



Financial Benefits Review

Transformation Challenge Award (TCA) program

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TCA Interim Financial Benefits Review

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Executive Summary

1.1 Purpose of the Report and Terms of Reference

This is an Interim Financial Benefits Review (FBR) for projects that have been funded by the Transformation Challenge Award (TCA) and are being delivered by Essex Partners. The review only covers those projects funded by the TCA that have financial benefits associated with them in the initial proposal of work. The projects in scope are:

- Domestic Abuse Housing Database
- Domestic Abuse in Health – IDVA project
- Parish Safety Volunteers
- Social Prescription
- Essex Data: Program

The aim of the TCA as set out in the bid documentation is to transform early intervention work for vulnerable adults, children, young people and their families across Essex, delivering cashable benefits of **£27.5m** and an increase in public value of **£43.3m** over 10 years - for a Government investment of **£3.3m**¹.

1.1.1 FBR Objectives

Objective 1: Produce a clear model of how cashable benefits of £27.5 million over 10 years will be delivered, or a revision of expectations if necessary;

Objective 2: Recommend actions to employ with respect to financial benefits delivery in future service provision based on lessons learned.

A report to follow will explore lessons learned from each project and from the TCA Program, and will include TCA component projects outside the scope of this report.

1.2 Methodology

This report is based on the original TCA bid, component project business cases, financial models, and face-to-face meetings and correspondence with project representatives and personnel at Essex County Council (November 2016 - May 2017). Based on these resources, the evaluation team:

- Reviewed each project's business case assumptions and predictions¹;
- Liaised with implementing agencies to gauge project status, question assumptions, and request information;
- Updated measurement and assessment plans as possible/necessary;
- Revised and updated expectations of financial business models using the Manchester New Economy Cost Benefit Analysis calculation tool.

¹ As the TCA bid often differed from a component project's business case, the project business case is always used for review of assumptions.

1.3 Background on Evaluation and Measurement Framework

Based on the initial business case projections, the five projects in scope were projected to deliver total financial benefits with short term cashable savings in the amount of £10,738,389 and long term (over 10 years) cashable savings in the amount of £20,819,866. The actual public value benefits were forecast to have a net present value of £40 million².

This report includes financial benefits estimates and timescales included in the original TCA bid and in each project's original business case, alongside revised financial benefits models and timelines as of June 2017. The report was prepared for the Public Service Reform Unit as a progress summary to enable further planning in the evaluation of these projects.

1.3.1 Short Term Gross Cashable Savings (Original Estimates)

Short term cashable savings were calculated for the original TCA bid based on a variety of public service delivery partners such as the National Health Service (NHS), the Police, and Probation. For most projects, short term savings were to be realised over a 1-2 year period, beginning in Year 2 (2015). The estimate of short term cashable savings for all stake holders for all projects was £10,738,389³. These were broken down as follows⁴ (Table 1):

Table 1. Short Term Gross Cashable Savings according to Beneficiary (Original TCA Bid)

Local Authority	£4,018,148.30
NHS	£3,946,702.16
Police	£365,743.74
Probation	£30,807.31
Courts/Legal aid	£124,834.59
Prisons	£30,842.83
Other CJS	£98,852.08
DWP (AME)	£1,549,850.77
Schools	£0.00
Housing providers	£572,616.99
Total	£10,738,398.77

1.3.2 Long Term Gross Cashable Savings (Original Estimates)

In the original TCA bid it was assumed that continued investment from other sources outside the TCA grant would extend benefits up to 10 years beyond program initiation. The total cashable savings were therefore projected to be £20,819,866⁵, which would be accrued at no estimated additional cost to ECC beyond the original outlay in Year 2 (2015). The total long term cashable savings were broken down per public service authority and then discounted to reflect 2014 values. The estimates were⁶:

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Table 2. Long Term Gross Cashable Savings according to Beneficiary (Original TCA Bid)

Local Authority	£7,232,666.95
NHS	£9,866,755.39
Police	£731,487.48
Probation	£77,018.26
Courts/Legal aid	£312,086.49
Prisons	£77,107.06
Other CJS	£247,130.20
DWP (AME)	£1,631,421.86
Schools	£0.00
Housing providers	£644,194.12
Total	£20,819,867.82

To calculate both short-term and long-term cashable benefits, the following was assumed:

- Optimum bias is 15% for all benefits;
- TCA projects will reduce incidents of domestic violence by 36%;
- TCA projects will have 50% impact on early intervention²;
- TCA projects will have 100% impact on all other areas;
- Rates of retention and engagement by the target population will be 100% in all cases.

1.3.3 Long Term Financial Case

The Manchester New Economy Cost Benefit Analysis Tool was used to calculate long term financial costs and benefits for the entire TCA project. This tool is an Excel workbook with several embedded formulas that allow a Council to set values of variables such as implementation year, number served, and beneficiary. The formulas then automatically project and estimate costs and benefits over the years of interest.

Considering only the 5 component projects under review here, the TCA Bid reflects that the Tool was used to estimate cash benefits beginning in Year 2 (2015) and continuing until Year 10 (2023), in the amount of £3,640,314.48 each year, for a single investment of £3,172,560.50 in Year 2 (2015). Calculations for the future and present financial value of these benefits in the original TCA bid were made by subtracting discounted costs (£3.3 million) from discounted benefits (£27.5 million) using the discount rate of 3.5% advised by the New Economy Cost Benefit Analysis Tool⁷. These calculations generated an estimate of net present long term cashable benefits of £24 million⁸ and are profiled in Table 3⁹.

² The meaning of '50% impact on early intervention' is not clarified in the TCA bid.

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Table 3. Financial Case (Cashable Benefits, Original TCA calculations).

Year	Actual costs		Discounted costs	
	Costs	Benefits	Costs	Benefits
2014	£0	£0	£0	£0
2015	£3,172,560.50	£3,640,314.48	£ 3,061,520.88	£3,512,903.47
2016	£0	£3,640,314.48	£0	£3,389,951.85
2017	£0	£3,640,314.48	£0	£3,271,303.54
2018	£0	£3,640,314.48	£0	£3,156,807.91
2019	£0	£3,640,314.48	£0	£3,046,319.64
2020	£0	£3,640,314.48	£0	£2,939,698.45
2021	£0	£3,640,314.48	£0	£2,836,809.00
2022	£0	£3,640,314.48	£0	£2,737,520.69
2023	£0	£3,640,314.48	£0	£2,641,707.46
Column Total	£3,172,560.50	£32,762,830.33	£ 3,061,520.88	£27,533,022.02
Net Cashable Savings (benefits - costs)		£29,590,269.83		£24,471,501.14

1.3.4 Public Value

The overall public value (cashable savings + non-cashable savings) was estimated in the original TCA bid to have a present value of £43.3 million, which would be achieved with an initial discounted investment of £3.3 million. Calculations for the future and present financial value of these benefits in the original TCA bid were made by subtracting discounted costs (£3.3 million) from discounted benefits (£43.3 million) using the discount rate of 3.5% advised by the New Economy Cost Benefit Analysis Tool¹⁰. These calculations generated an estimate of net present public value of £40 million¹¹. As this Financial Benefits Review is focused on cashable savings only, public value will not be addressed here.

1.4 Revised Financial Benefits

After the TCA bid submission and funding, business cases for each project were submitted and selected. Each business case estimated its short term cashable savings, and these numbers differed from those on which the TCA bid was based. We detail these differences here, comparing business cases to revised expectations first, and then comparing the original TCA bid to revised expectations.

Overall, given the lack of coordination between TCA bid and business case creation and review and progress reported up to now, we note that the cashable benefits figure of £27.5 million over 10 years projected in the TCA bid is unlikely to be achieved. The revised figure is considerably lower (£183,767), as financial benefit projections for the majority of projects have been reduced since their initial conception.

This could also be due to a delayed delivery of the majority of projects, which has resulted in a slower realisation of benefits.

1.4.1 Revised Gross Short Term Financial Benefits - Business Cases

As initial implementation modifies expectations, expected financial benefits have been revised for each of the five component projects. Differences in benefits between project business cases and revised expectations since the business cases were developed are depicted in Table 4. When compared to individual project business cases, revised expectations for financial benefits show a deficit of **£183,767**. That is, new expectations of gross short term financial benefits should be £183,767 less than laid out in the original business cases.

Table 4. Difference in Financial Benefits, Project Business Cases vs. Revised Estimates

Project – Benefits Accrued During First 2-3 Years	Original FB Target in BC	Revised FB Target	Difference in Benefits
Domestic Abuse in Housing Database	£653,000	£638,787	-£14,213
Domestic Abuse in Health	£2,959,000	£2,779,200	-£179,800
Parish Safety Volunteers	£584,207	£574,804	-£9,403
Social Prescription	£2,653,000	£2,652,000	-£1,000
Essex Data Program (Platform + Prototypes)	£0	£20,649	£20,649
Totals	£6,849,207	£6,665,440	-£183,767

1.4.2 Revised Gross Short Term Financial Benefits – Original TCA Bid

It is important to note that the individual project business cases estimated benefits at (sometimes drastically) different levels from the original TCA bid. In almost all cases, the original TCA bid gave a lower estimate of financial benefits than the revised expectations. When comparing this original bid to revised expectations, we therefore note an increase of expected benefits in the amount of **£3,025,126** (Table 5). Figure 3 compares gross short term benefits among the original TCA bid, individual business cases, and revised expectations.

Note also that though the TCA Bid computes total financial benefits to be £10,738,389, the actual sum of cashable benefits for the component parts was only given as £3,640,314 in the bid document. This bid document did not break down costs/benefits according to beneficiary.

Conversely, a breakdown of the £10,738,389 according to beneficiary was given in the Cost Benefit Analysis Tool spreadsheet. This Tool did not break down costs/benefits according to project. Comparing the £3,640,314 component project breakdown to the £10,738,389 beneficiary breakdown, we find a difference of ($£10,738,389 - £3,640,314$) = £7,098,075.

After the TCA Bid received funding, all business cases and revisions were made according to component project, rather than beneficiary. We therefore use the £3,640,314 as the TCA Bid-given number from which to begin calculations and comparisons.

When compared to the original TCA Bid broken down according to project, revised expectations for financial benefits show a surplus of £3,025,126. That is, new expectations of financial benefits should be £3,025,126 more than laid out in the original TCA Bid.

