received £2,991,017 in outcome payments as of September 2024.

Figure 27.4 presents the distribution of the value of outcomes across fiscal years, with 2023/24 being the year with the highest outcomes value. However, two quarterly payment claims in 2023/24 were capped by commissioners, so outcome payments for that fiscal year were lower than the outcomes value.

	Planned	Planned (up to Sep 2024)	Actual (as of Sep 2024)
Total investment commitment	£1,350,000	£1,480,000	£1,480,000
Maximum outcome payments	£8,455,774	£2,989,123	£2,991,017

Table 27.2 Planned and actual investment and maximum potential outcome payment

¹⁵³ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 27.2 indicates that the project has accessed more initial capital than originally planned. The project has claimed 35% of their maximum potential outcome payments (under the LCF), but this is an ongoing project delivering services until 2027. In the end of grant reporting, the project explained that they are on track to meet their original targets which should enable (if outcomes are achieved) the repayment of their social investment funding.

Table 27.3 Project's cost distribution

	Planned	Planned (up to Sep 2024)	Actual
Investment cost	£572,658 (7%)	£62,004 (1.6%)	£62,004 (1.6%)
Management cost	£279,020 (4%)	£12,767 (0.3%)	£12,767 (0.3%)
Evaluation and learning cost	£0 (0%)	£5,600 (0.1%)	£5,600 (0.1%)
Delivery cost	£7,089,021 (89%)	£3,919,447 (98%)	£3,919,447 (98%)
Total cost	£7,940,699 (100%)	£3,999,818 (100%)	£3,999,818 (100%)

Table 27.3 presents the total cost and cost distribution for Social Prescribing In Northamptonshire. The 'planned' column shows values that the project reported at the beginning of their contract with the LCF for the entire project (up to 2027). The column 'Planned (up to Sep 2024)' shows the project's cost expectation for September 2024. These values are self-reported in the end of grant forms. The third column, 'actual', shows actual costs incurred as of September 2024.

The project reported lower investment costs as they are still delivering services and have accessed pro-bono support for legal advice and SPV set up. Management costs were also lower than predicted, given that the project reallocated some of that funding to the support of delivery innovations. Evaluation and learning costs at baseline were £0 because the initial expectation was that the evaluation would be paid for with a separate budget. The delivery cost was less than expected at baseline given that the project is ongoing, but it is in line with the expectations for this project for September 2024. As of September 2024, total project cost was £3,999,818.

LCF EVALUATION REPORT

CROSS-CUTTING THEMES PROJECTS

Project name	Service Delivery Start Date	Location	Data source	Project continues after Sep 2024
Kirklees Better Outcomes Partnership (KBOP)	January 2019	Kirklees	Outcomes: self-reported by project Outcome payments: DCMS Data Portal	
Single Homelessness Prevention Service (SHPS)	July 2019	London Boroughs (Brent, Ealing, Enfield, Hackney, Islington, and Waltham Forest) and Norfolk.	DCMS Data Portal	✓

TWENTY-EIGHT

KIRKLEES BETTER OUTCOMES
PARTNERSHIP (KBOP)^{154,155}**Project delivery dates:**September 2019
– September 2024**Location:**

Kirklees

**Planned size of cohort:**

6,300 service users

Actual size of cohort:

6,151 service users

**Planned investment commitment:**

£4,535,645

Actual investment committed:

£4,847,427

**Summary:**

The project addressed issues including drug and alcohol dependency, older age, homelessness and disability, and other factors that can contribute towards a person's ability to successfully live independently. The service targeted people over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.

**Involved organisations:**

- Commissioners: Kirklees Metropolitan Borough Council and the Department for Culture, Media and Sport (DCMS)
- Investors/Fund Managers: Bridges Fund Management
- Service providers: Fusion Housing, Pennine Domestic Abuse Partnership, Connect Housing, Home Group Ltd, Community Links, Foundation UK, Making Space, and Horton Housing Association
- Intermediaries: Bridges Fund Management

**Maximum potential outcome payments under the LCF (from the LCF and commissioners):**

£22,297,917

Total outcome payments under the LCF (from the LCF and commissioners):

£22,553,796 [LCF: £6,600,000 (29%)]

**Primary outcome:**

Entry into, completion and sustainment of employment, education, training and/or volunteering.

- Planned achievement: 1,386 service users expected to achieve at least one of the outcomes under employment, education, training and/or volunteering
- Actual achievement: 1,817 service users achieved at least one of the outcomes under employment, education, training and/or volunteering¹⁵⁶

¹⁵⁴ In the DCMS Data Portal, this project is known as 'Kirklees Integrated Support Services'.

¹⁵⁵ More information on the KBOP SOP can be found in the final evaluation report [here](#).

¹⁵⁶ Source of data: KBOP end of grant form.

OUTCOME METRICS

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: assessment, stability and wellbeing	PT1: 1st wellbeing assessment	£300
	PT2: 2nd wellbeing assessment	£150
	PT3: 3rd wellbeing assessment	£150
	PT4: 1st wellbeing improvement	£400
	PT5: 2nd wellbeing improvement	£400
	PT6: mental health – accessing service	£500
	PT7: mental health – sustained engagement	£800
	PT8: substance misuse - accessing service	£500
	PT9: substance misuse - sustained engagement	£800
	PT10: access to legal protection	£500
	PT11: achieving financial resilience	£500
	PT12: empowering and promoting independence	£500
	PT13: reduction in risk of domestic abuse	£500
	PT14: compliance with or completion of statutory order	£500

Table 28.1 Outcome metrics for KBOP

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 2: entering and sustaining suitable accommodation	PT15: prevention or relief/entry into a suitable accommodation	£500
	PT16: 3 months sustainment of accommodation	£600
	PT17: 6 months sustainment of accommodation	£1,000
	PT18: 12 months sustainment of accommodation	£1,000
	PT19: 18 months sustainment of accommodation	£1,000
Metric 3: entry into, completion and sustainment of employment, education, training and/or volunteering. Primary Outcome.	PT20: entry into education	£500
	PT21: 1st part qualification	£1,500
	PT22: 2nd part qualification	£1,500
	PT23: 1st full qualification	£2,200
	PT24: 2nd full qualification	£2,200
	PT25: entry into employment	£500
	PT26: 2nd entry into employment (temporary COVID additional outcome)	£500
	PT27: 6.5 weeks sustainment of employment	£1,500
	PT28: 13 weeks sustainment of employment	£2,200
	PT29: 26 weeks sustainment of employment	£2,200
	PT30: entry into volunteering	£500
	PT31: 6 weeks sustainment of volunteering	£600
	PT32: entry into work experience	£500
PT33: 6 weeks sustainment of work experience	£600	

Table 28.1 shows the latest outcome metric structure for KBOP¹⁵⁷. The project started with a different outcome metric structure, which was developed prior to the project's launch in 2019 and used until September 2020. The initial structure built on the experience of previous housing-related SOPs, such as projects supported by the Fair Chance Fund¹⁵⁸. The metric structure described in Table 28.1 came into effect in October 2020. The project directors made an effort to make the development process as inclusive as possible, hosting 'change panels' with providers and frontline staff to ensure that all key partners could express their views on the previous metric structure.

The final rate card is similar to the original one. The headline outcome metrics did not change, but the evidence requirements, particular metrics and some prices changed. For instance, '1st wellbeing assessment' was paid at £150, and with the new metric structure was paid at £300. The outcome '20 weeks sustainment of volunteering' was not included in the new metric structure. In addition, evidence requirements were softened, allowing for self-certification. As explained in Rosenbach et al. 2023, some previous evidence requirements created a significant administrative burden for frontline staff, and some of the requirements were intrusive to service users' privacy.

Given the length and complexity of the KBOP outcome metric structure, the project does not report achievements against every payment trigger to the DCMS Data Portal. To facilitate reporting requirements between the Kirklees Metropolitan Borough Council (lead applicant of the LCF funding) and The National Lottery Fund, the KBOP project shared the number of service users achieving at least one outcome against the headline metrics. As one service user could achieve multiple outcomes in the same quarter, the DCMS Data Portal does not have the number of outcomes achieved by this project. In order to describe their performance with granular details, KBOP has kindly shared data on achievements at the payment trigger level. This granular data is not part of the DCMS Data Portal and has been self-reported by the project.

157 A more detailed definition and a description of the evidence requirements for each payment trigger can be found in the [Appendix of the second interim report on the Kirklees Better Outcomes Partnership](#) (page 112).

158 More information on the Fair Chances Fund and supported SOPs can be found in the [INDIGO Outcomes Fund Directory](#).

Outcome achievements and results

To facilitate interpretation, KBOP outcomes will be presented in three different figures according to the headline outcome metric.

Figure 28.1 Well-being outcomes achieved by KBOP between 2019 and 2024

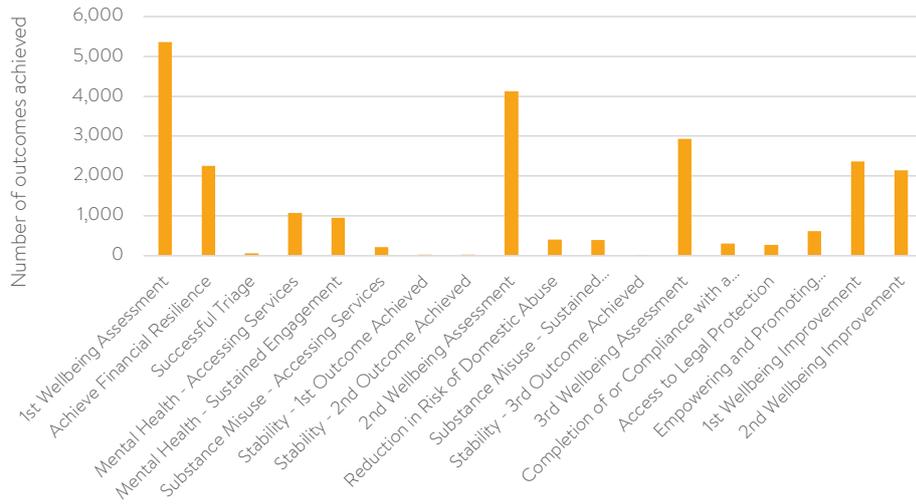


Figure 28.2 Accommodation outcomes achieved by KBOP between 2019 and 2024



Figure 28.3 Education, employment, training and volunteering outcomes achieved by KBOP between 2019 and 2024

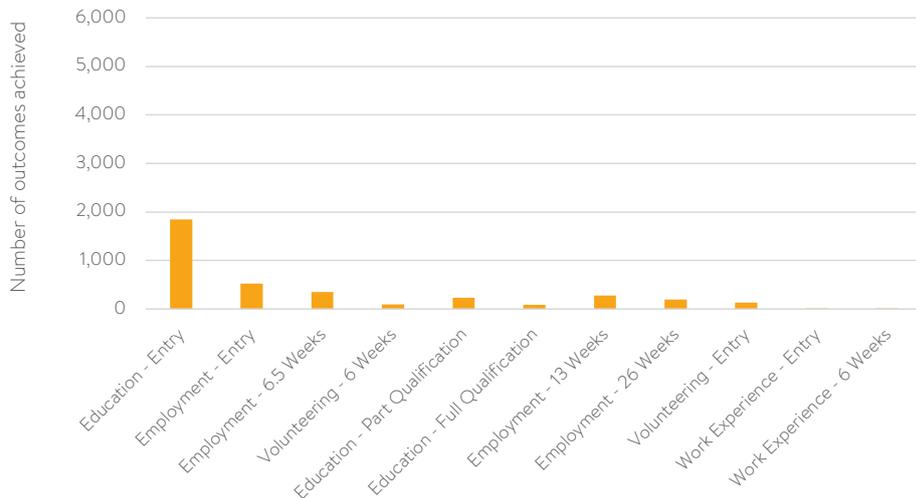




Figure 28.4 Well-being outcomes achieved by KBOP across fiscal years 2019/20 – 2024/25¹⁵⁹



Figure 28.5 Accommodation outcomes achieved by KBOP across fiscal years 2019/20 – 2024/25¹⁶⁰

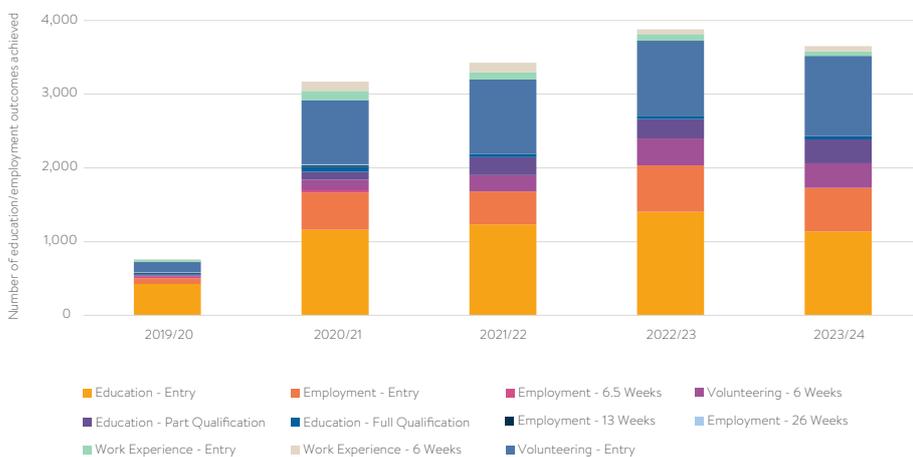


Figure 28.6 Education, employment, training and volunteering outcomes achieved by KBOP across fiscal years 2019/20 – 2024/25¹⁶¹

159 – 157 Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figures 28.1 to 28.3 show outcome achievements for KBOP between 2019 and 2024. KBOP service users achieved 23,537 wellbeing and stability outcomes, 3,731 accommodation outcomes and 12,304 employment, education, training and volunteering outcomes. In total, the project achieved 39,572 outcomes.