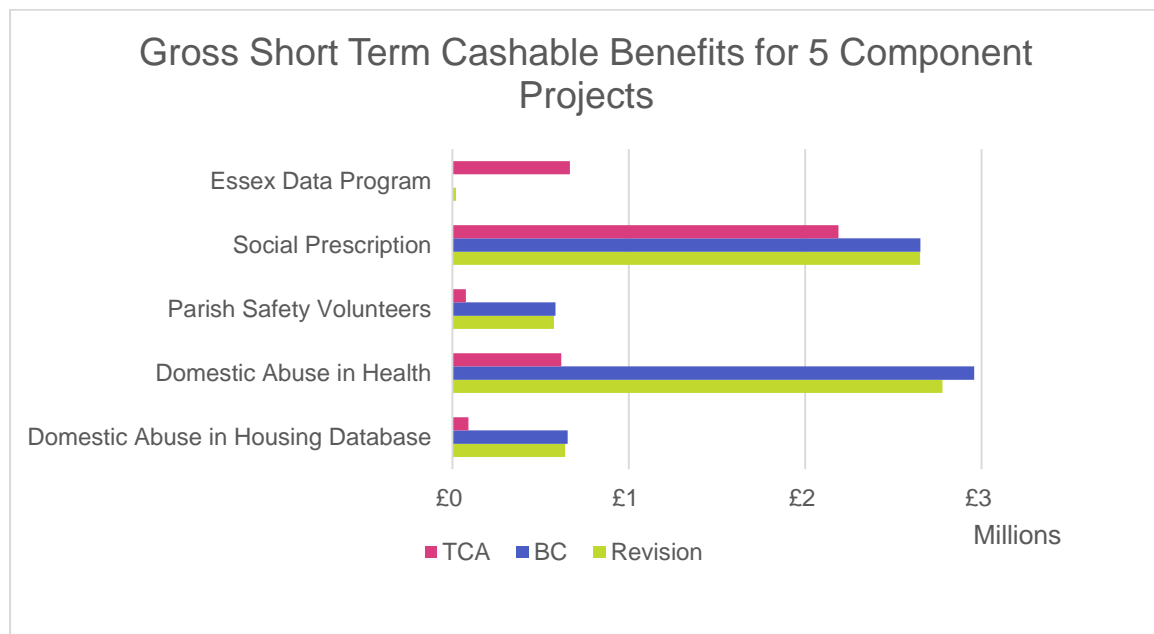
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Table 5. Difference in Financial Benefits, TCA Bid vs. Revised Estimates for Benefits Accrued During First 1-2 Years

Project	TCA Original FB Target	Revised FB Target	Difference
Domestic Abuse in Housing Database	£90,465	£638,787	£548,322
Domestic Abuse in Health	£617,638	£2,779,200	£2,161,562
Parish Safety Volunteers	£75,906	£574,804	£498,898
Social Prescription	£2,189,957	£2,652,000	£462,043
Essex Data Program (Platform + Prototypes)	£666,348	£20,649	-£645,699
Totals	£3,640,314	£6,665,440	£3,025,126

Figure 1. Gross Short Term Financial Benefits in the TCA Bid, the Business Case and latest revisions.

Figure 1. Gross Short Term Financial Benefits in the TCA Bid, the Business Case and latest revisions.



1.4.3 Revised Net Short Term Cashable Savings – Individual Business Cases

To revise net short term cashable savings estimates, we subtract revised costs from revised expected benefits. We detail this in each project review below (summarized here in Table 6).

Table 6. Revised Net Short Term Cashable Savings per Project (compared against original business cases)

Project	Original Net Cashable Savings in BC	Revised Net Cashable Savings	Difference in Net Cashable Savings
Domestic Abuse in Housing Database	£502,900	£488,687	-£14,213
Domestic Abuse in Health	£2,490,000	£2,208,680	-£281,320
Parish Safety Volunteers	£506,663	£497,260	-£9,403
Social Prescription	£1,508,084	£1,820,350	£312,266
Essex Data Program	-£131,000	-£634,551	-£503,551

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Totals	£4,876,647	£4,380,426	-£496,221
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1.4.4 Revised Net Short Term Cashable Savings – Original TCA Bid

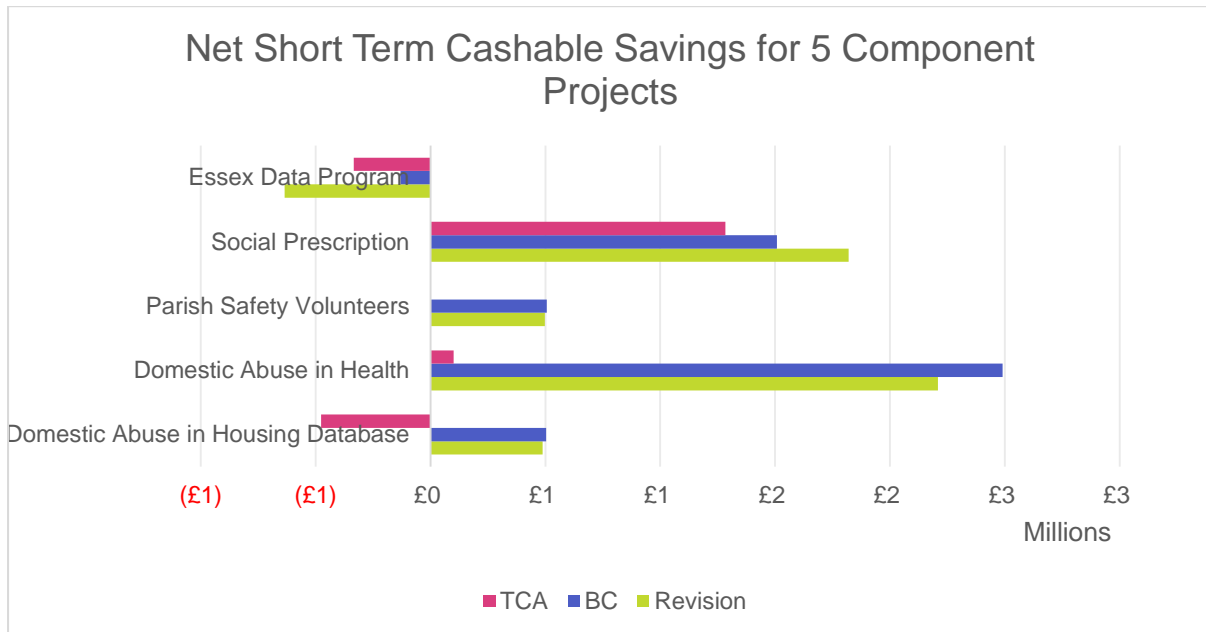
Performing the same operations with the Original TCA Bid estimates yields Table 10.

Table 7. Revised Net Short Term Cashable Savings per Project (compared against TCA Bid)

Project	Original Net Cashable Savings in TCA Bid	Revised Net Cashable Savings	Difference in Net Cashable Savings
Domestic Abuse in Housing Database	-£476,035	£488,687	£964,722
Domestic Abuse in Health	£100,638	£2,208,680	£2,108,042
Parish Safety Volunteers	not calculated	£497,260	not calculated
Social Prescription	£1,282,957	£1,820,350	£537,393
Essex Data Program	-£333,652	-£634,551	-£300,899
Totals	£573,908	£4,380,426	£3,309,258

Comparing estimated net cashable savings across the TCA Bid, individual business cases, and revised expectations yields Figure 2.

Figure 2. Comparing Revised Short Term Net Cashable Savings in Original TCA bid, individual business cases and revised expectations.



1.4.5 Revised Net Long Term Cashable Savings

The Manchester New Economy Cost Benefit Analysis Tool calculates short and long term net benefits by accounting for factors such as the length of project and year of first implementation. Revising expectations of net short and long term benefits thus requires the following revisions:

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1. The year of projects' implementation must be updated from 2015 to 2016.
2. Due to the change in year of implementation, benefits are not expected to begin accruing until 2017. The estimate therefore includes 7 years of benefits (2017-2023), rather than 9 (2015-2023).
3. Costs and benefits revised as reported above.

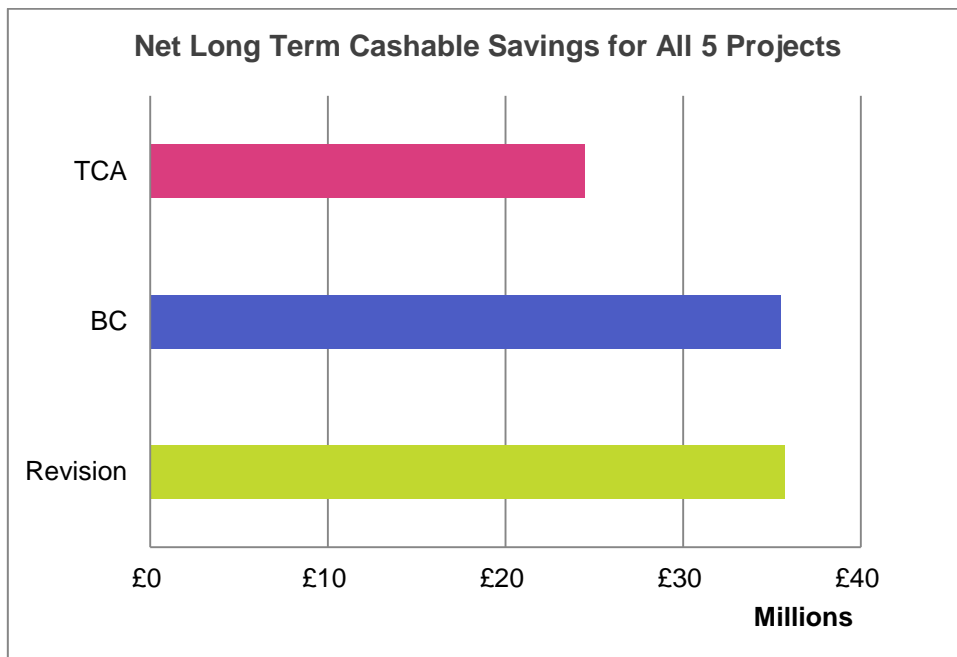
These changes result in long term cashable savings estimates as shown in Table 8. We include for comparison the original TCA Bid estimates, and the estimates the component business cases generate when plugged into the Cost Benefit Analysis Tool.

Table 8. Recalculated Net Long Term Cashable Savings

	TCA Bid	Business Cases	Revision
Implementation Year	2015	2016	2016
Benefits Accrual	2015-2023	2017-2023	2017-2023
Net Discounted Cashable Savings	£24,471,501.14	£35,501,133.52	£35,764,404.07

Comparing estimated net cashable savings across the TCA Bid, individual business cases, and revised expectations yields Figure 3.

Figure 3 Comparing Revised Long Term Net Cashable Savings in Original TCA bid, individual business cases and revised expectations.



1.5 Observations

We note various points raised by our review. Specifically:

Lack of coordination between TCA bid and business case creation/review.

As Figures Figure 1, Figure 2, and Figure 3 demonstrate, there are large differences between expected financial benefits in the TCA bid v. the individual project business cases. Without documentation, we cannot assess whether these differences were acknowledged at the time of business case review and acceptance. We have no record of explicit attempts to resolve expected benefits between individual business cases and the original TCA bid.

It is not possible to know, measure or calculate actual financial benefits.

All figures given here are calculated with estimates recommended by the Manchester New Economy (MNE) Model. In some cases we can measure the financial benefits, but in others the model is considering elements that are not being evaluated or measured. Evaluation models have been designed to be achievable, asking what data we can get within the resource envelope we have, and as such do not attempt to measure everything set out in the model. The MNE model gives estimates of items such as the cost of arrest, the cost of re-housing, and the cost of productivity loss due to injury. Though we can revise estimates based on time frames and certain explicit costings, we cannot know precisely what all the financial benefits are because we are not attempting to validate the costs assigned by the Model.

The nature of a pilot often means it is not possible to accurately predict financial benefits.

As a pilot is a new way of working, financial benefits are predicted without experience of delivery. This will often mean that the assumptions at the time of prediction greatly shift during delivery. The pilot itself provides the information to build a future financial model.

1.6 Recommendations

We recommend that the revisions in expected financial benefits be submitted to partners for formal confirmation, and subsequently formally accepted by the relevant Essex County Council (ECC) personnel and used to generate new expectations. We also recommend the Council institute a change in practice regarding evaluation in the following ways:

Embed program evaluation and metrics as part of planning, implementation and closure.

We encountered difficulty in standardizing evaluation of the projects. Not all projects began with clear evaluation framework and metrics. While most projects had a delivery profile (start date, end date, milestones), profiles were often incomplete. Late starts led to financial benefits delivery for a shorter time frame, but the effects of the shortening were difficult to assess without a clear framework. Measuring financial metrics before, during, and after implementation are critical to determining impact, as well as to updating stake holders and assessing whether implementation could be enhanced mid-project.

Document all assumptions and information sources involved in creating and revising assumptions and metrics in financial benefits models.

Proper documentation contributes to institutional memory. The personnel preparing this report are not the same people who created the original models. Full and informative documentation would ensure continuity of implementation, reduce the need for duplicative work, and allow for comparisons across programs and over time.

Develop template for cost/benefit models across projects/business cases.

Direct comparison is necessary to assess outcomes. Across projects, financial benefits were often calculated with varying inputs, and not always correctly. Some models calculated benefits based on number of users, others based on number of implementers. Ideally, each model would estimate benefits based on both number of users and number of implementers.

Ensure metrics included in cost/benefit projections are measured as projects are implemented.

Many business cases included opportunity costs or risk costs in their estimates. These costs are real and represent work that could be directed toward a different project/program. Yet the personnel working on the projects have not kept track of the resources used. This behaviour makes it impossible to assess whether estimates are accurate, to update projections appropriately, and to truly assess whether targets have been met.

Standardize and disseminate a set of acceptable processes and methodologies for evaluating impact and outcomes.

Each component project has used a different means of designing, measuring, and analysing its activities. We realise different projects beget different types of results, and assert that it is possible for there to be a variety of approved methodologies available. Moving forward, it would be helpful to have a common pool of resources and tools enabling each project to choose an appropriate methodology while still allowing comparison across projects.

Endeavour to implement projects according to sound research principles, including randomization and phased roll-outs.

To truly prove a project's impact, the geography receiving the project should be compared to a geography that does not receive the project. Both areas should have measurements taken before and after project implementation. **Assessing these measures is the only way to state unequivocally that changes in the project area are due to the project, rather than to random changes in society.** If an intervention is designated to be given to all areas of a population, these measurements can be obtained by rolling out the project in different areas over time and taking measurements throughout the rollout period in all areas.

2 Interim Financial Benefits Review: the TCA Projects

2.1 Domestic Abuse in Housing Database (DA HDB) project

2.1.1 About the Project

The main aim of this project was to procure and implement a Housing Database System whereby relevant agencies could catalogue domestic abuse incident details and provide early intervention services to support victims and their families. The fully implemented project was expected to:

- Streamline and co-ordinate information sharing with and by housing partners;
- Co-ordinate services to improve victim's well-being;
- Improve access to safer accommodation;
- Increase support and security to reduce the need for victim relocation;
- Reduce need for victims to access Police, Health, and Statutory services;
- Reduce duplication of support services;
- Inform design and provision of future services.

The database has been designed to provide 'real time' information on known victims across agencies. It is intended that the database will transform information sharing by:

- Making coordinated response standard practice;
- Monitoring responses to identify where resources are deployed and inform future provision;
- Providing a portal to share Good Practice, policies, referral forms, leaflets and victims option pathways, and to aid standardisation of approach across the county.

2.1.2 Timescales

The grant was transferred to Chelmer Housing Group to procure and implement the system. Delays were incurred in this process for logistical reasons relating to the MOU, staff changes and decisions regarding the data administrator. Engagement issues with EHO (Essex Housing Officers Group) have caused further delay in the implementation process. We compare timescales between business case and revision in Table 9.

Table 9. Original v. Revised Timescales, Domestic Abuse in Housing Database

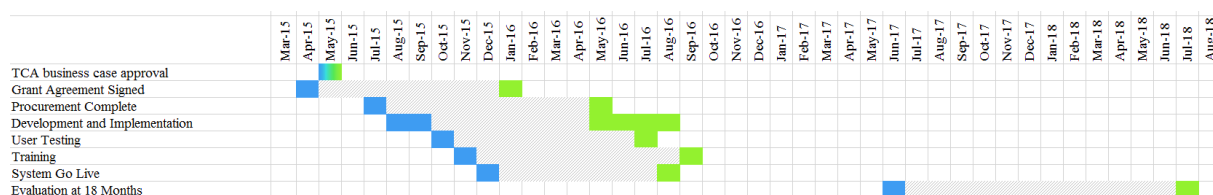
Abridged milestones from original BC	Original Dates (May 2015) ^[i]	Revised Timescales (May 2017)
TCA business case approval	May 2015	May 2015
Grant Agreement Signed	April 2015	January 2016
Procurement Complete	July 2015	May 2016
Development and Implementation	Aug-Sept 2015	May - Aug 2016
User Testing	October 2015	July 2016
Training	November 2015	September 2016
System Go Live	December 2015	August 2016
Evaluation at 18 Months	June 2017	July 2018

Figure 4 presents a timeline of the original versus the revised timescales. Where timelines have remained the same, we have denoted this with a graded (blue to green) box in the

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diagram below. We have also represented the difference between the original and revised timescales with a grey graded colour for ease of reference.

Figure 4. Original and Revised Timescales, Domestic Abuse in Housing Database



2.1.3 Costs

Table 10. Original BC v. Revised Costs, Domestic Abuse in Housing Database

Costs	Original BC (May 15) 12,13	Revised (Jun 17)	Difference
Overall Costs	£150,100	unchanged	£0

Table 11. Original TCA Bid v. Revised Costs, Domestic Abuse in Housing Database

Costs	TCA Bid (Sept 2014)	Revised (Jun 17)	Difference
Overall Costs	£566,500	£150,100	£416,400

2.1.4 Cashable Financial Benefits

Table 12. Original BC v. Revised Cashable Financial Benefits, Domestic Abuse in Housing Database

Benefits	Original BC (May 15) ¹⁴	Revised (Jun 17) ¹⁵	Difference
Cashable Financial Benefits	£653,000 ¹⁶	£638,787 ¹⁷	-£14,213

Table 13. Original TCA Bid v. revised cashable financial benefits, Domestic Abuse in Housing Database

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ¹⁸	Difference
Cashable Financial Benefits	£90,465	£638,787 ¹⁹	£548,322.00

2.1.5 Net Cost Avoidance Benefits

Table 14. Original BC v. Revised Net Cost Avoidance Benefits, Domestic Abuse in Housing Database

Benefits	Original BC (May 15) Subtracting benefits - costs ²⁰	Revised (Jun 17) Subtracting benefits - costs ²¹	Difference
Cost Avoidance Benefits	£502,900 ²²	£488,687 ²³	-£14,213

Table 15. Original TCA Bid v. Revised Net Cost Avoidance Benefits, Domestic Abuse in Housing Database

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ²⁴	Difference
Net Cost Avoidance Benefits	-£476,035 ²⁵	£488,687	£964,722

2.1.6 Financial Benefit Assumptions

Table 16. Original v. Revised Assumptions, Domestic Abuse in Housing Database

Assumptions (May 15) ²⁶	Revisions (Jun 17) ²⁷
Housing agencies and partners will engage in information sharing.	unchanged
Agencies will sign up to use the database.	unchanged
Housing resource is funded in JDATT.	unchanged

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Improved and coordinated support and guidance will reduce the number of victims relocating due to Domestic Abuse.	unchanged
The best option for victims is to keep them in their homes, provided they are safe.	unchanged
Costs of homelessness to government are calculated based on Shelter (2012).	Calculation of cost avoidance due to voids in the tracking tool has been taken from an estimated average of costs identified by providers across Essex. It does not include rent loss on the empty property as outlined in the SHELTER report.
not mentioned	Creating new private sector tenancies avoidance costs in the tracking tool have been calculated based on an estimate from Southend BC.

2.1.7 Summary of progress against timeline and evaluation of benefits

The grant was transferred to Chelmer Housing Group to procure and implement the system. Delays were incurred in this process for a number of logistical reasons relating to the MOU, staff changes and decisions regarding the data administrator. Engagement issues with EHO (Essex Housing Officers Group) have caused further delay in the implementation process.

The evaluation was not scoped at the start of the project but was being put in place at the time of writing. The financial modelling was adjusted as part of this process to reflect data actually coming through the data base.

2.2 Domestic Abuse in Health (DA Health) project

2.2.1 About the Project

In 2014 in Essex, there were over 35,000 victims of domestic abuse living with more than 16,000 children.²⁸ More than £16m²⁹ was spent by health in Essex on supporting only the one in ten victims designated as high-risk cases. Domestic Abuse can cause significant suffering and costs before Police are made aware of the situation. Victims of domestic abuse can be identified in health settings up to two years earlier, offering the potential to prevent future risk, harm, and cost. This TCA project thus employs 8 Independent Domestic Violence Advisors (IDVAs). This project extends previous piloting of IDVAs within acute hospitals, focusing on all levels of risk³⁰.

The main aim of this project was to acquire and support 8 new IDVAs, placed in hospitals around the county. SafeLives were commissioned to undertake an evaluation of current service provision to victims of domestic abuse in Essex health settings (findings attached at Appendix D), and best practice from outside the county.

The fully implemented project was expected to³¹:

- Implement a pilot program to improve case finding and support across health settings;
- Evaluate pilot program success;
- Ensure the Health sector is confident and competent to navigate victims through domestic abuse support services.

2.2.2 Timescales

The original business case for Domestic Abuse interventions in Health Settings was amended via a Change of Control before delivery commenced. The Change would provide funds for the Domestic Abuse Health Lead post and MARAC Posts. These costs had been assumed as opportunity costs in the original BC, but due to other demands on resources the case could not be made in CCGs to prioritise funding for this purpose. To fund these key posts the IRIS strand³ was dropped from delivery.

Following the Change of Control decision a series of changes in staffing have created significant delays on starting the IDVA program, which at the time of writing was due to commence 31 May.