Service users can achieve several outcomes at the same time, so these figures do not show number of people achieving outcomes, but number of outcomes achieved within the project. Figures 28.1 to 28.3 do not show any best-case scenario targets. This is because the original targets reported in the DCMS Data Portal were set at the headline metric level (ie. 1,173 service users expected to achieve an employment/ education outcome at least once), not at the payment trigger level. The project reported a different set of figures based on unique number of people achieving outcomes in the end of project report. These figures can be found in Appendix.

Figure 28.1 shows wellbeing and stability outcomes. The five payment triggers that were triggered the most were: 1st well-being assessment (5,358 times), 2nd well-being assessment (4,122 times), 3rd well-being assessment (2,931 times), 1st well-being improvement (2,364 times) and 2nd well-being improvement (2,147 times). KBOP provides personalised support to a cohort with different needs and levels of complexity. Therefore, the outcome metric structure does not mean that there is a fixed 'journey' and that every participant should achieve outcomes around well-being, accommodation and employment. Individuals achieve different outcomes according to their needs and the guidance of the support worker.

Figure 28.2 shows accommodation outcomes. 2,175 people have entered into accommodation or were prevented from being without suitable accommodation. 3,546 people have sustained accommodation for 3 months, 3,032 for 6 months, 2,112 for 12 months and 1,439 for 18 months. More people have achieved 'sustained accommodation' than the recorded number of people who entered accommodation or who were prevented from becoming homeless. This is because the service already existed in Kirklees prior to the SOP and some people had already achieved this first accommodation outcome before the LCF contract. This chapter does not cover achievements before or after the LCF period.

Figure 28.3 shows employment, education, training and volunteering outcomes. The five payment triggers that have been triggered the most were: entry into education (1,843 times), entry into employment (520 times), 6.5 weeks sustaining employment (346 times), 13 weeks sustaining employment (277 times) and achievement of a partial qualification (232 times).

Figures 28.4, 28.5 and 28.6 show the distribution of outcomes across fiscal years 2019/20 to 2023/24.

Outcome payments and project's cost

Figures 28.7 and 28.8 use data from the DCMS Data Portal, which recorded outcome payments against the headline metrics, not the payment triggers.

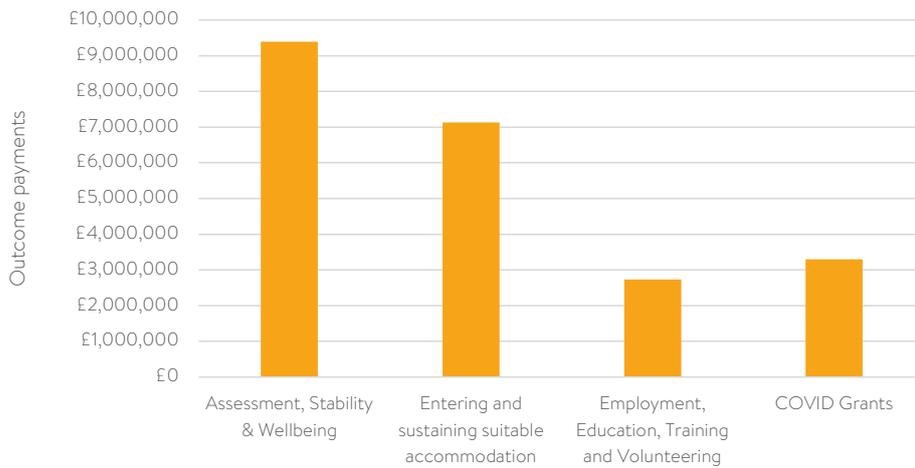


Figure 28.7 Outcome payments for KBOP between 2019 and 2024

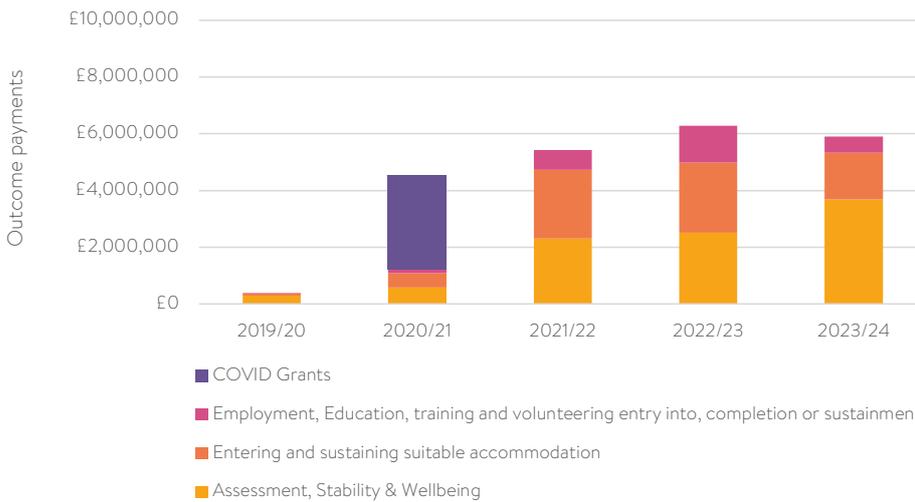


Figure 28.8 Outcome payments for KBOP across fiscal years 2019/20 – 2024/25¹⁶²

¹⁶² Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Figure 28.7 presents outcome payments for KBOP. The project received £9,392,343 for wellbeing and stability outcomes, £7,129,359 for accommodation outcomes, and £2,729,636 for employment and education outcomes. Between April and December 2020, KBOP switched to a grant-based payments mechanism due to the COVID pandemic. During those three quarters, KBOP received £3,302,458 in COVID grant payments. As of September 2024, the project had received payments totalling £22,553,796.

In March 2024, KBOP reached their cap and drew down as much funding as possible from the LCF. After March 2024, KBOP continued achieving outcomes, but no payment was made to the project from the LCF.

Figure 28.8 shows the distribution of outcome payments across fiscal years, with 2022/23 being the year with the highest number of payments.

Table 28.2 Planned and actual investment and maximum potential outcome payment

	Planned	Actual (as of Sep 2024)
Total investment commitment	£4,535,645	£4,847,427
Maximum outcome payments	£22,297,917	£22,553,796

[Please check the Glossary section to find definitions for these terms]

Table 28.2 indicates that the project has accessed more initial capital than originally planned. This can be explained by the fact that the KBOP project was originally designed to deliver services until March 2024, with an outcome tracking window until September 2024. Later, KBOP got an extension from Kirklees Council to deliver services until September 2024. The maximum potential outcome payments on the DCMS Data Portal might have been outdated (according to the March 2024 deadline, not the September 2024 deadline), which explains why the project claimed for more outcomes funding that initially expected.

	Planned	Actual
Investment cost	£202,160 (1%)	£234,372 (1.06%)
Management cost	£100,196 (1%)	£120,431 (0.54%)
Evaluation and learning cost	£0 (0%)	£26,491 (0.1%)
Delivery cost	£18,942,914 (98%)	£21,742,961 (98.3%)
Total cost	£19,245,270 (100%)	£22,124,255 (100%)

Table 28.3 Project's cost distribution

[Please check the Glossary section to find definitions for these terms]

Table 28.3 presents the total cost and cost distribution for KBOP. In end of project reporting, KBOP explained that the baseline figures (under 'planned' column) were initially reported with a March 2024 deadline for the project. KBOP was then extended up to September 2024. All cost values are higher, but this does not necessarily mean that the project costed more than expected. It means that the baseline figures were not up to date in the DCMS Data Portal, and it is not possible to compare plans against actual values.

TWENTY-NINE

SINGLE HOMELESSNESS
PREVENTION SERVICE (SHPS)**Project delivery dates:**July 2019 –
June 2028**Location:**London Boroughs
(Brent, Ealing,
Enfield, Hackney,
Islington, and
Waltham Forest)
and Norfolk.**Planned size of
cohort (2028):**

18,518 individuals

**Planned size of cohort
(September 2024):**

11,497 individuals

**Actual size of cohort
(September 2024):**

12,117 individuals

**Summary:**

This service supports single people who are homeless or at risk of homelessness, offering compassionate, tailored help to secure safe accommodation and sustain tenancies: whether new or existing. At its heart is a dedicated support worker model, building trusted relationships that provide both practical assistance and emotional support.

**Involved organisations:**

- Commissioners: Enfield Council, London Borough of Islington, Waltham Forest Council, Norfolk County Council, London Borough of Ealing, Hackney Council, Brent Council and the Department for Culture, Media and Sport (DCMS)
- Investors/fund managers: Bridges Fund Management
- Service providers: Single Homeless Project, Hestia, Crisis, The Riverside Group, Great Yarmouth District Council, Evolve, and The Benjamin Foundation
- Intermediaries: Bridges Fund Management and Numbers for Good

**Maximum potential outcome payments by 2028
under the LCF (from the LCF and commissioners):**£17,113,000¹⁶³**Expected outcome payments by September 2024
under the LCF (from the LCF and commissioners):**

£12,961,302

**Total outcome payments received by September 2024
under the LCF (from the LCF and commissioners):**£11,919,546¹⁶⁴ [Life Chances Fund: £4,200,996 (35%)]

¹⁶³ Delivery was extended by local commissioners across 3 London boroughs and Norfolk, and expanded into refugee support services. In the end of grant form the project indicated and expected maximum payment of £21,371,227 (see Appendix 1).

¹⁶⁴ The end of grant form reports a higher figure of £13,790,270.



**Planned investment
commitment (2028):**

£2,521,000

**Planned investment
commitment
(September 2024)**

£2,087,921

**Actual investment
committed
(September 2024):**

£2,087,921



Primary outcome:

Successful completion of a Personal Housing Plan (PHP)

- Planned achievement (2028): 18,518 individuals to complete a PHP
- Planned achievement (September 2024): 11,497 individuals to complete a PHP
- Actual achievement (as of September 2024): 10,353¹⁶⁵ individuals completed a PHP

165 In the end of grant form the project reports 12,117 individuals completing a Personal Housing Plan as of September 2024.

OUTCOME METRICS

Table 29.1 Outcome metrics for SHPS

Outcome metric	Payment trigger	Price per payment trigger (per individual)
Metric 1: initial appointment and Personal Housing Plan completed. Primary Outcome.	PT1: completion of Personal Housing Plan	£331 (average of different prices across commissioners)
Metric 2: Personal Housing Plan completed leading to prevention or relief of homelessness and confirmed suitable accommodation	PT2: successful prevention of homelessness	£839 (average of different prices across commissioners)
	PT3: successful relief of homelessness	£939 (average of different prices across commissioners)
Metric 3: accommodation sustained for eight months from the successful achievement of prevention or relief	PT4: 8-month sustainment of accommodation (with no identified risk of homelessness)	£821 (average of different prices across commissioners)

Table 29.1 shows the latest outcome metric structure for SHPS. The list of outcomes has not changed during service delivery. The variations for this project are related to the inclusion of new commissioners, or commissioners withdrawing from the contract.

The original contract started with two commissioners: London Borough of Islington and London Borough of Ealing. The original LCF award was £1,150,000. In March 2020, Enfield Council, Hackney Council, Brent Council and London Borough of Lambeth joined the partnership. The LCF award was increased to £3,573,000. In June 2020, Waltham Forest Council joined the contract, and the LCF award was further increased to £3,991,000. In November 2020, Norfolk Council joined the partnership as part of a further allocation process and the LCF was increased to £4,201,000.

Table 29.1 does not show the exact price per outcome that each commissioner was paying. This is because commissioners were paying different prices for the same achievements. To facilitate the reporting on the DCMS Data Portal, DCMS asked the project team to record an average of the price that commissioners agreed to pay.

In 2023, the LCF agreed to a variation in the original contract with the project to support a small pilot in Enfield Council. This pilot extended the service to individuals living in temporary accommodation, alongside the original agreed cohort (homeless individuals, or individuals at risk of homelessness).

To aid reading across the performance data, the following figures on outcome achievements and payments will be based on data at the outcome metric level, not payment triggers.

Outcome achievements and results

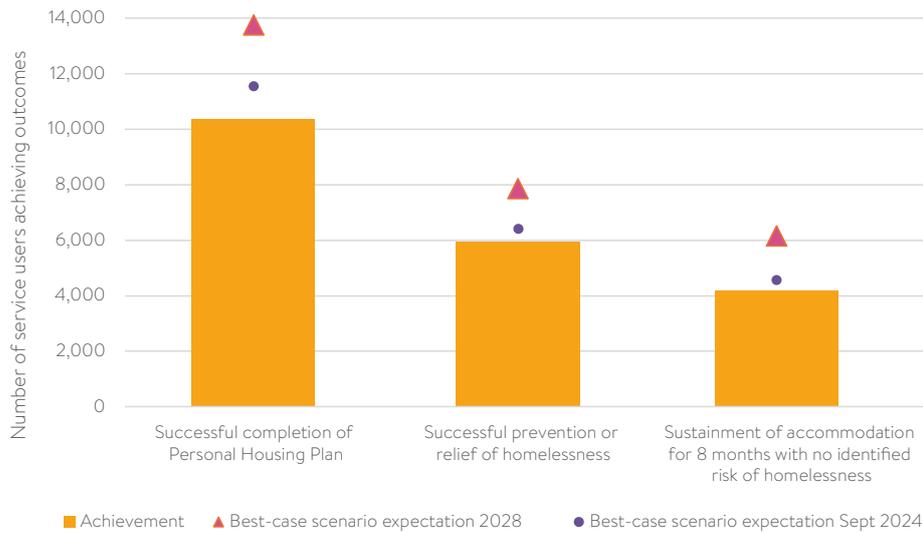


Figure 29.1 Outcomes achieved by SHPS between 2019 and 2024

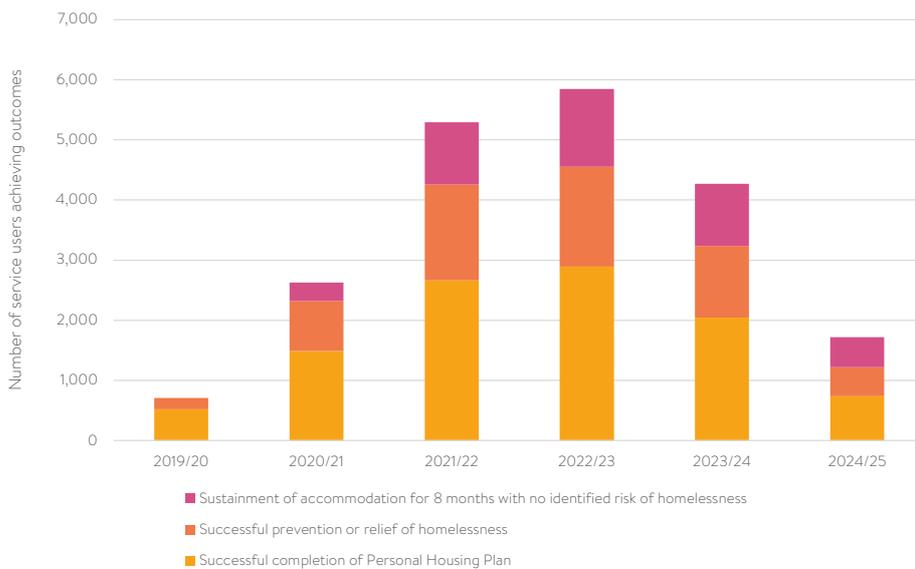


Figure 29.2 Outcomes achieved by SHPS across fiscal years 2019/20 to 2024/25¹⁶⁶

Figure 29.1 shows outcome achievements for SHPS. The pink triangles represent the best-case scenario targets for the entire project up to 2028. The purple circles represent the interim targets for the project up to September 2024. The interim targets were self-reported by the projects in the end of grant form.

¹⁶⁶ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

As of September 2024, SHPS worked with a cohort of 12,117 individuals. Of that cohort, the DCMS Data portal reports verified outcomes for 10,353 individuals who have completed a Personal Housing Plan, 85% of the cohort. Almost 50% of the cohort has already achieved prevention or relief from homelessness (5,939 individuals), and 35% of the cohort already sustained their accommodation for 8 months with no identified risk of homelessness (4,176 individuals). Due to contract caps, some of the outcomes achieved might not have been fully reported and verified through the DCMS Data Portal. In the end of project reporting, the project indicated to have worked with as many as 13,050 individuals, of whom 12,117 completed a Personal Housing Plan (93%). The project further reported that more than half the cohort achieved a prevention or relief outcome (6,777 individuals) and 35% sustained their accommodation for 8 months with no identified risk of homelessness (4,578 individuals). More data is provided in Appendix 1. SHPS will continue delivering services until 2028. All this data should be understood as interim data on achievements during the period in which the LCF funded this project (2019-2024).

Figure 29.2 presents the distribution of outcomes across fiscal years, with fiscal year 2022/23 being the year with the highest number of achievements (up to September 2024).

In end of project reporting, SHPS detailed the opportunities and barriers of working with these 3 metrics. Achievements related to completing a Personal Housing Plan were affected by a decline in referrals, coupled with the unsuitability of some referrals which did not meet the initial criteria. The project sought to address this issue by creating a new position to liaise between the service and local authorities. The new position oversees the triage of referrals to ensure that the caseworkers could work with the right cohort.

The project managers had to actively engage with private landlords to understand their priorities and needs when renting accommodation to this cohort. By effectively managing the relationship with landlords, SHPS was able to place individuals in accommodation. SHPS also provided training on housing rights and eviction notices to improve achievements around the prevention of homelessness.

The project initially struggled to keep contact with individuals in order to track the sustainment metric (metric 3), which was solved by refining the project's approach during the completion of the Personal Housing Plan. SHPS used that stage of the service to explain their expectations to service users and emphasise the complete journey upfront, with a focus on the 8-month sustainment.

Figures 29.1 and 29.2 also include outcomes achieved in the Enfield Council pilot which started in 2023. In the end of project reporting, SHPS explained that outcomes for the pilot were lower than expected due to the misalignment between service users' expectations and the accommodation accessible in the private sector. This was a valuable learning and has been fed into additional pilots aiming to reduce the use of temporary accommodation.

Outcome payments and project's costs

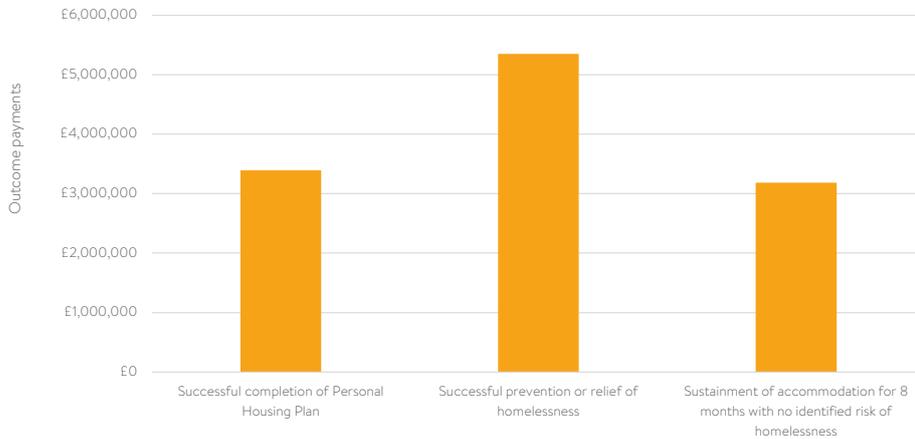


Figure 29.3 Outcome payments paid to SHPS between 2019 and 2024

Figure 29.3 shows outcome payments for SHPS up to September 2024. In total, based on payments recorded and verified on the DCMS Data Portal, SHPS received £3,388,240 for successful completion of a Personal Housing Plan, £5,349,781 for successful prevention or relief of homelessness, and £3,181,525 for sustainment of accommodation for 8 months. The project received a total of £11,919,546 in outcome payments¹⁶⁷.

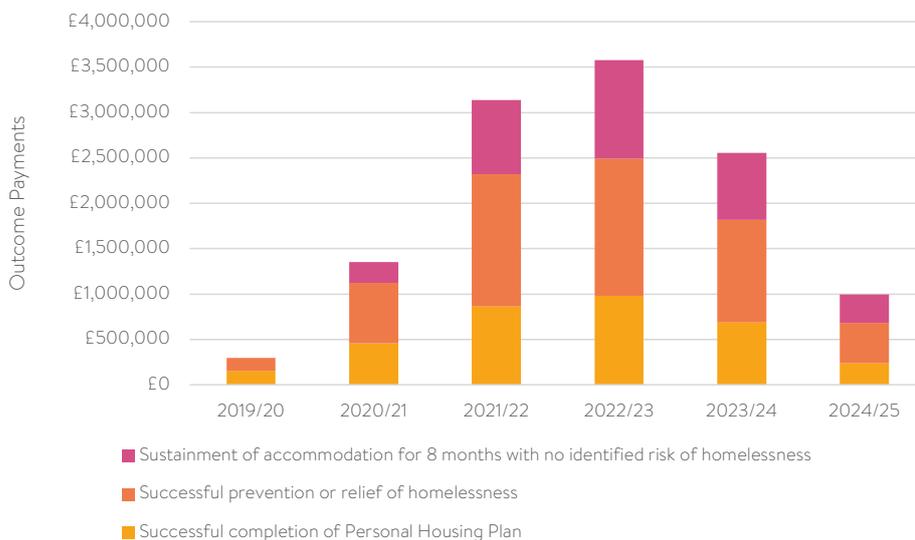


Figure 29.4 Outcome payments paid to SHPS across fiscal years 2019/20 – 2024/25¹⁶⁸

Figure 29.4 presents the distribution of outcome payments across fiscal years, with 2022/23 being the fiscal year with the highest outcome payments.

The project reported that contract caps were met in Islington, Ealing and Norfolk. Across these contracts, SHPS continued delivering the service and achieving outcomes, but no further payment was made by either the commissioners or the LCF for the remainder of the contract.

¹⁶⁷ The end of grant form reports higher figures for a total outcome payment of £13,790,270. See Appendix 1.

¹⁶⁸ Please note that projects may have started delivery partway through the initial year (check start delivery dates) and may have completed before the end of the last fiscal year. We remind that our data cutoff was September 2024.

Table 29.2 Planned and actual investment and maximum potential outcome payment

	Planned (2028)	Planned (Sept 2024)	Actual
Total investment commitment	£2,521,000	£2,087,921	£2,087,921
Maximum outcome payments	£17,113,000	£12,961,302	£11,919,546 ¹⁶⁹

Table 29.2 shows that the investors have committed as much funding as originally planned for September 2024. Following the success of the completed projects the SHPS service has been extended until at least 2028 as commissioners in Brent, Ealing and Hackney have recommissioned the service, fully funding the outcomes. If outcomes are achieved, full repayments to investors would take place at the project's completion.

Table 29.3 Project's cost distribution

	Planned (2028)	Planned (Sept 2024)	Actual
Investment cost	£661,000 (3.8%)	£113,008 (1%)	£123,982 (1%)
Management cost	£776,000 (5%)	£78,195 (0.7%)	£65,232 (0.5%)
Evaluation and learning cost	£30,000 (0.2%)	£30,000 (0.3%)	£30,548 (0.2%)
Delivery cost	£15,550,000 (91%)	£11,188,079 (98%)	£12,719,360 (98.3%)
Total cost	£17,017,000 (100%)	£11,409,282 (100%)	£12,939,122 (100%)

Table 29.3 presents the cost distribution for SHPS. The final column shows actual costs (up to September 2024), and the previous columns indicate the initial expectations from SHPS (both for the entire project finishing in 2028 and the plans for September 2024). The total cost of the project as of September 2024 was £12,939,122.

¹⁶⁹ The end of grant form reports a higher figure of £13,790,270.

CONCLUSIONS AND FINAL REMARKS

The LCF projects and outcome achievements

The first question addressed by this report is: to what extent have the 29 social outcomes partnerships (SOP) supported by the LCF achieved their intended outcomes?

The LCF projects delivered different interventions for people with complex needs, which makes them very difficult to compare against each other. Each project had a unique list of outcome metrics which they pursued. Even when projects were labelled with the same policy theme, they were often pursuing substantially different outcome metrics and worked with very diverse cohorts. Due to these differences, this report calculated the achievement of the primary outcome for each project and compares that achievement against the best-case scenario target set by the project at the beginning of the contract, or their updated targets when amendments were formally agreed.

On average, the LCF projects have achieved 88% of their primary outcome, based on the granular end of grant data provided by projects. The primary outcome is not necessarily the most long-term outcome, or most difficult outcome to achieve. Primary outcomes have been chosen by each project, and they represent the outcome that projects found most relevant for their cohorts.

This report has shown that there is a wide variety of performances behind the average 88% primary outcome achievement. Due to the collaborative nature of these partnerships, projects were able to adapt their approaches and, in some cases, asked to review the initial baseline expectation. These were thoroughly discussed and, if agreed, replaced the initial baseline on the DCMS Data Portal. Some projects have overachieved their targets, with projects such as Kirklees Better Outcomes Partnership, Chances and Gloucestershire Positive Behaviour Support reaching or surpassing 100% of their baseline expectations. In contrast, other projects have achieved around 20% of planned primary outcomes, such as the Pyramid Project or Fostering Better Outcomes. Each project chapter offers a narrative where projects explained the reasons behind their performance. As the LCF projects work with very different interventions and cohorts, it is not possible to summarise the explanations for the 29 SOPs in a meaningful way. Instead, a high-level synthesis of the narratives and learnings from projects clustered under each policy theme can be enlightening.

On average, the children's services projects have achieved 62% of their primary outcomes. The projects that have struggled the most with achieving their original targets are those that involved outcomes around placing children in foster care placements. Most narratives around those projects explained the difficulties in finding appropriate foster placements for children with complex needs, especially during the COVID pandemic. The children's services projects that included different outcomes, focused on reunification with families and the prevention of breakdown, performed better.