Table 17. Original v. Revised Timescales, Domestic Abuse in Health

Abridged milestones from original Business Case	Original Timescales in Business Case (Nov 15)^[i]	Business case change of control (June 16)	Actual Timescales (Jun 17)
TCA Steering Group Approval	Nov 2015		November 2015
Funds transferred to CCG	Nov 2015		November 2016
Invitations to apply to provide service issued	Dec 2015	End July 2016	October 16 (IDVA service) May 17 (training champion program)

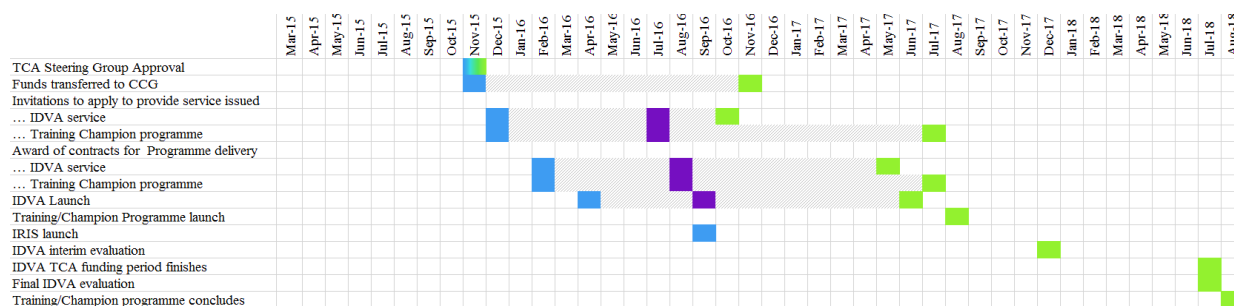
³ IRIS is a national programme that enables a network of care providers within GP surgeries to identify, refer and support victims.

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Award of contracts for Program delivery	Feb 2016	Mid Aug 2016	May 17 (IDVA service) July 17 (training champion program)
IDVA Launch	1 st April 2016	1 st September 2016	31st May 17
Training/Champion Program launch			August 17
IRIS launch	Sept 2016	Deliverable removed	Deliverable removed
IDVA interim evaluation			December 17
IDVA TCA funding period finishes			July 18
Final IDVA evaluation			July 18
Training/Champion program concludes			August 18

Figure 5 presents a timeline of the original, interim and revised timescales for this project. Where timelines have remained the same, we have denoted this with a graded (blue to green) box in the diagram below. We have also represented the difference between the original, interim and revised timescales with a grey graded colour for ease of reference. Milestones dropped or introduced at a later stage are noted by the absence a grey shaded area.

Figure 5. Original, Interim and Revised Timescales, Domestic Abuse in Health



2.2.3 Costs

Table 18. Original BC v. Revised Costs, Domestic Abuse in Health

Costs	Original BC (Jun 2015)	Revised (Jun 17) ³²	Difference
Overall Costs	£469,000	£570,520	-£101,520

Table 19. Original TCA Bid v. Revised Costs, Domestic Abuse in Health

Costs	TCA Bid (Oct 14)	Revised (Jun 17) ³³	Difference
Overall Costs	£517,000	£570,520	-£53,520

2.2.4 Cashable Financial Benefits

Table 20. Original BC v. Revised Cashable Financial Benefits, Domestic Abuse in Health.

Benefits	Original BC (Oct 15) ³⁴	Revised (Jun 17)	Difference
Cashable Financial Benefits	£2,959,000 ³⁵	£2,779,200 ⁴³⁶	-£179,800

⁴ Confidence intervals were also given in the revised estimate. For parsimony they are not reported here.

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Table 21. Original TCA Bid v. revised cashable financial benefits, Domestic Abuse in Health.

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ³⁷	Difference
Cashable Financial Benefits	£617,638	£2,779,200 ⁵³⁸	£2,161,562

2.2.5 Net Cost Avoidance Benefits

Table 22. Original BC v. Revised Net Cost Avoidance Benefits, Domestic Abuse in Health

Benefits	Original BC (May 15) Subtracting benefits - costs ³⁹	Revised (Jun 17) Subtracting benefits - costs ⁴⁰	Difference
Net Cost Avoidance Benefits	£2,490,000	£2,208,680	-£281,320

Table 23. Original TCA Bid v. Revised Net Cost Avoidance Benefits, Domestic Abuse in Health

Benefits	TCA Bid (Sept 2014) ⁴¹	Revised (Jun 17) Subtracting benefits - costs	Difference
Net Cost Avoidance Benefits	£100,638	£2,208,680	£2,108,042

2.2.6 Financial Benefit Assumptions

Table 24. Original v. Revised Assumptions, Domestic Abuse in Health

Assumptions (Oct 15) ⁴²	Revisions (Jun 17)
Timescale for intervention (in months) = 12	Unchanged
Number of Hospitals impacted = 3	Unchanged
Number of IDVAs per hospital = 2	7 ⁴³
IDVA caseload per annum = 75	50
Average success rates of IDVA intervention = 59%	unchanged ⁴⁴
Health costs and savings occur as a victim's use of health services change due to cessation of abuse. The following assumptions have been made to understand the costs of domestic abuse ⁴⁵ : <ul style="list-style-type: none"> • GP visits averaged at 3 additional visits compared to an average person, and would require future prescriptions. • Sexual health services reduced once the abuse stopped. • Wounding treatment costs reduced once abuse stopped. • Children Accident & Emergency (A&E) costs reduced to nil when the abuse stops. • Mental Health services likely to be on going despite having the support of an IDVA. 	Cessation of abuse is determined by many factors, not just the IDVA service, such as criminal justice outcomes (i.e. perpetrator in custody), perpetrator engagement with intervention and prevention services (DA projects), civil or criminal protective orders. The model assumes that all causality in cessation of cases treated by an IDVA can be attributed to the IDVA intervention.
Wider societal benefits generated by IDVA activity are not included in the model.	Unchanged
IDVA savings associated with the total 450 victims will be released throughout the 24 months after engagement. Within the calendar year of 2016/17 there will be £147,000 savings, within 17/18 £339,000 savings would be made, £157,000 would be made in 18/19.	Financial savings are based on expected service use levels after victims have been supported by IDVAs, which will be some time into the 12 months of the project (women are supported for up to 12 weeks by an IDVA). This gives us less than a year to 'see' cost-savings, but the costs we have in the initial costings are based on a full year.
Costs and savings associated with IRIS are from Devine <i>et al</i> (2012).	IRIS has been eliminated from this project.

⁵ Confidence intervals were also given in the revised estimate. For parsimony they are not reported here.

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Success rate is not defined for the IRIS intervention, so savings are based on the increased disclosure rate evidenced in the study.	IRIS has been eliminated from this project.
IRIS savings based on population reach per person, the actual reach will be dependent on the GP participation and the number of registered users within that area.	IRIS has been eliminated from this project.
There are no benefits directly attributable to the training activity as this is an enabler to the end benefits.	Unchanged
Unit costs are based on the assumptions in the original bid which were based on the New Economy model.	Unchanged

2.2.7 Summary of progress against timeline and evaluation of benefits

The original business case for Domestic Abuse interventions in Health Settings was amended via a Change of Control before delivery commenced, to provide funds for the Domestic Abuse Health Lead post and MARAC Posts. These costs had been assumed as opportunity costs in the original BC, but due to other demands on resources the case could not be made in CCGs to prioritise funding for this purpose. In order to fund these key post the IRIS strand was dropped from delivery (IRIS is a nationally evidenced based program which enables a network of healthcare professionals within GP surgeries to identify, refer and support victims of domestic abuse). Following the Change of Control decision a series of changes in staffing have meant that there have been significant delays on starting the IDVA program.

The evaluation will be led by ECC I&I team but the focus is on the IDVA program only and does not extend to the effectiveness of champion program or the MARAC resourcing model. The collection of data for the evaluation has been embedded in the contract with the supplier of the service but the data that will be collected does not cover the full extent of the assumptions in the financial model.

2.3 Parish Safety Volunteers (PSV) project

2.3.1 About the Project

Essex County Fire & Rescue Service (ECFRS) and Essex Police (EP) collaborate with local authorities on this project. Volunteers are trained by ECFRS and EP, and work in partnership with the boundaries of parish councils. They deliver targeted Home Safety visits, providing both fire safety and crime reduction advice in the home.

The main goals of this project are to:

- Recruit, screen and train a corps of volunteers to deliver targeted home safety visits;
- Work with existing Local Area Coordinators, Community Builders and partners to identify homes most at risk from fire and crime;
- Increase local engagement opportunities for ECFRS and EP;
- Reduce risk to fire and crime from parish homes.

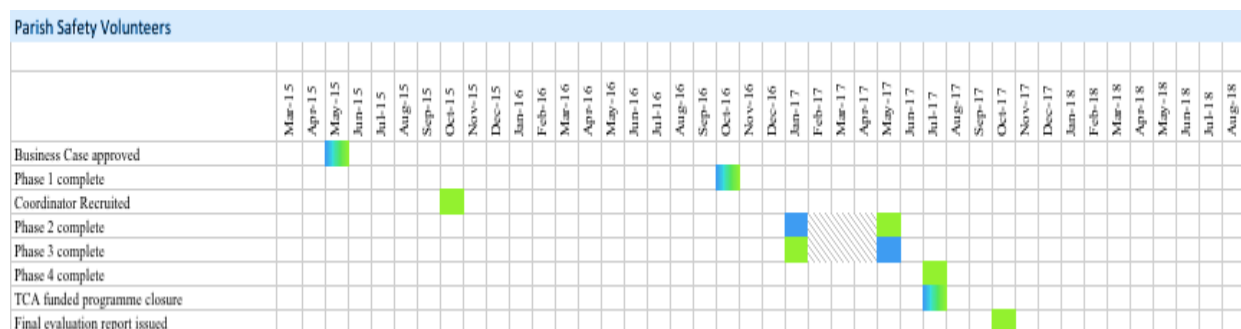
2.3.2 Timescales

The PSV project was quickly mobilised after BC agreement due to strong sponsorship. The recruitment of a dedicated coordinator added to the capacity to deliver the project. The anticipated recruitment, training and delivery cycle has not manifested in the way envisioned in the BC due to the need to be more flexible to allow for training to be resourced whilst not delaying the progress of recruited volunteers. The project is also being shaped into the new Home Safety offer from Essex County Fire and Rescue Service which has impacted how it has been delivered but this ensures its future beyond the TCA funding.