The healthy lives projects achieved an average of 70% of their primary outcome targets. However, it is not possible to draw any meaningful conclusions about this group, as four projects under this theme are still delivering services. In addition, this theme includes the highest number of projects (9), all working with different programmes and target cohorts.

Young people and drug and alcohol addiction projects achieved an average of 97% and 86% of targeted primary outcomes, respectively. The groups of early years projects, other cross-cutting theme projects, and older people's services projects, each achieved more than 100% of expected primary outcomes. It is worth mentioning that the older people's services cluster includes only one project, the performance of which looks different depending on the source of information used¹⁷⁰. As these policy theme groups tend to cluster similar but not identical projects together, and our analysis is based on averages, these summary figures should be taken as indicative figures.

The LCF projects can also be divided between completed and ongoing projects. Completed projects finished service delivery and claimed for all outcome payments by September 2024. Ongoing projects continued with service delivery after September 2024, with exclusive funding from local commissioners. The DCMS Data Portal does not capture data on any outcomes or payments that occurred after September 2024, which means that all data for ongoing projects should be considered as interim data that might change or be updated in future evaluation reports. On average, completed projects have achieved 87% of their primary outcome target, while ongoing projects have achieved 89%. Ongoing projects were compared against their targets for the entire project (as reported in their end of grant forms), so this percentage will increase with each quarter that projects report outcome achievements to their local commissioners. The DCMS Data Portal will not capture those outcomes and payments, but projects might choose to report their achievements to the INDIGO Impact Bond Dataset and allow the community to keep track of performance across the entire life of the project.

¹⁷⁰ The performance of Enhanced Dementia Care Service differs according to the source of information used. The end of grant form reports that the project achieved twice the expected results (620 reductions in avoidable hospital admissions over a target of 300). The data on the DCMS Data Portal presents a slightly different picture, where the project achieves 180 reductions in avoidable hospital admissions over a target of 300. It might be possible that the project did not report all achievements to the DCMS Data Portal as some contractual caps were reached.

The LCF projects' outcome payments

The LCF paid £41,607,712¹⁷¹ in outcome payments. The LCF provided top-up contributions to SOPs that were jointly commissioned by central and local government(s). Initially, the top-up contribution was to comprise a maximum of 20% of the projects' payments, but the level of LCF contributions was then refined to reflect the balance in savings that were generated for the wider public sector.

According to the baseline forms, on average, the 29 projects expected a contribution of 33% of outcomes payments from the LCF (minimum contribution 9%, maximum contribution 45%). As of September 2024, according to end of grant forms, the 29 projects received a contribution of 35% of total outcomes payments from the Fund (minimum contribution 14%, maximum contribution 49%). In sum, the LCF top-up contribution was higher than initially expected by the Fund.

The second research question addressed by this report is: to what extent have the 29 social outcomes partnerships achieved the intended level of outcomes payments? On average, the LCF projects have claimed 84% of the outcomes funding that was available for them. Again, this percentage summarises very different payment performances. For instance, projects like ParentChild+ and Promoting Independence have claimed 100% of their maximum potential outcome payment, whereas the Pyramid Project has only claimed 10% of payments.

In line with levels of outcome achievements, the children's services projects achieved an average of 61% of maximum potential outcomes payments. The young people projects achieved an average of 86% of maximum potential outcomes payments. The healthy lives projects achieved an 85% of payments, but this last figure should be interpreted with caution, as four healthy lives projects continue delivering services. Other cross-cutting projects have achieved 85% of payments. All other policy themes have achieved more than 90% of payments.

As mentioned above, the LCF projects can be divided into completed and ongoing projects. Completed projects have achieved an average of 91% of maximum potential outcomes payments, while ongoing projects have achieved an average of 72%. Ongoing projects were compared against maximum potential outcomes payments for the entire project, so it is expected that

this percentage will increase in each new quarter that projects claim for outcomes payments from their local commissioners.

Limitations

The underlying data for this report has four main limitations.

1. Different levels of data quality in DCMS Data Portal and end of grant forms

As explained in previous chapters, this report builds on two different sources of data. The first is the DCMS Data Portal, which is the data of the highest quality. The DCMS Data Portal includes the baseline forms and the quarterly payment claims submitted by projects and checked by the TNLCF funding managers and local commissioners. The DCMS Data Portal provides data that has been quality assured by different service users, and is supported by different types of documentation, such as invoices, email correspondence with local commissioners, notes from funding managers, board packs from performance managers, reports from project's leads, etc.

The second source of data are end of grant forms. The data on the end of grant form is self-reported by projects. Although TNLCF managers verified the forms before storing them in their systems, not every single figure was reconciled and some final figures (especially the figures on outcome achievements) did not line up with the corresponding data from the Data Portal. TNLCF and GO Lab worked together to find an explanation to these discrepancies, which are mostly related to projects counting outcomes achieved after the LCF deadline, or projects counting outcomes that were paid for by other commissioners and not the LCF. However, some discrepancies could not be resolved. It is for this reason that we consider that data sourced from the DCMS Data Portal is of higher quality than the end of grant form.

2. Different deadlines for the LCF and local commissioners' payments

The LCF had a very clear deadline for outcomes payments. No outcome achieved or evidenced after September 2024 would be paid by the LCF. However, local commissioners did not adhere to this deadline and paid for outcomes that were achieved after September 2024. This means that projects' final

171 This figure includes an outcome payment made to the project Opening Doors - Bexley (£6,265) before withdrawing from the programme.

count of outcomes achieved and individuals supported by the project is often different from the final figures that we extracted from the DCMS Data Portal. As evaluators, we only have access to the DCMS Data Portal and cannot verify the individual data sharing journeys between projects and commissioners after September 2024.

One way of analysing these differences is by comparing the data presented in the individual project chapters (which in most cases was extracted from the DCMS Data Portal) with the self-reported data reported in the end of grant forms by projects, which is included in Appendix 1.

3. Completed and ongoing projects

As noted above, the fact that 11 projects are still delivering services means that all data for these projects should be understood as interim data that will change in the coming months or years. Therefore, this report does not offer a complete description of their performance, and in turn might not be able to offer a complete description of the performance of the LCF as a result.

4. Exclusive availability of best-case scenario targets or expectations

When the LCF started, projects were required to provide best-, medium- and low-case scenario targets for every outcome metric. Most of the LCF projects were affected by the COVID pandemic, which meant that they had to review their targets and rapidly adjust their performance plans. Some projects faced other challenges, such as receiving significantly less referrals than initially expected, school closures, drastic changes in the labour market, lack of foster care placements, etc. As some LCF projects adjusted their expectations, they were not consistent in reporting revised best-, medium- and low-case scenario targets, and just provided one target per metric based on best-case scenario expectations. For this reason, LCF projects' performance is judged against best-case scenario expectations. In the context of the COVID pandemic, it may have been fairer to judge projects against medium-case scenario targets, or other lower figures. Unfortunately, these targets were not available consistently for all projects in the DCMS Data Portal.

Best case scenario targets were updated by many projects over the lifetime of the project. This means they do not reflect the original "best case scenario" target of each project set at project launch. Therefore,

any comparison of actual user engagement, outcome achievement, and payments to best case scenario targets, is limited as targets changed over the course of the project. For instance, some projects updated their targets more than others, facilitating more realistic targets to be set as project delivery progressed. Whereas other projects did not do this. This means comparing actuals to targets should not be used as a measure of success of projects. There are a number of reasons projects may not have updated their targets, for example, time constraints related to monitoring and updating targets on the data portal, or projects may have chosen to set particularly high expectations in order to ensure enough resources were available for potential project successes. Resultingly, comparing performance against targets should not be used as relative, objective measures of impact, but instead they give an insight into how each project functioned.

Data lessons: what can we improve in future databases designed to support social outcomes partnerships?

After extracting, cleaning, and reviewing the data for this report, the evaluation team have three recommendations on how to improve future datasets or databases designed to support SOPs and their evaluations.

1. Improved measurement of outcome achievements

Project chapters consistently use outcomes payments data from the DCMS Data Portal for the 29 cases. However, they have not been able to rely on the outcome achievements data from the Data Portal. In some cases, the chapters build on outcome metrics data, losing the granularity offered by the payment trigger data. In exceptional cases, the chapters use self-reported data from the end of grant form, as the data on the Portal did not meet the necessary quality standards for the report. As designed for the LCF, the DCMS Data Portal was highly successful in collecting data on payments, but could be improved when it comes to collecting granular data on social outcomes achieved by projects.

How can outcomes data be better collected and stored? First, it is necessary that future databases collect data at both outcome metric and payment trigger level. LCF projects often have one key outcome metric (eg. young person's achievement in education), and this outcome metric can be associated to two or more payment triggers (eg. PT1: young

person enters in education, PT2: individual achieves NVQ level 1 or equivalent, and PT3: individual achieves full NVQ level 2 or equivalent or apprenticeship). It is essential that the database can track not just the number of 'education outcomes', but also how many of those outcomes are young people entering into education, young people achieving NVQ level 1, and young people achieving full level 2 NVQ.

In addition, it is key that the database can track not just the number of outcomes, but also the number of unique service users achieving outcomes. Going back to our previous example, it is helpful to know whether when these three education outcomes are achieved, they are achieved by the same service user entering into education and progressing in their journey, or by three different service users at different stages.

Finally, it is also essential that projects are incentivised to report outcome achievements below and above payment caps. Some projects did not report outcome achievements beyond their caps, and this caused a series of discrepancies between the end of grant forms and the Data Portal. Moreover, projects that have not reported the full list of achieved outcomes (above and beyond caps) do not have appropriate data to run a robust cost-benefit analysis (as we are not fully aware of the full benefit of the project).

2. Improved tracking of changes

SOPs are often characterised by a relational way of working. In practice, this means that they change and adapt over the course of the programme. This entails agreeing changes in metrics, targets, evidence requirements, payments, etc. In terms of the database, the initial plans of a project are usually stored in a baseline form. Relational projects have the capacity

to renegotiate that baseline form many times. In the future, databases will need to be better at keeping track of changes, so that evaluators can narrate the different changes that the partnership went through and evaluate which changes generated better results for the partnership, and which others did not serve the purpose of better social outcomes for a cohort with complex needs.

3. Better data definitions

Most of the data collection efforts were led by the projects themselves. Each time that they completed a baseline form, or submitted a quarterly payment claim, projects were populating the database that underpins this report. TNLCF shared instructions for projects before completing forms for the DCMS Data Portal. However, some projects were not consistent in using these data definitions across the life of the project. Reasons for the inconsistency can include key employees moving onto different roles and new employees making different assumptions, or the data definitions in initial instructions being broad and not providing accurate guidelines on how to calculate complex figures such as cost savings, investment returns or management costs. In the future, data definitions should be clear, exhaustive and should not leave any room for ambiguity. Data definitions should be agreed by the delivery partnership (central government, local commissioners and the organisation managing the fund) to make sure that the end result is a database that can answer the research questions which guide the learning and evaluation efforts.

This means that instructions should be carefully designed and tested by the fund, but also that projects will need to closely follow those instructions when completing the Data Portal.

APPENDIX 1

Outcomes achievements as self-reported by projects in their end of grant forms

The following appendix shows a copy of the outcome achievements reported by projects in their end of grant forms, detailed in terms of their payment triggers. It is possible to identify differences between projects' self-reported achievements and the achievements recorded in the DCMS Data Portal, which was the primary source of data for this evaluation report.

There are two main reasons behind these potential differences.

1. Although projects were advised to report all outcomes achieved, some of them stopped reporting outcomes achieved beyond their caps. This means that for some projects, the DCMS Data Portal has data on outcomes achieved and paid for, and not for outcomes achieved and not paid for.
2. The DCMS Data Portal had a non-negotiable deadline to record outcomes. The TNLCF team could only record and pay for outcomes that were achieved and evidenced by 30th September 2024. Outcomes achieved and evidenced later than September 2024 were not recorded. Outcomes that were achieved, but not evidenced by September 2024, were not recorded either. Many projects had delays due to the COVID pandemic or other unforeseen circumstances, which meant that the latest outcomes planned for September 2024 were reached later than expected. Those projects have reported their achievements in the end of grant form, but not officially in the DCMS Data Portal.

3. Children's services projects

3.1 Fostering Better Outcomes

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Child is not in residential care. Paid monthly after 1 month at £5262 per month for up to 2 years with 30 service users expected to hit this trigger	30	9	-21
Child is not in residential care after 12 months: £32,000 paid after 12 months with 24 services users expected to hit this trigger	24	5	-19
Child is not in residential care after 24 months: £30,000 paid after 24 months with 22 service users expected to hit this trigger	22	3	-19

3.2 Stronger Families – Suffolk

Final baseline payment triggers	Final baseline	Target to 30.9.24	Actual achieved	Difference between target and actual
Feb 20 - Children on the edge of care sustainably avoid the need for care. Of £18,336, £3,736 payment at 14 weeks after referral (payment at the end of the intervention). Then paid quarterly at a rate of £20 each day for up to 2 years	153	150	150	0
Feb 20 - Children are sustainably reunified with their family/wider network. Of £25,638, £5,198 for payment at 14 weeks after referral (payment at the end of the intervention). Then paid quarterly at a rate £28 for each day the child out of care for 2yrs	62	11	11	0
Further Allocation - Children on the edge of care sustainably avoid the need for care. Up to £18,213: £3,642.60 for intervention completion and £26 for each day the child remains out of care for one and a half years.	98	132	126	-6
Further Allocation - Children are sustainably reunified with their family/wider network. Up to £25,341.25: £5,068.25 for intervention completion and £36.40 for each day the child remains out of care for one and a half years.	17	16	7	-9

3.3 Stronger Families – Norfolk

Final baseline payment triggers (description)	Target number to be achieved (for whole project)	Targets to end of LCF Sep 2024	Actual achieved	Difference LCF target and actual
Days out of care. For the Edge of Care cohort, a 33% Deadweight will be applied (for those that would not have entered care). For the In Care cohort, no deadweight will apply. To be paid at a rate of £55 per day for up to 3 years.	166,748 days	141,951 days	145,852 days	3,958 days

1.4 Pyramid Project – step down from residential care

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
06.07.22 updated trigger child or young person move from residential care complete. one payment per C or YP of £4,100 at the end of the first week in placement	79	16	-63
06.07.22 updated trigger. West Midlands commissioners only sustainment of placement payments per YP £9,490 at 9,12,15,18,21 and 24 months	79	6	-73
06.07.22 updated trigger. Surrey commissioners only continued sustainment of placement £11,500 at 3,6,9,12,15,18,21 and 24 months	79	0	-79
06.07.22 updated trigger. YP aged 16 or over move from residential care complete. one payment at the end of the first week of £4,100	79	1	-78
06.07.22 updated trigger. West Midlands commissioners only continuation of placement, £820 per week for a maximum of 104 weeks	79	3	-76

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
06.07.22 updated trigger. West Midlands commissioners only 6 months sustainment of placement one payment per YP of £18,980	79	8	-71
06.07.22 updated trigger. Surrey commissioners only continuation of placement payment of £900 per week for 104 weeks	79	0	-79
06.07.22 updated trigger. sustainment of placement YP aged 16 or over, £1,200 per week for 13 weeks	79	1	-78
06.07.22 updated trigger sustainment of placement. YP 16 or over £1,000 per week, weeks 14-65	79	1	-78
06.07.22 updated trigger sustainment of placement YP 16 or over, £900 per week final 13 weeks of placement	79	1	-78
06.07.22 updated trigger continued sustainment of placement YP 16 or over £9,490 at 3, 6, 9, 12 and 15 months	79	1	-78
03.03.23 updated trigger West Midlands commissioners only. Continuation of placement £1,020 per week for a maximum of 104 weeks	79	1	-78
03.03.23 updated trigger Surrey commissioners only. Continuation of placement £1,100 per week for a maximum of 104 weeks	79	0	-79

3.4 DN2 Children's Services Social Impact Bond

Final baseline payment triggers (description)	Target number to be achieved (for entire project)	Targets to end of LCF Sep 2024	Actual achieved	Difference LCF target and actual
Weeks spent out of residential care after intervention period to a maximum of 104 weeks	85	70 for cases to 30/09/24	70	0
Weeks spent in foster carer after intervention period to a maximum of 104 weeks	85	62 for cases to 30/09/24	62	0
Weeks out of care with birth parents/ primary carers after intervention period to a maximum of 104 week	57	57 for cases to 30/09/24	57	0
Weeks out of care with birth parents/ primary carers after intervention period to a maximum of 104 weeks	67	52 for cases to 30/09/24	52	0

4. Drug and alcohol dependency projects

2.1 IPS Employment Support For People With Drug And Alcohol Addictions

Outcomes	Expected to achieve	Actual achieved
Individual engages with IPS programme, completes vocational profile	1,953	1,009
Individual starts a job	766	276
Individual remains in job at 13 weeks < 16 hours	192	27
Individual remains in job at 13 weeks > 16 hours	192	103
PROM changes in TOP score and SURE forms	141	606
Changes in forecasted healthcare resource group quarterly costs	12	3

2.2 Integrated Family Service Support Staffordshire

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
553 families engaged on the CPP programme (£2,000 per trigger; on commencement of IFSS).	553	553	Should be higher but 10 months data missing during the pandemic
553 children and young people escalated from CPP to LAC averted (£3,602 per trigger; six months after engagement).	553	795	See above
1,398 families engaged on to the CIN programme (£200 per trigger; on commencement of CIN project).	1,398	440	See above but overall activity lower than hoped due to planned expansion not happening due to factors associated with the pandemic
1,910 children and young people CIN to CPP status averted (£800 per trigger; six months after engagement).	1,910	510	See above
455 families completing on the CPP programme (£1,000 per trigger; on completion of IFSS).	455	466	Should be higher but 10 months data missing during the pandemic

2.3 Cornwall Frequent Attenders

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Sustained engagement - linked to outcomes 1&2, achieved after 12 weeks, £1200 payment with 620 expected to achieve	620	675	55
60% reduction in A&E attendance - linked to outcomes 1&2, achieved after 6,9 and 12 months, £3,000 per achievement with 380 expected to achieve	380	362	-18 (This was impacted by low referral numbers during COVID not able to be in the system to mature at the outcome point. We were on a trajectory to achieve this just after the end of the project.)
Sustained reduction of use of A&E services - achieved after 18 months, £1600 per achievement with 233 expected to achieve	233	271	38

5. Early years services projects

5.1 ParentChild+

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
<p>PT-00045</p> <p>NEW COHORT - Outcome one, metric one) Speech and language skills at ASQ level for 30 children within 16 months of starting the project; £1,757 payment per beneficiary.</p>	30	46	16
<p>PT-00046</p> <p>NEW COHORT - (Outcome one, metric two) Social-personal skills at ASQ level for 30 children within 16 months of starting the project; £1,757 payment per beneficiary.</p>	30	47	17
<p>PT-00047</p> <p>NEW COHORT - Outcome one, metric one) Speech and language skills at EYFS level for 25 children within 39 months of starting the project; £536 payment per beneficiary.</p>	25	3	-22 Further results due Sep 25
<p>PT-00048</p> <p>NEW COHORT - (Outcome one, metric two) Social-personal-emotional skills at EYFS level for 25 children within 39 months of starting the project; £536 payment per beneficiary.</p>	25	3	-22 Further results due Sep 25
<p>PT-00049</p> <p>NEW COHORT - (Outcome two, metric one) Parental self-efficacy increased by 5% over 15 months of the project compared to baseline assessment for 30 beneficiaries. £439 payment per beneficiary</p>	30	32	2

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
<p>PT-00050</p> <p>NEW COHORT - (Outcome three, metric one) 48 beneficiaries initially engaging with the programme.</p> <p>£661 payment per beneficiary</p>	48	69	21
<p>PT-00051</p> <p>NEW COHORT - (Outcome three, metric two) 34 beneficiaries completing the first cycle of the programme.</p> <p>£1,573 payment per beneficiary.</p>	34	52	18
<p>PT-00052</p> <p>NEW COHORT - (Outcome three, metric three) 30 beneficiaries completing the second cycle of the programme.</p> <p>£1,142 payment per beneficiary.</p>	30	52	22
<p>PT-00213</p> <p>ORIGINAL COHORT - (Outcome one, metric one) Speech and language skills at ASQ level for 94 children within 16 months of starting the project.</p> <p>£1,794 payment per beneficiary to an expected maximum of £168,600</p>	94	87	-7 Proportion of SEND children on the programme impacted achievements. Delays to assessments due to HV capacity and children moving out of borough resulted in a few children being missed.
<p>PT-00214</p> <p>ORIGINAL COHORT - (Outcome one, metric two) Social-personal skills at ASQ level for 94 children within 16 months of starting the project.</p> <p>£1,794 payment per beneficiary to an expected maximum of £168,600</p>	94	84	-10 Proportion of SEND children on the programme impacted achievements. Delays to assessments due to HV capacity and children moving out of borough resulted in a few children being missed.

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
<p>PT-00215</p> <p>ORIGINAL COHORT - (Outcome one, metric one) Speech and language skills at EYFS level for 77 children within 39 months of starting the project.</p> <p>£547 payment per beneficiary to an expected maximum of £42,150</p>	77	28	<p>-49</p> <p>Impact of COVID was possibly a factor.</p> <p>Proportion of SEND children on the programme impacted achievements.</p> <p>We also did not claim for children who disengaged early.</p>
<p>PT-00216</p> <p>ORIGINAL COHORT - (Outcome one, metric two) Social-personal-emotional skills at EYFS level for 77 children within 39 months of starting the project.</p> <p>£547 payment per beneficiary to an expected maximum of £42,150</p>	77	34	<p>-43</p> <p>Impact of COVID was possibly a factor.</p> <p>Proportion of SEND children on the programme impacted achievements.</p> <p>We also did not claim for children who disengaged early.</p>

5.2 West London Zone, Placed-Based Support For Children And Young People: Scale-Up (AllChild)

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Child signs up to programme. 2,240 users at £1,680 payment per trigger (all commissioners)	2,240	2,255	15
Child engages with support. 1,580 children at £1,675 payment per trigger (all commissioners).	1,580	1,970	443
Child engages with support. 1,580 children at £1,675 payment per trigger (all commissioners).	1,580	1,938	358
Child achieves one outcome (linked to primary outcome) £1,556.67	1,487	2,024	537 Actual is number of children achieving at least one outcome
Child achieves two outcomes (linked to primary outcome) £3,113.34	1,487	1,880	393
Child achieves maximum three outcomes (linked to primary outcome) £4,670	1,487	1,570	80
Parent consent given to participate (Links to additional outcome three). Number to achieve: 180 Cost per trigger: £1,680	180	150	-30 150 places from Lead Commissioners
6 or more logged interactions with parent plus at least 75% attendance (links to additional outcome two). Number to achieve: 143 Cost per trigger: £1,675	143	117	-26 See above (although 82% success rate higher than baseline forecast of 79%)
6 or more logged interactions with parent plus at least 75% attendance at scheduled partner support. (Links to additional outcome three). Number to achieve: 135 Cost per trigger: £1,675	135	131	-4
Maximum 3 payments per child, from a 'rate card' of 7, payable only if one engagement payment is achieved. (Links to additional outcome one). Number to achieve: 94 Cost per trigger: £4,670	94	131	37

5.3 Reducing the prevalence of mothers experiencing recurrent care proceedings

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
<p>The payment for First Outcome Metric 1 is £24,664</p> <p>The payment for First Outcome Metric 2 is partly paid based on number of months if not fully achieved:</p> <p>< 8 £0</p> <p>> 9 £17,617</p> <p>> 9 < 10 £19,378</p> <p>> 10 < 11 £21,140</p> <p>> 11 < 12 £22,902</p>	40	49	9
<p>Maximum payment for achieving 2nd Outcome Metric 1 is £10,570 (ie. 30% of total potential outcome payments per user), to be paid quarterly at £19.60 per day.</p> <p>Payment for achieving 2nd outcome Metric is: £19.60 per day</p>	47	49	2

6. Young people services projects

6.1 FutureImpact

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Initial wellbeing assessment (three months, £500 per user, 510 users expected to achieve)	Initial wellbeing assessment (three months, £500 per user, 654 users expected to achieve)	650	760	+ 146
Second wellbeing assessment (six months, £500 per user, 408 users expected to achieve)	Second wellbeing assessment (six months, £500 per user, 510 users expected to achieve)	510	638	+128

Due to Relationship aspect of project was more successful than expected which kept engagement and prevented drop out in the numbers expected.

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Third wellbeing assessment (nine months, £200 per user, 383 users expected to achieve)	Third wellbeing assessment (nine months, £200 per user, 482 users expected to achieve)	482	530	+52
Fourth wellbeing assessment (twelve months, £200 per user, 357 users expected to achieve)	Fourth wellbeing assessment (twelve months, £200 per user, 448 users expected to achieve)	448	462	+14
Fifth wellbeing assessment fifteen months, £200 per user, 332 users expected to achieve)	Fifth wellbeing assessment (fifteen months, £200 per user, 397 users expected to achieve)	397	406	+6
Entry into Education or Training (six months, £500 per user, 153 users expected to achieve)	Entry into Education or Training (six months, £500 per user, 437 users expected to achieve)	437	557	+120
Individuals 1st Entry level 1, 2 and/or 3 qualification (inc Maths and English) (twelve months, £1,500 per user, 102 users expected to achieve)	Individuals 1st Entry level 1, 2 and/or 3 qualification (inc Maths and English) (twelve months, £1,500 per user, 180 users expected to achieve)	180	141	-39 COVID impact of qualifications measured
NVQ level 1 or equivalent (inc Maths and English if not held) (twelve months, £2,500 per user, 102 users expected to achieve)	NVQ level 1 or equivalent (inc Maths and English if not held) (twelve months, £2,500 per user, 207 users expected to achieve)	207	167	-40 COVID impact of qualifications measured

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Individuals Full NVQ level 2 and above or equivalent or apprenticeship (fifteen months, £3,500 per user, 61 users expected to achieve)	Individuals Full NVQ level 2 and above or equivalent or apprenticeship (fifteen months, £3,500 per user, 85 users expected to achieve)	85	115	+30
13 weeks apprenticeship sustainment (twelve months, £4,500 per user, 15 users expected to achieve)	13 weeks apprenticeship sustainment (twelve months, £4,500 per user, 8 users expected to achieve)	8	15	+7
Entry into volunteering (three months, £500 per user, 153 users expected to achieve)	Entry into volunteering (three months, £500 per user, 120 users expected to achieve)	120	134	+14
13 weeks volunteering (three months, £500 per user, 100 users expected to achieve)	13 weeks volunteering (three months, £500 per user, 100 users expected to achieve)	100	63	-37 Volunteering was an area that was hard to achieve, required greater specific placement support than could be given through existing roles, also evaluation showed it would have been better to record hours rather than weeks to provide for different approach to volunteering eg long-term placements vs one or 2 week FT placements
26 weeks volunteering (nine months, £250 per user, 0 users expected to achieve)	26 weeks volunteering (nine months, £250 per user, 1 user expected to achieve)	1	34	+33