Table 25. Original v. Revised Timescales, Parish Safety Volunteers

Abridged milestones from original BC	Original Dates (May 15) ^[i]	Revised (Jun 17)
Business Case approved, funding agreement signed, funds released	May 2015	May 2015
Phase 1 Recruitment, Training and Delivery complete	Oct 2016	Oct 2016
Coordinator Recruited	NA	Oct 2015
Phase 2 Recruitment, Training and Delivery complete	Jan 2017	May 2017
Phase 3 Recruitment, Training and Delivery complete	May 2017	Jan 2017
Phase 4 Recruitment, Training and Delivery complete	NA	Jul 2017
TCA funded program closure	July 2017	July 2017
Final evaluation report issued	NA	Oct 2017

Figure 6. Original and Revised Timescales, Parish Safety Volunteers



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2.3.3 Costs

Table 26. Original v. Revised Costs, Parish Safety Volunteers

Costs	Original BC (May 15) ⁴⁶	Revised (Jun 17) ⁴⁷	Difference
Overall Costs	£77,544	£77,544	£0

Note that no explicit costs for this program were mentioned in the original TCA Bid document (Sept 2014), therefore a comparative table between the TCA bid Costs and the Revised costs is not included.

2.3.4 Cashable Financial Benefits

Table 27. Original BC v. Revised Cashable Financial Benefits, Parish Safety Volunteers

Benefits	Original BC (May 15) ⁴⁸	Revised (Jun 17) ⁴⁹	Difference
Cashable Financial Benefits	£584,207 ⁵⁰	£574,804 ⁵¹	-£9,403

Table 28. Original TCA Bid v. Revised Cashable Financial Benefits, Parish Safety Volunteers

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ⁵²	Difference
Cashable Financial Benefits	£75,906	£574,804 ⁵³	£498,898

2.3.5 Net Cost Avoidance Benefits

Table 29. Original BC v. Revised Net Cost Avoidance Benefits, Parish Safety Volunteers

Benefits	Original BC (May 15) Subtracting benefits - costs ⁵⁴	Revised (Jun 17) Subtracting benefits - costs ⁵⁵	Difference
Net Cost Avoidance Benefits	£506,663	£497,260	-£9,403

Note that no explicit costs for this program were mentioned in the original TCA Bid document (Sept 2014), therefore net cost avoidance benefits comparative table for TCA bid and the Revised costs can't be calculated.

2.3.6 Financial Benefit Assumptions

Table 30. Original v. Revised Assumptions, Parish Safety Volunteers

Assumptions (Aug 16)	Revisions (Jun 17) ⁵⁶
Aim is to reduce domestic burglaries by 5% (fires) and 10% (burglaries) within targeted parishes ⁵⁷ .	Aim is to reduce by 2.5% and 5%, respectively.
Assumptions in calculating benefits: 2 Volunteers per parish 240 Visits per parish ⁵⁸ 1 Burglary avoided per parish 36 Parish coverage 60% optimism bias applied Fiscal Cost per Burglary £1,482 ⁵⁹ Fiscal cost of domestic fire is £51,129 ⁶⁰ 5% domestic fire incidence per parish ⁶¹	Assumptions in calculating benefits: 2 Volunteers per parish 120 Visits per parish 1 Burglary avoided per 2 parishes 70 Parish coverage 60% optimism bias applied Fiscal Cost per Burglary £1,500 No change in cost per fire 2.5% domestic fire incidence per parish

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Financial benefits are a one off. ⁶²	Benefits reflect costs avoided across partners; Forecast level of intervention activity may vary annually, resulting in fluctuations over time. ⁶³ Longer term budgetary impact of costs avoided will need to be assessed by each partner. ⁶⁴
Financial benefits for reductions in burglaries will be accrued by the partners ⁶⁵ : Victim Services 1.0% Health Services 0.0% Police activity 50.2% Courts and Legal Aid 9.5% Probation 5.9% Prisons 26.9% Other Criminal Justice System 6.5%	unchanged
Financial benefits for the reductions in fire will be accrued 100% by ECFRS.	unchanged
not mentioned	Arbitrary assumption of one fire per house over 5 years, if the house has no PSV visit. ⁶⁶
Benefits to be realised in full from 2015/16.	Delay in start date of the business cases extends profile to realise benefits. ⁶⁷
not mentioned	Costs and benefits identified as "to be confirmed" reflect where the business case has yet to be developed; the values reflect the original Bid position. ⁶⁸
not mentioned	Properties identified as 'at risk' will allow access to the Parish Safety Volunteer.
not mentioned	Ability to recruit and retain the full complement of PSVs.
not mentioned	Demand is similar across parishes.
not mentioned	Evidence base will be strong enough to leverage funding for project sustainability.
not mentioned	Delivery targets will be met in full.

2.3.7 Summary of progress against timeline and evaluation of benefits

The PSV project was quickly mobilised after BC agreement due to strong sponsorship. The recruitment of a dedicated coordinator added to the capacity to deliver the project. The anticipated recruitment, training and delivery cycle has not manifested in the way envisioned in the BC due to the need to be more flexible to allow for training to be resourced whilst not delaying the progress of recruited volunteers. The project is also being shaped into the new Home Safety offer from Essex County Fire and Rescue Service which has impacted how it has been delivered but this ensures its future beyond the TCA funding.

The modelling assumptions were reviewed to reflect the fact that fewer volunteers have been recruited but they operate over a wider number of parishes than predicted. The evaluation of financial benefits will be reported at the end of the project.

2.4 Social Prescription (SP) project

2.4.1 About the Project

Social prescribing (SP) is a mechanism linking individuals with early interventions and prevention support in the community. SP can prepare for the future and improve results⁶⁹:

- Increasing an individual's control and independence, bringing more confidence, more personalisation and a better outcome;
- Increasing the role of the citizen in supporting others;
- Integrating work within and across sectors to increase early interventions and decrease service use.

The overarching objectives of SP in all localities are⁷⁰:

- To improve the health and wellbeing of individuals through early intervention, and reduce dependency on public sector services;
- To increase the role and capability of the voluntary and community sector in providing support for an individual's needs, and in mobilising communities to support care needs;
- To build a more integrated approach between health and social care and its engagement with the Voluntary and Community Sector.

Each of 7 localities (West Essex – West, Castle Point and Rochford – CPR, Basildon and Brentwood – BB, Mid Essex – Mid, North East Essex – NE) has a slightly different implementation approach, based on local community needs⁷¹.

It is intended that ECC will work with University College London in evaluating the broad range of potential outcomes from social prescribing⁷².

2.4.2 Timescales

TCA funding was used in some CCG areas to enhance or continue existing approaches to social prescription and in others to initiate this service. This impacted how quickly the CCG area was able to effectively bid for the money and mobilise their social prescription model leading to a delay in the period of releasing funding and starting delivery. This is reflected in when each project used all their TCA funding.

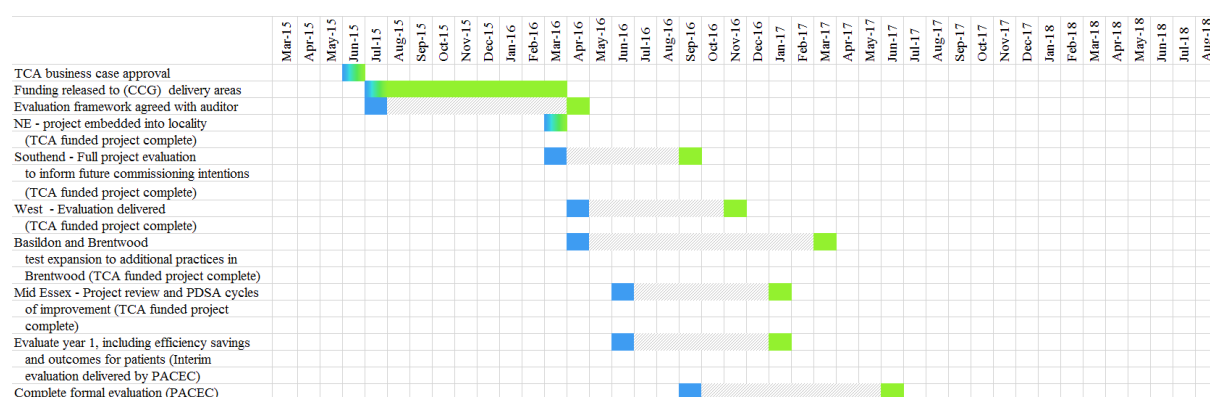
Table 31. Original Timescales, Social Prescription

Abridged milestones from original BC	Original Dates (Jun 15) ^[i]	Revised (Jun 17)
TCA business case approval	June 2015	June 2015
Funding released to (CCG) delivery areas	July 2015	July 2015 - March 2016
Evaluation framework agreed with UCL	July 2015	April 2016 (PACEC as the evaluation deliverers not UCL)
NE - project embedded into locality (TCA funded project complete)	March 2016	March 2016
Southend - Full project evaluation to inform future commissioning intentions (TCA funded project complete)	March 2016	Sept 2016
West - Evaluation delivered (TCA funded project complete)	April 2016	November 2016

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Basildon and Brentwood - test expansion to additional practices in Brentwood (TCA funded project complete)	April 2016	March 2017
Mid Essex - Project review and PDSA cycles of improvement (TCA funded project complete)	June 2016	January 2017
Evaluate year 1, including efficiency savings and outcomes for patients (Interim evaluation delivered by PACEC)	June 2016	January 2017
Complete formal evaluation (PACEC final report)	September 2016	June 2017

Figure 7. Original and Revised Timescales, Social Prescription



2.4.3 Costs

Table 32. Original BC v. Revised Costs, Social Prescription

Costs	Original BC (Jun 15) <small>73, 74, 75, 76</small>	Revised (Jun 17) ⁷⁷	Difference
Overall Costs	£1,144,916	£831,650	£313,266

Table 33. Original TCA Bid v. Revised Costs, Social Prescription

Costs	TCA Bid (Sep 2014)	Revised (Jun 17) ⁷⁸	Difference
Overall Costs	£907,000	£831,650	£75,350

2.4.4 Cashable Financial Benefits

Table 34. Original BC v. Revised Cashable Financial Benefits, Social Prescription

Benefits	Original BC(May15) ⁷⁹	Revised (Jun 17) ⁸⁰	Difference
Cashable Financial Benefits	£2,653,000 ⁸¹	£2,652,000 ⁸²	£-1,000

Table 35. Original TCA Bid v. Revised Cashable Financial Benefits, Social Prescription

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ⁸³	Difference
Cashable Financial Benefits	£2,189,957	£2,652,000	£462,043

2.4.5 Net Cost Avoidance Benefits

Table 36. Original BC v. Revised Net Cost Avoidance Benefits, Social Prescription

Benefits	Original BC(May15) Subtracting benefits- costs ⁸⁴	Revised (Jun 17) Subtracting benefits - costs ⁸⁵	Difference
Net Cost Avoidance Benefits	£1,508,084	£1,820,350	£312,266

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Table 37. Original TCA Bid v. Revised Net Cost Avoidance Benefits, Social Prescription

Benefits	TCA Bid (Sept 2014) ⁸⁶	Revised (Jun 17) Subtracting benefits - costs	Difference
Net Cost Avoidance Benefits	£1,282,957	£1,820,350	£537,393

2.4.6 Financial Benefit Assumptions

Table 38. Original v. Revised Assumptions, Social Prescription

Assumptions (Jun 15) ⁸⁷		Revised (Jun 17) ⁸⁸	
Calculations based on number of service users.		Calculations based on incidents avoided.	
Target number of services users:		Target number of services users:	
Basildon and Brentwood	1,200	Basildon and Brentwood	1,200
Castle Point and Rochford	3,640	Castle Point and Rochford	1,040
North East Essex & Colchester	888	North East Essex & Colchester	999 ⁸⁹
Mid Essex	405	Mid Essex	315
West Essex	1600	West Essex	1600
Total	7,733	Total	5,154

2.4.7 Summary of progress against timeline and evaluation of benefits

TCA funding was used in some CCG areas to enhance or continue existing approaches to social prescription and in others to initiate this service. This use impacted on how quickly the CCG area was able to effectively bid for the money and mobilise their social prescription model leading to a delay in the period of releasing funding and starting delivery. This is reflected in when each project used all their TCA funding.

Due to the size of investment and complexity of this project an external evaluator was procured to deliver an evaluation of the work. The primary evaluation outcome is a financial benefit measure. The initial financial modelling was built on costs avoidance assumptions made by each CCG areas. However the method used by PACEC does not mirror this.

2.5 Essex Data Program (formerly DPaRS)

2.5.1 About the Project

The Essex Data program seeks to pilot a way of safely sharing and matching partner data to enable it to be used to predict risk to provide insight to support a shift to early intervention. Issue based prototypes to address system wide challenging issues make up the pilot. The first prototype will be school readiness in the Ward of Vange in the Borough of Basildon. Information will be used to inform commissioning or intervention decisions so children in the community are school ready and have the best start in life⁹⁰.

The overall project objectives are to generate⁹¹:

- A safe and effective data sharing platform;
- An effective Predictive Risk Profiling capability;
- Evidence that successful integrated strategic planning and delivery has occurred;
- Delivery of outcomes from original bid for vulnerable children and their families
- Identification of opportunities for standardisation of data collection;
- Early intervention financial benefits through avoidance or demand reduction.

The project is broken down in the following phases:

- **Phase 1 – Analysis and design:** Investigated current project across Essex and the UK. Determine whether an authority has progressed with this type of project, to avoid unnecessary development. Assess early thoughts that we are leading edge and no authority has yet produced a solution
- **Phase 1a – Procurement:** Identify the most suitable solution to meet requirements and adapt to future potential needs, which will be flexible and scalable.
- **Phase 2 – Implementation:** Undertake predictive risk profiling and strategic planning for Vange. Develop appropriate strategy to deliver outcomes for young children and their families within their community.
- **Phase 3 – Learning, Scaling Up:** Developing additional prototypes to enable the scaling up of predictive risk modelling. to more accurately identify trends and issues commissioners and practitioners need to review and potentially act upon.
- **Phase 4 – Business as usual:** Embed methodologies, systems, processes and procedures. This will not include the technical infrastructure but will identify any ongoing staffing resources, governance arrangements and funding implications.

2.5.2 Timescales

To date the delivery of the ED program has been split into procuring a technical platform, implementing the platform around the Vange New Generations (school readiness) prototype, and using the insight to deliver change in Vange.

At the time of this review procurement was complete and activities to implement the risk model for school readiness in Vange and use this alongside the Insight for Innovation work to make changes in Vange were underway.

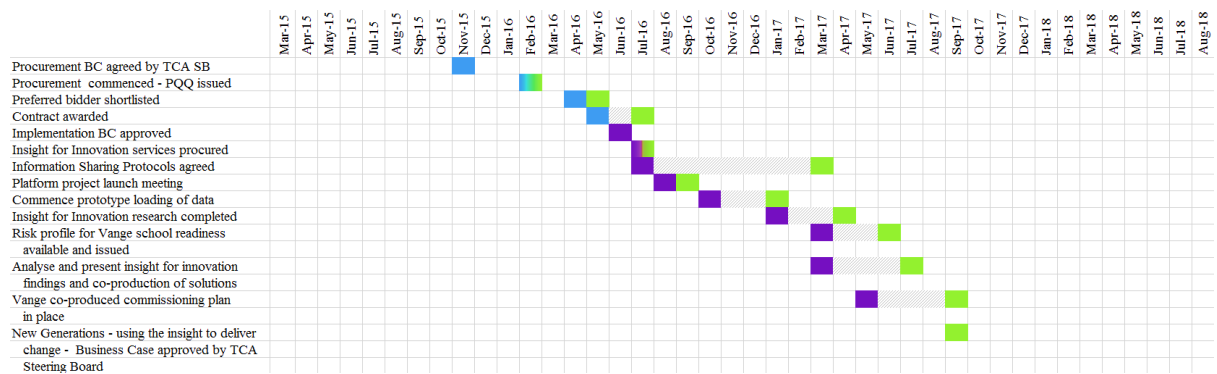
Delays in the procurement timeline had been incurred largely due to the challenges around defining the scope and requirements, data that would be used and agreeing how this would be shared. Delays in the implementation timeline had been incurred due to the challenges in delivering a reliable and meaningful risk profiles.

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Table 39. Original v. Revised Timescales, Essex Data Program

Abridged milestones from original BC	Original BC (Nov 15) ^[i]	Revised Timescales (Jun 17) ^[ii]
Procurement Business case agreed by TCA Steering Board	November 2015	
Procurement process commenced - PQQ issued	February 2016	February 2016
Preferred bidder shortlisted	April 2016	May 2016
Contract awarded	May 2016	July 2016
	Implementation BC (June 16)	Revised Timescales (Jun 17)
Implementation Business Case approved by TCA Steering Board	June 2016	
Insight for Innovation services procured	July 16	July 16
Information Sharing Protocols agreed	July 16	March 17
Platform project launch meeting	August 2016	Sept 2016
Commence prototype loading of data	October 2016	January 2017
Insight for Innovation research completed	Jan 2017	April 2017
Risk profile for Vange school readiness available and issued	March 2017	June 2017
Analyse and present insight for innovation findings and co-production of solutions	March 2017	July 2017
Vange co-produced commissioning plan in place	May 2017	September 2017
New Generations - using the insight to deliver change - Business Case approved by TCA Steering Board		September 2017

Figure 8. Original, Interim and Revised Timescales, Essex Data Program



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2.5.3 Costs

Table 40. Original BC v. Revised Costs, Essex Data Program

Costs	OriginalBC(Nov15) ⁹²	Revised (Jun 17) ⁹³	Difference
Costs for Phases 1 to 2 only	£131,000 ⁹⁴	£655,200 ⁹⁵	£524,200

Table 41. Original TCA Bid v. Revised Costs, Essex Data Program

Costs	TCA Bid (Sep 2014) ⁹⁶	Revised (Jun 17) ⁹⁷	Difference
Costs for Phases 1 to 2 only	£1,000,000	£655,200	-£344,800

2.5.4 Cashable Financial Benefits

Table 42. Original BC v. Revised Cashable Financial Benefits, Essex Data Program

Benefits	OriginalBC(Nov15) ⁹⁸ Phase 1a only	Revised (Jun 17)	Difference
Cashable Financial Benefits	£0 ⁹⁹	£20,649 ¹⁰⁰	£20,649

Table 43. Original TCA Bid v. Revised Cashable Financial Benefits, Essex Data Program

Benefits	TCA Bid (Sept 2014)	Revised (Jun 17) ¹⁰¹	Difference
Cashable Financial Benefits	£666,348	£20,649 ¹⁰²	-£645,699

2.5.5 Net Cost Avoidance Benefits

Table 44. Original BC v. Revised Net Cost Avoidance Benefits, Essex Data Program

Benefits	Original BC (May 15) Subtracting benefits - costs ¹⁰³	Revised (Jun 17) Subtracting benefits - costs ¹⁰⁴	Difference
Net Cost Avoidance Benefits	-£131,000	-£634,551	-£503,551

Table 45. Original TCA Bid v. Revised Net Cost Avoidance Benefits, Essex Data Program

Benefits	TCA Bid (Sept 2014) ¹⁰⁵	Revised (Jun 17) Subtracting benefits - costs	Difference
Net Cost Avoidance Benefits	-£333,652	-£634,551	-£300,899

2.5.6 Financial Benefit Assumptions

Table 46. Original v. Revised Assumptions, Essex Data Program

Assumptions (Nov 16) ¹⁰⁶	Revised (Jun 17)
On-going costs will be initiated from September 2016; Funding requested for 2 years of on-going costs to ensure the prototype can be fully implemented, tested, operational and evaluated; On-going costs based on licencing volumes and on-going maintenance costs including support for the data platform and repository; these costs may vary.	unchanged
Costs reflect bid provided by the supplier, based on data and system requirements as set out in the bid; Inclusion of additional data or partners beyond bid requirements may incur additional cost for which further funding would need to be identified; Costs may need review once detailed implementation plan is agreed with supplier.	unchanged
Until detailed discussions with the supplier, costs have a degree of uncertainty with regards to total time and level of resource required for implementation.	unchanged
Final costs will need reassessment following completion of the procurement for the insight for innovation activity.	unchanged

2.5.7 Summary of progress against timeline and evaluation of benefits

To date the delivery of the Essex Data program has been split into procuring a technical platform, implementing the platform around the Vange New Generations (school readiness) prototype, and using the insight to deliver change in Vange. At the time of this review, procurement was complete and activities to implement the risk model for school readiness in Vange and use it alongside the Insight for Innovation work to make changes in Vange were underway.

Delays in the procurement timeline had been incurred largely due to the challenges around defining the scope and requirements, the data that would be used and agreeing how this would be shared. Delays in the implementation timeline had been incurred due to the challenges in delivering a reliable and meaningful risk profile.

The investment in the Essex Data platform procurement and development was premised on a broad capability to share and use data for added insight however the financial benefits have only been modelled for the New Generations prototype, giving a relatively small financial benefit in comparison to the investment. These financial benefits will not be realised until the cohorts of children begin school. The first cohort that could show benefit from this work will begin school in Sept 2018 with data on school readiness available in January 2019. Benefits will continue to accrue as further intakes come through the school system.

The University of Essex are carrying out the evaluation and focus initially will be on non-financial benefits due to the need to demonstrate the value of the program before January 2019.

3 Conclusions and Recommendations

We recommend that the revisions in expected financial benefits be submitted to partners for formal confirmation, and subsequently formally accepted by the relevant Essex County Council (ECC) personnel and used to generate new expectations. We also recommend the Council institute a change in practice regarding evaluation in the following ways:

Embed program evaluation and metrics as part of planning, implementation and closure.

We encountered difficulty in standardizing evaluation of the projects. Not all projects began with clear evaluation framework and metrics. While most projects had a delivery profile (start date, end date, milestones), profiles were often incomplete. Late starts resulted financial benefits delivery for a shorter time frame, but the effects of the shortening were difficult to assess without a clear framework. Measuring financial metrics before, during, and after implementation are critical to determining impact, as well as to updating stake holders and assessing whether implementation could be enhanced mid-project.