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Entry into Employment (nine months, £500 per user, 128 users expected to achieve)	Entry into Full-time Employment (nine months, £500 per user, 101 users expected to achieve)	101	163	+62
13 weeks F/T Employment (twelve months, £500 per user, 128 users expected to achieve)	13 weeks F/T Employment (twelve months, £4,500 per user, 72 users expected to achieve)	72	101	+29
26 weeks F/T Employment (fifteen months, £4,500 per user, 102 users expected to achieve)	26 weeks F/T Employment (fifteen months, £3,500 per user, 54 users expected to achieve)	54	69	+15
	Entry into part-time employment (including zero hours contracts) (nine months, £500 per user, 99 users expected to achieve)	99	114	+15
	13 weeks P/T Employment (twelve months, £3,500 per user, 69 users expected to achieve)	69	77	+8
	26 weeks P/T Employment (fifteen months, £2,500 per user, 54 users expected to achieve)	54	53	-1

6.2 DFN MoveForward

Final baseline	Target number to be achieved	Actual achieved
Young people with mild to moderate learning disabilities will enter and sustain paid employment	78	64
Young people become work-ready through participation in 4+ workplace activities	262	248
Young people complete the ThinkForward work skills BTEC/alternative in-school qualification	184	164
Young people are enrolled onto the DFN-MoveForward programme	278	272

6.3 Big Picture Learning Doncaster

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Original - improved attendance KS3 – linked to outcome 2 metric 1. Paid monthly to 45 service users, £1,340 per user	2,729	287	-2442
Original - Personal Learning Plan in place KS3 – linked to outcome 1 metric 1. One-off payment at the end of four weeks to 73 service users at £10,750 per user	73	78	-5
Original - Progress against plan KS3 – linked to outcome 3. Paid termly to 56 service users at £1,600 per user	56	38	-18
Original - Maintained or increased resilience – linked to outcome 3. Paid quarterly to 151 service users at £6,100 per user	151	1	-150

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Original - Personal Learning Plan KS4 in place linked to outcome 4. One off payment at the end of 4 weeks. 100 to achieve at £6,000	100	23	-77
Original - Exclusion Reduction KS4, linked to outcome 5. 391 to achieve at £767.26	391	36	-355
Original - Engagement with workplace KS4, linked to outcome 6, 391 to achieve at £767.26	391	9	-382
Original - Workplace Skills KS4, linked to outcome 7, 391 to achieve at £383.63	391	22	-369
Original - Appropriate Qualifications KS4, linked to outcome 8. 391 to achieve at £383.63	391	18	-373
KS3 – PLP Starter – linked to outcome 1, £2,638 per trigger	465	372	-93
KS3 Attendance – linked to outcome 2, £2,537 per trigger	440	241	-199
KS3 – Progression – linked to outcome 3, £2,537 per trigger	296	306	-10
KS3 – Reintegration – linked to outcome 4, £1,691 per trigger	49	65	-26
KS4 – PLP – linked to outcome 1, metric 1, £5,767	65	77	-12
KS4 – PLP Refresh – linked to outcome 1, metric 2, £4,833	40	25	-15
KS4 – Attendance – linked to outcome 2, £1,959 per trigger	189	185	-4
KS4 – Engagement with the workplace – linked to outcome 3, £1,959	189	123	-66
KS4 – Workplace Skills – linked to outcome 4 £356 per trigger	189	187	-2
KS4 – Achievement – linked to outcome 5 £356 per trigger	189	204	-15

6.4 The Skill Mill (targets and achievements extracted from The Skill Mill Final Evaluation¹⁶³
– targets may differ from targets in the DCMS Data Portal)

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Confirmation from Police or another local agency with access to the Police National Computer that Service User has not been reconvicted during this period; or confirmation from the YOT. (12-month non-offending)	230	203	-27
Letter from employer confirming full or part time employment for Service User; or Confirmation from HMT that Service User has registered as employed; or Evidence of enrolment into a NVQ Level 2 or above training course. Job outcome	142	86	-56
Young person registers for the Skill Mill programme by signing the registration form. Recruitment	252	243	-9
Service User has completed at least four weeks on the programme with regular attendance of at least 75% as evidenced by daily attendance register. Induction	252	237	-15
Confirmation from AQA that Level 2 award has been achieved. Qualification	214	188	-26
Service User has completed the Skill Mill programme with regular attendance of at least 75%, or completes 5 months of the programme, but departs for purposes of entry into a job position. 6-month completion	186	179	-7

¹⁶³ The Skill Mill reported additional outcomes achieved in October and November 2024: 12 months desistance from reoffending (43 additional individuals), completion of 5/6 months on the programme (3 additional individuals), secure job or further training (8 individuals), qualification achieved (3 additional individuals). The final evaluation is available [here](#).

6.5 Chances

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
A staff assessment of the 'engagement' level of a young person in the programme between 12 and 24 weeks after enrolment. A bespoke Engagement Matrix will be used. £80	4,800	5,516	+716
The delivery organisation will provide a copy of the certificate of achievement. £750	1,152	2,645	+1493
For young people who have offended once, the participating LA will provide a letter confirming the offending / non offending behaviour of the young person at the end of each quarter of their involvement in the programme. £750	768	573	-195
The participating LA school or PRU will provide a letter confirming the attendance rate of the young person at the end of each of the following three full school terms after they have enrolled on the programme. £700	480	252	-228
The participating LA school or PRU will provide a letter confirming the attendance rate of the young person at the end of each of the following three full school terms after they have enrolled on the programme. £550	480	408	-72
The organisation hosting the volunteering or work placement will provide a letter documenting the length and type of placement. £850	480	186	-294

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Evidence of enrolment in college or sixth form £1,000	32	2	-30
A young person will complete a midpoint questionnaire, 12 to 24 weeks after enrolment and providing they have been assessed as being 'involved', which will measure perceptions of physical literacy. £150	3,840	2,962 total 979 @ £150 1,983 @ £200	-878
A young person will complete a midpoint questionnaire, 12 to 24 weeks after enrolment and providing they have been assessed as being 'involved', which will measure perceptions of physical literacy. £200	3,840	n/a see above	This target is combined with the same metric above. The outcome count wasn't different just the price point agreed with commissioner
A young person will complete an endpoint questionnaire, 36 to 52 weeks after enrolment, which will measure perceptions of physical literacy. £200	2,400	2571total 838 @ £200 1,733 @ £250	+171
A young person will complete an endpoint questionnaire, 36 to 52 weeks after enrolment, which will measure perceptions of physical literacy. £250	2,400	n/a – see above	This target is combined with the same metric above. The outcome count wasn't different just the price point agreed with commissioner.
For young people who have offended three or more times, the participating LA will provide a letter confirming the offending / non offending behaviour of the young person at the end of each quarter of their involvement in the programme. £1000	144	116	-28

6.6 Gloucestershire Positive Behaviour Support

Final baseline payment triggers	Target number to be achieved	Actual achieved - To September 2024	Difference between target and actual
Young person stays out of residential care for three months.	14	14	0
Young person stays out of residential care for another three months (at 6 months).	14	14	0
Young person stays out of residential care for another three months (at 9 months).	13	13	0
Young person stays out of residential care for another three months (at 12 months).	12	12	0
Young person stays out of residential care for another three months (at 15 months).	12	12	0
Young person stays out of residential care for another three months (at 18 months).	12	12	0
Young person stays out of residential care for another three months (at 21 months).	12	12	0
Young person stays out of residential care for another three months (at 24 months).	12	12	0
Young person stays out of residential care for another three months (at 27 months).	11	11	0
Young person stays out of residential care for another three months (at 30 months).	11	11	0
Young person stays out of residential care for another three months (at 33 months).	11	11	0
Young person stays out of residential care for another three months (at 36 months).	11	11	0
Young person stays out of residential care for another three months (at 39 months).	11	11	0
Young person stays out of residential care for another three months (at 42 months).	11	11	0

7. Older people's services projects

5.1 Enhanced Dementia Care Service

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Individuals received individualised care plan	300	513	213
Reductions in avoidable hospital admissions	300	620	320

Healthy lives projects

8.1 MHEP Haringey And Barnet

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
completion of three appointments with the employment co-ordinator and individual or when the vocational profile is completed.	completion of three appointments with the employment co-ordinator and individual or when the vocational profile is completed.	799	695	104
individual spends at least one full day (or 4 hours for part time work) in paid competitive employment.	individual spends at least one full day (or 4 hours for part time work) in paid competitive employment.	379	218	161
Job sustainment: individual sustains paid employment for at least 13 weeks where they work < 16 hours per week.	Job sustainment: individual sustains paid employment for at least 13 weeks where they work < 16 hours per week.	113	40	73
Job sustainment: individual sustains paid employment for at least 13 weeks where they work >16 hours per week.	Job sustainment: individual sustains paid employment for at least 13 weeks where they work >16 hours per week.	93	63	30

8.2 Promoting Independence

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Engagement: onto the PI programme. Individual engages and completes well-being plan and recovery star.	60	61	+1
Exit from residential care: Exit from 24/7 residential care into independently maintained tenancy.	74	73	-1
Sustainment of tenancy for 6 months	61	60 to date	
Sustainment of tenancy for 12 months	55	51 to date	
Sustainment of tenancy for 18 months. Post Sept 2022	47	34 to date	
Sustainment of tenancy for 24 months. To Sept 2022	74	2	This outcome target was reduced and replaced by the 18-month sustainment outcome target as part of the contract variation Sept 2022

8.3 Midlands Regional Pause Hub (also known as Forward Outcomes Partnership)

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Woman is engaged with Pause programme. Payment £12,870	121	175	54
Woman successfully completes Pause programme. Payment £15,736	108	149	41
Women are able to adequately care for further children. Payment £12,483	143	149	6

8.4 MHEP Enfield

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Engagement	546	254	292
Job start	181	88	93
Job sustainment < 16 hours per week	55	14	41
Job sustainment > 16 hours per week	55	44	11

6.5 MHEP Tower Hamlets – Severe Mental Issues

Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Engagement	1950	1171	779
Job start	718	359	359
Job sustainment < 16 hours a week	248	60	188
Job sustainment > 16 hours a week	302	136	166

6.6 MHEP Shropshire

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Individual engages with the programme and completes vocational profile	Individual engages with the programme and completes vocational profile	419	496	77 There was no difference, though the service did achieve more outcomes than have been recorded here but the service hit the cap.
Job start. Individual gains competitive employment	Job start. Individual gains competitive employment	197	170	-27 There was no difference, though the service did achieve more outcomes than have been recorded here but the service hit the cap.
Job sustainment. Individual works less than 16 hours per week	Job sustainment. Individual works less than 16 hours per week	66	18	48 Difference of 48. The service struggled to evidence and record sustainments until the blocker was identified.
Job sustainment. Individual works more than 16 hours per week	Job sustainment. Individual works more than 16 hours per week	56	60	16 There was no difference, though the service did achieve more outcomes than have been recorded here but the service hit the cap.

6.7 MHEP Tower Hamlets Learning Disabilities

Original baseline	Final baseline	Target number to be achieved	Actual achieved	Difference between target and actual
Individual engages with the programme and completes vocational profile	Individual engages with the programme and completes vocational profile	370	75	-295 Working closely with MHEP and conducting an in-depth analysis of their clientele, JET was able to pinpoint significant differences between the LDs group and other IPS client groups, particularly in terms of referral and engagement objectives.
Job start. Individual gains competitive employment	Job start. Individual gains competitive employment	182	119	-63 Working closely with MHEP and conducting an in-depth analysis of their clientele, JET was able to pinpoint significant differences between the LDs group and other IPS client groups, particularly in terms of referral and engagement objectives.
Job sustainment. Individual works less than 16 hours per week	Job sustainment. Individual works less than 16 hours per week	40	96	56 The LDs group tends to require more support than the SMI group. Such additional support proved important for achieving higher sustainment rates. Also, JET had clients who were already referred to the services before the MHEP contract started.
Job sustainment. Individual works more than 16 hours per week	Job sustainment. Individual works more than 16 hours per week	17	9	- 8 As LDs group tends to require more support than the SMI group, more engagement with the employers is also needed. It takes time to build trust with potential employers providing more than 16 hours per week work.

6.7 A Norfolk SIB For Carers

Final baseline payment triggers	Target to 30.9.24	Actual achieved (to Sep-24)	Difference between target and actual	Expected to Aug-26
Original Trigger 1 Sustainment of caring role (6 months) (lower need cohort) Payment per trigger £939	1564	1247	-307	1,787
Original Trigger 2 Sustainment of caring role (12 months) (lower need cohort) Payment per trigger £917	1102	776	-323	1,281
Original Trigger 3 Sustainment of caring role (6 months) (higher need cohort) Payment per trigger £1,760 – outcome stopped after Y1	Linked to Original Trigger 1	10	Linked to Original Trigger 1	10
Original Trigger 4 Sustainment of caring role (12 months) (higher need cohort) Payment per trigger £2,579 – outcome stopped after Y1	Linked to Original Trigger 2	3	Linked to Original Trigger 2	3
Original Trigger 5 Increased number of carers known and understood by Norfolk – unique contacts Payment per trigger £112	8419	11849	+3430	14,652
Original Trigger 6 Increased number of carers known and understood by Norfolk and triaged Payment per trigger £337	3092	4180	+1088	5,405
Original Trigger 7 Increased number of carers known and understood by Norfolk – Wellbeing assessments and action plan completed (lower need) Payment per trigger £953	2144	1835	-290	2,286
Original Trigger 8 Increased number of carers known and understood by Norfolk – Wellbeing assessments and action plan completed (higher need) Payment per trigger £1,797 – outcome stopped after Y1	Linked to Original Trigger 7	19	Linked to Original Trigger 7	19
Original Trigger 9 Wellbeing improvement (6 months) (lower need cohort) Payment per trigger £939	1444	999	-436	1,426

Final baseline payment triggers	Target to 30.9.24	Actual achieved (to Sep-24)	Difference between target and actual	Expected to Aug-26
Original Trigger 10 Wellbeing improvement (12 months) (lower need cohort) Payment per trigger £918	814	626	-185	1,099
Original Trigger 11 Wellbeing improvement (6 months) (higher need cohort) Payment per trigger £1,760 – outcome stopped after Y1	Linked to Original Trigger 9	9	Linked to Original Trigger 9	9
Original Trigger 12 Wellbeing improvement (12 months) (higher need cohort) Payment per trigger £1696 – outcome stopped after Y1	Linked to Original Trigger 10	3	Linked to Original Trigger 10	3
Payment trigger 1 – updated Jan 2022 – Sustainment of caring role (6 months) £1,200 per trigger, linked to Outcome 1 metric 1	1564	1257	-307	1,797
Payment trigger 2 – updated Jan 2022 - Sustainment of caring role (12months) £1,200 per trigger, linked to outcome 1 metric 2	1102	779	-323	1,284
Payment trigger 3 – updated Jan 2022 – Increased number of carers known and understood by Norfolk – unique contacts £100 per trigger, linked to outcome 2, metric 1	8419	11849	+3430	14,652
Payment trigger 4 – updated Jan 2022 – Increased number of carers known and understood by Norfolk and triaged – £300 per trigger, linked to outcome 2, metric 2	3092	4180	+1088	5,405
Payment trigger 5 – updated Jan 2022 – Increased number of carers known and understood by Norfolk – wellbeing assessments and action plan completed – £1,200 per trigger, linked to outcome 3, metric 1	2144	1854	-290	2,305
Payment trigger 6 – updated Jan 2022 - Wellbeing improvement – £1,200 per trigger, linked to outcome 3, metric 2	1444	1008	-436	1,435
Payment trigger 7 – updated Jan 2022 – Wellbeing improvement – £1,200 per trigger, linked to outcome 3, metric 3	814	629	-185	1,102

6.8 Social Prescribing Service Northamptonshire

Final baseline payment triggers	Target number to be achieved (for whole project)	Targets to end of LCF Sep 2024	Actual achieved	Difference LCF target and actual
Person identified as complex	3208	1516	1516	0
Initial Assessment taken place with action plan completed	5832	2652	2652	0
Well Being Star – improvement after 6 month assessment	3696	1084	1084	0
Well Being Star – improvement after 12 month assessment	3328	546	546	0
WEMWS – improvement after 6 month assessment	2737	937	937	0
WEMWS – improvement after 12 month assessment	2413	494	494	0
Reduction in GP consultations	2394	0	0	0

9. Other cross-cutting themes

9.1 Pan London Single Homelessness Prevention Service

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
1. Updated Nov 2023 – Completion of Personal Housing Plan (PHP), 13,692 to achieve £331 per user.	11,497	12,117	620
2. Updated Nov 2023 – Successful prevention of homelessness, 3,111 to achieve, payment £839 per user.	2,635	2,464	-171
3. Updated Nov 2023 – Successful relief of homelessness, 4,666 to achieve, payment £939.	3708	4313	605
4. Updated Nov 2023 – 8-month sustainment of accommodation, 6,120 to achieve, payment £821.	4,537	4,578	41
5. New Enfield TA Feb 2023 – Completion of PHP and resettlement plan, 60 to achieve payment £250 per user.	60	34	-26
6. New Enfield TA Feb 2023 – Successful move out of TA, 39 to achieve payment £1,500 per user.	39	2	-37
7. New Enfield TA Feb 2023 – Successful resettlement, 39 to achieve payment £450 per user.	39	2	-37
8. New Enfield TA Feb 2023 – 8-month sustainment of accommodation 39 to achieve payment £2,000 per user.	39	2	-37

9.2 Kirklees Better Outcomes Partnership (KBOP)

Final baseline payment triggers	Target number to be achieved	Actual achieved	Difference between target and actual
Sustaining accommodation (related to measure 1 metric 1,2,3 plus with 3,169 beneficiaries expected to claim the outcome at £2,676 each).	3241	3458	217
Stability and wellbeing (related to measure 2 Metric 1, 2, 3 plus with 5,450 beneficiaries expected to claim the outcome at £2,078 each).	5080	5,112	32
Employment and learning (related to measure 3 metric 1,2,3 plus with 1,173 beneficiaries expected to claim the outcome at £3,839 each).	1386	1,817	531

APPENDIX 2

Overarching outcome achievements across the LCF projects

In this Appendix 2, we present a table for every overarching outcome that several LCF projects were pursuing. Every project had a different set of outcome metrics, payment triggers and prices, so it is not possible to compare them or aggregate them.

The purpose of these tables is to illustrate the high-level achievements of the fund from the perspective of policy relevant outcomes, not to provide a final figure for those outcomes. We do not aggregate these outcomes, although they seem very similar, because the way that they have been tracked presents challenges for aggregation. For instance, some employment outcomes measure full-time employment, or part-time employment. Some employment outcomes consider that employment has been sustained after 3 months, others after 6 months.

The list of overarching outcomes was set by central government according to policy priorities and the policy themes established at the beginning of the fund. Each table illustrates the achievements for one overarching outcome, and can include projects from different policy themes.

Data on cohort, outcome metrics and payment triggers was sourced from the DCMS Data Portal. Data on achievements was sourced from end of grant forms or self-reported by projects and only includes performance up to September 2024. When projects are continuing after the LCF, this achievements data should be considered as interim.

1. Avoidance of children’s care proceedings and children in care outcomes

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
DN2 Children’s Services Social Impact Bond	Children and Young People aged 10-17 either at risk of entering care or in the care system.	Child/young person steps down from residential care into a familial type environment.	Weeks spent out of residential care after intervention period to a maximum of 104 weeks.	70 individuals stepped down from residential care into a familial type of environment.	EOG form
DN2 Children’s Services Social Impact Bond	Children and Young People aged 10-17 either at risk of entering care or in the care system.	Re-unifying children/ young people who have entered care with their family/ primary carer.	Weeks out of care with birth parents/ primary carers after intervention period – to a maximum of 104 weeks.	57 individuals were reunified with their families.	EOG form
Integrated Family Support Service	Children in need, children subject to a Child Protection Plan and Looked After Children.	Reduce the number of Child Protection Plans escalating to become looked after.	Children and young people avoided escalating from Child Protection Plan (CPP) to Look After Children (LAC) status.	795 individuals avoided escalating from CPP to LAC status.	EOG form
Midlands Regional Pause Hub	Women who have experienced, or are at risk of experiencing, at least two episodes of care proceedings leading to the removal of one or more of their children into care.	Women do not become subject to the instigation of further care proceedings for removal of a child for a period of 18 months from the point when they complete the Pause programme.	Women are able to adequately care for further children.	149 women were able to adequately care for further children for a period of 18 months after completion of the Pause programme.	EOG form
Reducing The Prevalence Of Mothers Experiencing Recurrent Care Proceedings (Pause)	Women of childbearing age who have experienced (or are at high risk of experiencing) a cycle of recurrent care proceedings leading to removal of their children into local authority care.	Women do not become subject to the instigation of further care proceedings for removal of a child for a period of 36 months from the point when they complete the Pause programme.	Women are able to adequately care for further children.	49 women were able to adequately care for further children for a period of 36 months after completion of the Pause programme.	EOG form

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Stronger Families Norfolk	Children and young people (C&YP) aged 6-15. There will be two target cohorts: 6 to 15-year-old Edge of Care cohort and 6 to 15-year-old In Care cohort.	Prevention of families from breaking down and young people/ children from entering care.	Days out of care.	145,852 days out of care. According to the DCMS Data Portal, each quarterly payment claim recorded days out of care for an average of 112 children.	EOG form and DCMS Data Portal
Stronger Families Suffolk	11-16 years (10- and 17-year-olds with agreement from Commissioner) at risk of entering care / reunification of children already in care.	To avoid the need for sustained care, by delivering an evidenced based therapeutic intervention; Functional Family Therapy.	Children on the edge of care sustainably avoid the need for care.	276 children on the edge of care sustainably avoided the need for care.	EOG form
Stronger Families Suffolk	11-16 years (10- and 17-year-olds with agreement from Commissioner) at risk of entering care / reunification of children already in care.	To reunify children that have entered Care with their family / wider network, by delivering an evidenced based therapeutic intervention; Functional Family Therapy.	Children are sustainably reunified with their family/wider network.	18 children were sustainably reunified with their family/wider network.	EOG form
Fostering Better Outcomes	Children aged from 7-17 within the Local Authority either in or on the edge of care.	Supporting children and young people in foster care, as an alternative to residential.	Child is not in residential care: paid monthly, after 1 month for up to 2 years.	9 children were supported into foster care.	EOG form
Pyramid Project	Looked after children.	Young Person moves from residential to foster placement.	Child or young person move from residential care complete.	16 were supported into foster care.	EOG form

2. Employment outcomes (does not include sustainment outcomes)

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
IPS Employment Support For People With Drug And Alcohol Addictions	People aged 16-70 years old with drug and alcohol addictions, who are out of work, to gain and retain competitive employment. All service users will be voluntary and either receiving treatment, in recovery or previous users of the service.	Job start.	Job start: achieved up to nine months after engagement.	276 individuals started a job.	EOG form
MHEP Haringey And Barnet	Individuals with enduring and severe mental health issues.	Individual obtains competitive employment and starts a job.	Job start.	218 individuals started a job.	EOG form
MHEP Tower Hamlets – Mental Health	Individuals with enduring and severe mental health issues.	Individual obtains competitive employment and starts a job.	Job start.	359 individuals started a job.	EOG form
MHEP Tower Hamlets – Learning Disabilities	People with learning disabilities.	Individual obtains competitive employment and starts a job.	Job start.	119 individuals started a job.	EOG form
MHEP Shropshire	Individuals with enduring and severe mental health issues.	Individual obtains competitive employment and starts a job.	Job start.	170 individuals started a job.	EOG form
MHEP Enfield	Individuals with enduring and severe mental health issues.	Individual obtains competitive employment and starts a job.	Job start.	88 individuals started a job.	EOG form

DFN Move Forward	Young people aged 14-25 with mild to moderate learning disabilities such as cognitive impairment and communication and interaction difficulties.	Young people with mild to moderate learning disabilities will enter and sustain paid employment.	Entry Into Work – trigger will be achieved after 12 months.	64 young people entered work.	EOG form
The Skill Mill	High risk ex-offenders aged 16-18.	Secure job or further training.	Letter from employer confirming full or part time employment for Service User; or Confirmation from HMT that Service User has registered as employed; or Evidence of enrolment into a NVQ Level 2 or above training course.	86 high-risk ex-offenders achieved this outcome (it is not possible to identify individuals entering employment and individuals entering education).	EOG form
Future Impact	15–24-year-olds NEET/at risk of NEET who have special educational needs and disability (SEND)/ demonstrate complex needs, and who have had contact with, or are on the fringes of entry into the Youth Justice System.	Young person enters further education or training.	Entry into Full-time Employment.	163 individuals entered into full-time employment.	EOG form
Future Impact	15–24-year-olds NEET/at risk of NEET who have special educational needs and disability (SEND)/ demonstrate complex needs, and who have had contact with, or are on the fringes of entry into the Youth Justice System.	Young person enters further education or training.	Entry into Part-time Employment.	114 individuals entered into full-time employment.	EOG form
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entry into, completion and sustainment of employment, education, training and/or volunteering.	Entry into Employment.	520 individuals entered into employment.	Self-reported by project

3. Reduction in re-offending

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
The Skill Mill	High risk ex-offenders aged 16-18.	12 months no re-offending.	Confirmation from Police or another local agency with access to the Police National Computer that Service User has not been reconvicted during this period; or confirmation from the Youth Offending Team (YOT).	203 individuals did not reoffend for 12 months after starting the programme.	EOG form
Chances	Children and young people aged between 8-17 with specific issues - low school attendance, recent offenders, looked after children, NEETS, pre-NEETs, and young people with mental health problems.	Reduction in re-offending of young people who have offended once or are subject to a Pre-Court Disposal Order in the 12 months prior to referral into the programme.	For young people who have offended once, the participating Local Authority will provide a letter confirming the offending / non offending behaviour of the young person at the end of each quarter of their involvement in the programme.	573 individuals, who had offended once, did not reoffend.	EOG form
Chances	Children and young people aged between 8-17 with specific issues - low school attendance, recent offenders, looked after children, NEETS, pre-NEETs, and young people with mental health problems.	Reduction of young people who have offended three times or more in previous 12-month period by one third over the year following referral.	For young people who have offended a minimum of three times, the participating Local Authority will provide a letter confirming the behaviour of the young person at the end of each quarter of their involvement in the programme.	116 individuals, who had offended three times or more, did not reoffend.	EOG form