Document all assumptions and information sources involved in creating and revising assumptions and metrics in financial benefits models.

Proper documentation contributes to institutional memory. The personnel preparing this report are not the same people who created the original models. Full and informative documentation would ensure continuity of implementation, reduce the need for duplicative work, and allow for comparisons across programs and over time.

Develop template for cost/benefit models across projects/business cases.

Direct comparison is necessary to assess outcomes. Across projects, financial benefits were often calculated with varying inputs, and not always correctly. Some models calculated benefits based on number of users, others based on number of implementers. Ideally, each model would estimate benefits based on both number of users and number of implementers.

Ensure metrics included in cost/benefit projections are measured as projects are implemented.

Many business cases included opportunity costs or risk costs in their estimates. These costs are real and represent work that could be directed toward a different project/program. Yet the personnel working on the projects have not kept track of the resources used. This behaviour makes it impossible to assess whether estimates are accurate, to update projections appropriately, and to truly assess whether targets have been met.

Standardize and disseminate a set of acceptable processes and methodologies for evaluating impact and outcomes.

Each component project has used a different means of designing, measuring, and analysing its activities. We realise different projects beget different types of results, and assert that it is possible for there to be a variety of approved methodologies available. Moving forward, it would be helpful to have a common pool of resources and tools enabling each project to choose an appropriate methodology while still allowing comparison across projects.

Endeavour to implement projects according to sound research principles, including randomization and phased roll-outs.

To truly prove a project's impact, the area receiving the project should be compared to an area that does not receive the project. Both areas should have measurements taken before and after project implementation. **Assessing these measures is the only way to state unequivocally that changes in the project area are due to the project, rather than to**

random changes in society. If an intervention is designated to be given to all areas of a population, these measurements can be obtained by rolling out the project in different areas over time and taking measurements throughout the rollout period in all areas.

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		the 1 for private tenancies would be social housing																	
Total						£28,983	£45,759	£68,127	£84,903	£84,903	£84,903	£84,903	£84,903	£84,903	£84,903	£84,903	£652,287		

Key assumptions

Creating new social tenancies - admin costs only			£477
Creating new private sector tenancies			
100% of Bond / rent in advance deposit			£1,500
Source: This is based on an estimate from Southend BC			
Homeless Applications	Unit Cost	No. of Units	Total
B&B pw x 6 wk average	£335	6	£2,010
Homeless decision	£375	1	£375
Discharge of duty	£230	1	£230
Total			£2,615
Source: The costs of Homeless decision has been taken from the SHELTER report			
Voids			£2,500
Source: This figure has been taken from an estimated average of costs identified by providers across Essex. It does not include rent loss on the empty property as outlined in the SHELTER report.			

4.2 List of abbreviations

BAU	Business as usual
BB	Basildon and Brentwood
BC	Business Case
CCG	Clinical Commissioning Group
CMA	Cabinet Member Action
CPR	Castle Point and Rochford
DA	Domestic Abuse
DA HDB	Domestic Abuse Housing Database
DBS	Disclosure and Barring Service
DPaRS	Data Sharing Platform and Risk Stratification Tool
ECC	Essex County Council
ECFRS	Essex County Fire & Rescue Service
ED	Essex Data
EP	Essex Police
EPB	Essex Police Board?
GDP	Gross Domestic Product
GP	General Practitioner
IDVA	Independent Domestic Violence Advocates
IRIS	Integrated Records Information System
I&I	Insight and Intelligence, ECC
IT	Information Technology
ITT	Invitation to Tender
JDATT	Joint Domestic Abuse Triage Team
MARAC	Multi-Agency Risk Assessment Conference
NA	not applicable
NE	North East Essex
NK	not known
PAM	Patient Activation Measures
PDSA	Plan-Do-Study-Act

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PIP	Personal Independence Planners
PQQ	Pre-Qualification Questionnaire
PRMT	Predictive Risk Modelling Theory?
PSV	Parish Safety Volunteers
SC	? (p.13)
SP	Social Prescription
TCA	Transformation Challenge Award
UAT	User Acceptance Testing?
UCL	University College London
VCS	Voluntary Community Sector

5 References

- Shelter. (2012, Jan). *Research briefing: Immediate costs to government of loss of home*. Shelter policy library, available from http://england.shelter.org.uk/__data/assets/pdf_file/0003/415596/Immediate_costs_to_government_of_losing_a_home.pdf, accessed 07/03/2017.
- Devine, Spencer, Eldridge et al (2012). Cost effectiveness of identification and referral to improve Safety (IRIS), a domestic violence training and support program for primary care: a modelling study based on an randomised control trial, accessed October 2015 via; http://www.blizard.qmul.ac.uk/images/PCTU_files/Devine_et_al_IRIS_cost_effectiveness_BMJ_2012.pdf

6 Notes

¹ source: "\\TCA evaluation\TCA Programme Evaluation Framework liz track changes.docx" source: TCA Programme Evaluation Framework liz track changes.docx" source: "\\TCA evaluation\TCA Programme Evaluation Framework liz track changes.docx" source: TCA Programme Evaluation Framework liz track changes.docx

² source: "\\TCA evaluation\2014-09-28 Sept - TCA Bid FINAL SUBMISSION GS.docx"

³ source: "\\TCA evaluation\2014-09-28 Sept - TCA Bid FINAL SUBMISSION GS.docx"

⁴ source: "\\TCA evaluation\140725_GM_CBA_Tool_-_Version_4_1(1) ECC bid v4 – Final.xlsm"

⁵ source: "\\TCA evaluation\2014-09-28 Sept - TCA Bid FINAL SUBMISSION GS.docx"

⁶ source: "\\TCA evaluation\140725_GM_CBA_Tool_-_Version_4_1(1) ECC bid v4 – Final.xlsm"

⁷ New Economy CBA Tool: <http://www.neweconomymanchester.com/our-work/research-evaluation-cost-benefit-analysis/cost-benefit-analysis/cost-benefit-analysis-guidance-and-model>.

⁸ source: "\\TCA evaluation\2014-09-28 Sept - TCA Bid FINAL SUBMISSION GS.docx"

⁹ source: "\\TCA evaluation\140725_GM_CBA_Tool_-_Version_4_1(1) ECC bid v4 – Final.xlsm"

¹⁰ New Economy CBA Tool: <http://www.neweconomymanchester.com/our-work/research-evaluation-cost-benefit-analysis/cost-benefit-analysis/cost-benefit-analysis-guidance-and-model>.

¹¹ source: "\\TCA evaluation\2014-09-28 Sept - TCA Bid FINAL SUBMISSION GS.docx"

¹² The individual housing database business case was drafted and submitted to the PSRU to inform the modelling for the TCA bid, but has not been through any governance in its own right.

¹³ source: "\\DA Housing Database\DA HDB Business case Final v1.0.docx"

¹⁴ Source: DA HDB Business case Final v1.0.docx

¹⁵Source: "\\DA Housing Database\HDB Benefits Map v.0.4.pptx".

Non-financial measures are to be measured/captured where possible within the 18-month evaluation.

¹⁶ Breakdown of the £653,000 cost avoidance benefits, profiled over the three years of the pilot (source: "\\DA Housing Database\DA HDB Business case Final v1.0.docx"):

Impact	Outcome	Cost Avoidance Benefits for housing providers	Estimated Cost Avoidance		
			2015/16	2016/17	2017/18
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Voids avoided	£12,000	£125,000	£150,000
		Homeless applications avoided	£13,000	£131,000	£157,000
		Creation of new private sector tenancies avoided	£2,000	£6,000	£6,000
		Creation of new social tenancies avoided	£2,000	£22,000	£27,000
Co-ordinated response between partners becomes standard practice	* Improved monitoring & audit trail of responses * Ability to identify current resource deployment to direct future provision	Supports the on-going realisation of the above benefits			
Total anticipated Cost Avoidance per annum*			£29,000	£284,000	£340,000

¹⁷ Breakdown of £638,787 cost avoidance benefits profiled over the 3 years of the pilot (source: "\\DA Housing Database\DA in Housing Benefits Summary - 10.04.17 ia notes revised18.xlsx"):

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Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
		Voids minimised saving	£117,500
		Homeless applications saving	£122,905
Voids minimised through planned moves	£2500 per property	£2,500	£287,500
Homeless Applications	£2615 per application	£2,615	£300,725
		Avoidances based on security improvements only	£166
		Creating new social tenancy saving	£79,182
Creating new social tenancies	£477 per new social housing tenancy - assumed total activity less the 1 for private tenancies would be social housing	£477	£50,562
Total			£638,787

The following are totals with or without various options and improvements:

Total (excluding housing options and advice)	£319,587
Security improvements and managed moves total	£213
Cost saving with security improvements and managed moves as multiplier	£1,191,096

Figures are based on a reworked financial model produced by Intelligence and Insights, ECC, and include data to inform a benefits target with actual data from the Housing database (Charlotte Cannon, pc 19/04/2017). While the included cost avoidance figures are reported with a level of confidence, it is likely that should the database be implemented wider over the duration of the project, more financial benefits may be realised overall.

¹⁸Source: "\\DA Housing Database\HDB Benefits Map v.0.4.pptx".

Non-financial measures are to be measured/captured where possible within the 18-month evaluation.

¹⁹ Breakdown of £638,787 cost avoidance benefits profiled over the 3 years of the pilot (source: "\\DA Housing Database\DA in Housing Benefits Summary - 10.04.17 ia notes revised18.xlsx"):

Impact	Cost avoidance	Units (£)	total @ end of year three
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TCA Interim Financial Benefits Review

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²⁰ Source: DA HDB Business case Final v1.0.docx

²¹ Source: "\\DA Housing Database\HDB Benefits Map v.0.4.pptx".

Non-financial measures are to be measured/captured where possible within the 18-month evaluation.

²² Net computed as (£653,000 – £150,100) = £502,900.

²³ Net computed as (£638,787 - £150,100) = £488,687.

Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refugees and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
		Voids minimised saving	£117,500
		Homeless applications saving	£122,905
Voids minimised through planned moves	£2500 per property	£2,500	£287,500
Homeless Applications	£2615 per application	£2,615	£300,725
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The following are totals with or without various options and improvements:

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Figures are based on a reworked financial model produced by Intelligence and Insights, ECC, and include data to inform a benefits target with actual data from the Housing database (Charlotte Cannon, pc 19/04/2017). While the included cost avoidance figures are reported with a level of confidence, it is likely that should the database be implemented wider over the duration of the project, more financial benefits may be realised overall.

²⁴ Source: "\\DA Housing Database\HDB Benefits Map v.0.4.pptx".

Non-financial measures are to be measured/captured where possible within the 18-month evaluation.

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²⁵ Net computed as (£90,465- £566,500) = -£476,035.