4. Improved school attendance

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Big Picture Learning (BPL) Doncaster	BPL in Doncaster work with children and young people aged 11-16 who are disengaged from education. They work with those showing early signs of crisis.	Improved attendance – students will achieve the attendance outcome every time they verify 80% attendance (or more) against the attendance target set out in their Personal Learning Plan (PLP).	Improved attendance for students in KS3.	241 KS3 students improved school attendance.	EOG form
Big Picture Learning (BPL) Doncaster	BPL in Doncaster work with children and young people aged 11-16 who are disengaged from education. They work with those showing early signs of crisis.	Improved attendance – students will achieve the attendance outcome every time they verify 80% attendance (or more) against the attendance target set out in their Personal Learning Plan (PLP)	Improved attendance for students in KS4.	185 KS4 students improved school attendance.	EOG form
Chances	Children and young people aged between 8-17 with specific issues - low school attendance, recent offenders, looked after children, NEETS, pre-NEETs, and young people with mental health problems.	Improvements in school or Pupil Referral Unit (PRU) attendance of each 10% over the three full terms following enrolment.	The participating LA school or PRU will provide a letter confirming the attendance rate of the young person at the end of each of the following three full school terms after they have enrolled on the programme.	252 individuals improved school attendance by 10%	EOG form
Chances	Children and young people aged between 8-17 with specific issues - low school attendance, recent offenders, looked after children, NEETS, pre-NEETs, and young people with mental health problems.	Improvements in school or Pupil Referral Unit (PRU) attendance of each 5% over the three full terms following enrolment.	The participating LA school or PRU will provide a letter confirming the attendance rate of the young person at the end of each of the following three full school terms after they have enrolled on the programme.	408 individuals improved school attendance by 5%	EOG form

5. Entering and sustaining accommodation outcomes

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Promoting Independence	Adults within Sheffield who have mental health issues and are currently living in 24/7 residential care.	Increase in the number of people who move from 24/7 provision into their own tenancy, and sustain this move.	Exit from 24/7 residential care into independently maintained tenancy.	73 individuals moved from 24/7 residential care to an independently maintained tenancy.	EOG form
Promoting Independence	Adults within Sheffield who have mental health issues and are currently living in 24/7 residential care.	Increase in the number of people who move from 24/7 provision into their own tenancy, and sustain this move.	Sustainment of tenancy 6 months.	60 individuals sustained their tenancy for 6 months.	EOG form
Promoting Independence	Adults within Sheffield who have mental health issues and are currently living in 24/7 residential care.	Increase in the number of people who move from 24/7 provision into their own tenancy, and sustain this move.	Sustainment of tenancy 12 months.	51 individuals sustained their tenancy for 12 months.	EOG form
Promoting Independence	Adults within Sheffield who have mental health issues and are currently living in 24/7 residential care.	Increase in the number of people who move from 24/7 provision into their own tenancy, and sustain this move.	Sustainment of tenancy 18 months.	34 individuals sustained their tenancy for 18 months.	EOG form
Single Homelessness Prevention Service	Single people who are homeless or at risk of becoming homeless.	The successful prevention or relief of homelessness.	Successful homelessness prevention.	2,464 individuals prevented homelessness.	EOG form
Single Homelessness Prevention Service	Single people who are homeless or at risk of becoming homeless.	The successful prevention or relief of homelessness.	Successful homelessness relief.	4,313 homeless individuals were relieved from homelessness.	EOG form
Single Homelessness Prevention Service	Single people who are homeless or at risk of becoming homeless.	Sustainment of accommodation for eight months with no identified risk of homelessness.	8-month sustainment of accommodation.	4,578 individuals sustained their accommodation for 8 months.	EOG form

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entering and sustaining suitable accommodation.	Prevention or relief/entry into a suitable accommodation.	2,175 people have entered into accommodation or prevented being out of a suitable accommodation.	Self-reported by project
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entering and sustaining suitable accommodation.	3 months sustainment of accommodation.	3,546 people have sustained accommodation for 3 months.	Self-reported by project
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entering and sustaining suitable accommodation.	6 months sustainment of accommodation.	3,032 people have sustained accommodation for 6 months.	Self-reported by project

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entering and sustaining suitable accommodation.	12 months sustainment of accommodation.	2,112 people have sustained accommodation for 12 months.	Self-reported by project
Kirklees Better Outcomes Partnership	People over the age of 16 who have vulnerabilities and support needs that may impact on their ability to live independently and who may, without support, be at increased risk of homelessness due to their disabilities, vulnerabilities, issues or lifestyle.	Entering and sustaining suitable accommodation.	18 months sustainment of accommodation.	1,439 people have sustained accommodation for 18 months.	Self-reported by project

6. Reducing unnecessary use of primary health care

Name of project	Cohort	Outcome metric	Payment trigger	Achievement	Source of data
Enhanced Dementia Care Service	People affected by dementia who happen to have a history of disproportionate number of admissions.	Reduction in non-elective admissions for avoidable conditions for service users against historic baseline.	Patient avoided non-elective admissions.	620 individuals avoided non-elective admissions into hospital.	EOG form
Cornwall Frequent Attenders	Cornwall residents aged 18+ with a substance misuse issue who have had eight A&E attendances/two hospital admissions in a year.	To decrease the chaotic and avoidable use of A&E by drug and alcohol 'frequent attenders'.	60% reduction in A&E attendance - achieved after 6,9 and 12 months. (In practice, this payment trigger was only triggered once after 7 months).	362 individuals achieved a 60% reduction in A&E attendance after 7 months.	EOG form
Cornwall Frequent Attenders	Cornwall residents aged 18+ with a substance misuse issue who have had eight A&E attendances/two hospital admissions in a year.	To decrease the chaotic and avoidable use of A&E by drug and alcohol 'frequent attenders'.	Sustained reduction of use of A&E services - achieved after 18 months.	271 individuals achieved a sustained reduction of A&E attendance after 18 months.	EOG form
Social Prescribing Service in Northamptonshire	People with long-term health conditions and one or more of the following characteristics: high co-morbidity levels; low levels of emotional and mental well-being; high levels of social isolation; frequent attender at GP or hospital; or are a caregiver.	Improvement in physical health.	Reduction in GP consultations	Missing data.	

APPENDIX 3

The West London Zone (AllChild) rate card according to Full Award Set Up documents on the DCMS Data Portal (June 2019)

LCF Outcome	Third Outcome: Sign Up	Secondary Outcome: Engagement		Primary Outcome: Rate Card
Free	Payment 1	Payment 2	Payment 3	Payment 4, 5 and 6
	FY 1 - Q4	FY 2 - Q1	FY 3 - Q1	FY3 - Q2
	17%	17%	17%	49%
Child is identified as eligible for support	Child/family gives consent to participate	Sufficient interactions with LW and attendance at partner support	Maintained interactions and attendance	3 final payments from a possible 'rate card' of 7 (see below) at end of 2-year programme, if one engagement payment (2 or 3) has been met

A product of consultation with the community, negotiation with multiple commissioners, and model refinement over the past three years, West London Zone has developed a measurable outcomes framework, with slight variations for primary and secondary school. The outcomes, evidence, and data collection method for these two frameworks is detailed in the tables below.

If a child is 'on track' according to outcomes on the rate card, it is expected that they are on their way to achieving their goals, including enjoying good mental health and achieving the appropriate academic qualifications. Evidence shows that these are critical foundations for future success (see attached supporting evidence).

WLZ operates according to a payment-by-results model. This means that local authorities make payments to WLZ upon receipt of evidence that each child has:

1. Signed up to participate in the programme;
2. Engaged with the programme to a good level, defined as: 6 or more logged interactions with parent or child plus at least 75% attendance at scheduled partner support. This data is submitted by LWs and WLZ Delivery Partners.
3. Sustained that engagement after a year; and
4. Made outcomes progress at the end of the two years. There are 7 possible outcomes which are eligible for payment; WLZ can claim payment for a maximum of three per child. This means there is a maximum of 6 total payments per child.

Primary School: Payment Mechanism

Outcome	Evidence	Collection Method
<p>Academic (Reading): Child is 'on track' (i.e. they do better than children not on ALLCHILD cohort who had the same attainment when they started support, or they meet their attainment target set by school by the end of the second year).</p>	<p>Using best available progress measure, ALLCHILD will determine progress is in line with age-related expectations and improves upon prior attainment and is better than a child not on ALLCHILD who had the same attainment at the start of support. ALLCHILD will use the child's standardised test score (where available) to show their position in a nationally representative attainment distribution. Where standardised test data are not available, ALLCHILD will adopt the school's targets for each child, for each year of academic support. If the school does not routinely set targets for children, ALLCHILD will agree a target for each child with the school.</p>	<p>School data</p>
<p>Academic (Writing): as above</p>	<p>as above</p>	<p>School data</p>
<p>Academic (Maths): as above</p>	<p>as above</p>	<p>School data</p>
<p>Attendance: Child's school attendance if below 90% on identification has improved to 90% and if between 90.01% and 95.9% has improved to 96.0% or above. Must be under 96% baseline to be eligible for payment.</p>	<p>Child's average attendance over at least the past 3 school terms compared with at least 3 school terms prior to ALLCHILD sign-up.</p>	<p>School data</p>
<p>Emotional wellbeing: Child's emotional wellbeing sub-scale in the SDQ* has shown a measurable improvement from their baseline.</p>	<p>Score in child/parent/teacher-response to emotional wellbeing sub-scale of SDQ.</p>	<p>Paper/online SDQ conducted with teachers of cohort children only, or children themselves for those in Year 7 upwards; either standalone or as part of 'My Voice: The ALLCHILD Survey'</p>
<p>Relationships: Child's peer problems sub-scale in the SDQ has shown a measurable improvement from their baseline.</p>	<p>Score in child/parent/teacher-response to peer problems sub-scale of SDQ.</p>	<p>Paper/online SDQ as above</p>
<p>Family engagement: Family is engaged in child's education through regular interaction with LW.</p>	<p>8 or more interactions with parent in total over the two years, logged by LW. Because of difficulties collecting baseline data from parents prior to having a relationship with them, this is a binary yes/no measure taken at the end point.</p>	<p>LW interactions tool</p>

Secondary School: Payment Mechanism

Milestone	Evidence	Collection Method
<p>Academic (English): Child is 'on track' (i.e. they do better than children not on ALLCHILD cohort who had the same attainment when they started support, or they meet their attainment target set by school by the end of the second year).</p>	<p>Using best available progress measure, determine progress is in line with age-related expectations and improves upon prior attainment and is better than a child not on ALLCHILD who had the same attainment at the start of support. ALLCHILD will use the child's standardised test score (where available) to show their position in a nationally representative attainment distribution. Where standardised test data are not available, ALLCHILD will adopt the school's targets for each child, for each year of academic support. If the school does not routinely set targets for children, ALLCHILD will agree a target for each child with the school.</p>	<p>School data</p>
<p>Academic (Maths): as above</p>	<p>as above</p>	<p>School data</p>
<p>Attendance: Child's school attendance if below 90% on identification has improved to 90% and if between 90.01% and 95.9% has improved to 96.0% or above. Must be under 96% baseline to be eligible for payment.</p>	<p>Child's average attendance over at least the past 3 school terms compared with at least 3 school terms prior to ALLCHILD sign-up.</p>	<p>School data</p>
<p>School engagement: Child has remained stable or improved their school engagement.</p>	<p>Score in Communities that Care 'school engagement' measure.</p> <p>This is comprised of 8 questions measure how engaged students are in school, both in terms of their behaviour, and the emotional attachment to school.</p> <p>Example questions:</p> <ul style="list-style-type: none"> - How often do you feel that the schoolwork you are given is important? - Over the past four weeks, how often did you hate being in school? 	

Milestone	Evidence	Collection Method
<p>Emotional wellbeing: Child's emotional wellbeing sub-scale in the SDQ has shown a measurable improvement from their baseline.</p>	<p>Score in child response to emotional wellbeing sub-scale of SDQ.</p>	<p>Part of 'My Voice: The ALL-CHILD Survey', conducted at identification and annually thereafter.</p>
<p>Relationships: Child's peer problems sub-scale in the SDQ has shown a measurable improvement from their baseline.</p>	<p>Score in child response to peer problems sub-scale of SDQ.</p>	
<p>Family engagement: Family is engaged in child's education, demonstrated by child reporting improvement from the baseline on their mean score of Communities that Care child-reported parent engagement measure.</p>	<p>Communities that Care 'parent engagement in education' measure.</p> <p>This section measures the extent to which students feel that their parents are engaged in aspects of their educational experience.</p> <p>Example Questions:</p> <ul style="list-style-type: none"> - How often do your parents, or the person who cares for you help with homework when you ask? - How often do your parents, or the person who cares for you go to activities for parents at school? 	



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