²⁶ source: "\\DA Housing Database\DA HDB Business case Final v1.0.docx"

²⁷ source: "\\DA Housing Database\DA in Housing Benefits Summary - 10.04.17 ia notes revised18.xlsx"

²⁸ SafeLives research 2014 - review of domestic abuse provision in Essex. Estimates based on the population and prevalence of domestic abuse in the UK overall,

²⁹ 3,000 MARAC cases within the whole of Essex on average costing health £4,700 on service use before MARAC (£14.1m), see breakdown in SafeLives report at Appendix D. The remaining cost relates to MARAC and supporting attendance.

³⁰ source: "\\DA In Health Evaluation\Domestic Abuse - Casefinding and Support from Health - Report to ECC 22.10.2015.docx"

³¹ source: "\\DA In Health Evaluation\Domestic Abuse - Casefinding and Support from Health - Report to ECC 22.10.2015.docx"

³² source: "\\DA In Health Evaluation\2016-06-23 June - TCA Change Control Notice - DA Health v1.1.docx "

³³ source: "\\DA In Health Evaluation\SafeLives CBA IDVA and IRIS.xlsx"

³⁴ Source: "\\DA In Health Evaluation\2015-10-22 Oct - Domestic Abuse - Casefinding and Support from Health - Safe Lives Report to ECC.docx"

³⁵ Breakdown of the £2,959,000 cost avoidance benefits profiled over 2 years of the program duration:

Service Use	Cost pre-IDVA, per client per year	Cost saving post-IDVA, per client per year	Cost saving per IDVA, 75 clients, 1 st year	Cost saving per IDVA, 75 clients, 2 nd year	Total Cost savings, 1 IDVA for 2 years
GP	£138	£0	£0	£0	£0
Prescriptions	£157	£0	£0	£0	£0
Sexual Health Services	£817	£355	£80,000	£80,000	£159,900
Children at A&E	£294	£101	£22,800	£22,800	£45,600
Other wounding	£1,526	£664	£149,400	£149,400	£298,700
Serious Wounding	£1,297	£310	£69,700	£69,700	£139,400
Mental Health	£499	£0	£0	£0	£0
Health Total Saving	£4,728	£1,430	£321,800	£321,800	£643,500
Other services:					
Police service	£2,940	£1,734	£390,300	£390,300	£780,500
Criminal Justice *	£4,227	£2,494	£561,200	£561,200	£1,122,400
Family Courts	£268	£158	£35,600	£35,600	£71,300
Housing	£235	£138	£31,100	£31,100	£62,300
Children's services	£374	£221	£49,700	£49,700	£99,300
Other service Totals	£8,044	£4,746	£1,067,900	£1,067,900	£2,135,700
Grand Total	£12,772	£6,176	£1,389,700	£1,389,700	£2,779,200

The reason for the difference between this and earlier calculation is thanks to more recent findings by SafeLives. Based on work by SafeLives, this business case includes benefits across a far wider range of services and assumes higher prevalence of service usage in relation to IDVAs.

The recommended number of frontline practitioners required to support victims is based on the number of 'visible victims', which refers to the victims who would be likely to seek or engage support for the domestic abuse. This is an estimate based on SafeLives' national MARAC dataset and Insights dataset. Note that half of high risk cases are visible (approximately 50,000 victims at high risk discussed at MARACs in England and Wales compared with an estimated 100,000 victims at high risk, Quarterly MARAC data, SafeLives 2014), One third of victims disclose to professional services; Crime Survey England and Wales 2013/14, ONS. source: "\\DA In Health Evaluation\2015-10-22 Oct - Domestic Abuse - Casefinding and Support from Health - Safe Lives Report to ECC.docx"

³⁶ Breakdown of the £2,779,200 net cost avoidance (benefit) savings, including health, profiled over 2 years from 1st April 2016 (health only and cross services) (source: "\\DA In Health Evaluation\SafeLives CBA IDVA and IRIS.xlsx"):

Activity Profile				
Activity profile	75		225	450
Success Rate	59%*		133	266
Benefits*				
GP		£0	£0	£0

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Prescriptions		£0	£0	£0	£0
Sexual Health Services		£355	£80,000	£80,000	£159,900
Children at A&E		£101	£22,800	£22,800	£45,600
Other wounding		£664	£149,400	£149,400	£298,700
Serious Wounding		£310	£69,700	£69,700	£139,400
Mental Health		£0	£0	£0	£0
Health Total Saving		£1,430	£321,800	£321,800	£643,500

Other services;					
Police service		£1,734	£390,300	£390,300	£780,500
Criminal Justice system (excl police)		£2,494	£561,200	£561,200	£1,122,400
Family Courts		£158	£35,600	£35,600	£71,300
Housing		£138	£31,100	£31,100	£62,300
Children's services		£221	£49,700	£49,700	£99,300
Totals		£4,746	£1,067,900	£1,067,900	£2,135,700
Net Cost / (Benefit) including health			£1,389,700	£1,389,700	£2,779,200

Note that:

- The £643,500 savings associated with the total 450 victims will be released throughout the 24 months after they are engaged with. Within the calendar year of 2016/17 there will be £147,000 savings, within 17/18 £339,000 savings would be made, £157,000 would be made in the following year (18/19).
- Success rate is assumed within cost savings (benefits), with the success rates weighted based on the type of case (complex/chronic, or standard etc). The current cessation of abuse for Hospital based IDVAs is 59% (Themis research update September 2015, currently unpublished)
- Assumption that a health based IDVA will be safe to work with a caseload of 75, assuming part of their caseload will be working with some non high risk cases. A safe annual caseload for engaged cases is 65 for an Idva only working with high risk cases
- Cost savings (benefits) are based on Sylvia Walby 2004 Cost of domestic abuse. They reflect the direct cost savings to health services, and are weighted to reflect service use of high risk victims of domestic abuse. The costs are from the Economic cost of crime 2004
- The savings include costs associated with the Idva intervention and other costs such as health attendance and contribution to the MARAC process.

³⁷Source: "\DA Housing Database\HDB Benefits Map v.0.4.pptx".

Non-financial measures are to be measured/captured where possible within the 18-month evaluation.

³⁸ Breakdown of the £2,779,200 net cost avoidance (benefit) savings, including health, profiled over 2 years from 1st April 2016 (health only and cross services) (source: "\DA In Health Evaluation\SafeLives CBA IDVA and IRIS.xlsx"):

Activity Profile				
Activity profile	75	225	225	450
Success Rate	59%*	133	133	266

Benefits*					
GP		£0	£0	£0	£0
Prescriptions		£0	£0	£0	£0
Sexual Health Services		£355	£80,000	£80,000	£159,900
Children at A&E		£101	£22,800	£22,800	£45,600
Other wounding		£664	£149,400	£149,400	£298,700
Serious Wounding		£310	£69,700	£69,700	£139,400
Mental Health		£0	£0	£0	£0
Health Total Saving		£1,430	£321,800	£321,800	£643,500

Other services;					
Police service		£1,734	£390,300	£390,300	£780,500
Criminal Justice system (excl police)		£2,494	£561,200	£561,200	£1,122,400
Family Courts		£158	£35,600	£35,600	£71,300
Housing		£138	£31,100	£31,100	£62,300
Children's services		£221	£49,700	£49,700	£99,300
Totals		£4,746	£1,067,900	£1,067,900	£2,135,700

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Net Cost / (Benefit) including health		£1,389,700	£1,389,700	£2,779,200
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Note that:

- The £643,500 savings associated with the total 450 victims will be released throughout the 24 months after they are engaged with. Within the calendar year of 2016/17 there will be £147,000 savings, within 17/18 £339,000 savings would be made, £157,000 would be made in the following year (18/19).
- Success rate is assumed within cost savings (benefits), with the success rates weighted based on the type of case (complex/chronic, or standard etc). The current cessation of abuse for Hospital based IDVAs is 59% (Themis research update September 2015, currently unpublished)
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- Cost savings (benefits) are based on Sylvia Walby 2004 Cost of domestic abuse. They reflect the direct cost savings to health services, and are weighted to reflect service use of high risk victims of domestic abuse. The costs are from the Economic cost of crime 2004
- The savings include costs associated with the Idva intervention and other costs such as health attendance and contribution to the MARAC process.

³⁹ Net computed as (£2,959,000 – £469,000) = £2,490,000.

⁴⁰ Net computed as (£2,779,200 – £570,520) = £2,208,680

Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
		Voids minimised saving	£117,500
		Homeless applications saving	£122,905
Voids minimised through planned moves	£2500 per property	£2,500	£287,500
Homeless Applications	£2615 per application	£2,615	£300,725
		Avoidances based on security improvements only	£166
		Creating new social tenancy saving	£79,182
Creating new social tenancies	£477 per new social housing tenancy - assumed total activity less the 1 for private tenancies would be social housing	£477	£50,562
Total			£638,787

The following are totals with or without various options and improvements:

Total (excluding housing options and advice)	£319,587
Security improvements and managed moves total	£213
Cost saving with security improvements and managed moves as multiplier	£1,191,096

Figures are based on a reworked financial model produced by Intelligence and Insights, ECC, and include data to inform a benefits target with actual data from the Housing database (Charlotte Cannon, pc 19/04/2017). While the included cost avoidance figures are reported with a level of confidence, it is likely that should the database be implemented wider over the duration of the project, more financial benefits may be realised overall.

⁴¹ Net computed as (£617,638 - £157,000) = £100,638.

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⁴² source: "\\DA In Health Evaluation\2015-10-22 Oct - Domestic Abuse - Casefinding and Support from Health - Safe Lives Report to ECC.docx"

⁴³ Total of 7 operational IDVAs over the 3 hospitals. There is also an overall supervisor but they are not included as they will not have a case load.

⁴⁴ The success rate of the intervention is defined as the likelihood the intervention will lead to the cessation of domestic violence in the service user and therefore the linked assumption that they will then stop using other services and therefore the cost is avoided. In the original financial modelling this was based on Themis research September 2015 which indicated The IDVA interventions would lead to the cessation of abuse for 59% of service users.

In the financial modelling review in February 2017 the success rate was not adjusted because there was no availability of data considered more accurate however the following issues with the figure were noted:

a) The 59% cessation in abuse is based on figures after 4 months of ceasing IDVA contact only: we do not know whether victims experience abuse after these four months and therefore start to use services again.

b) There is no reflection that IDVA service users may initially increase their use of health services and therefore costs go up before they are avoided.

⁴⁵ Assumptions are outlined within Walby 2004, Cost of Domestic Abuse, further cost assumptions are taken from Lesley Curtis, The Unit Costs of Health and Social Care 2008, PSSRU and The Economic and Social Costs of Crime against individuals and households 2003/04

⁴⁶ source: "\\Parish Safety Volunteers\20150428_BusinessCasev3embedsdeleted.docx"

⁴⁷ Source personal communication – Andrea MacAlister, PSV programme.

⁴⁸ Source: "\\Parish Safety Volunteers\20150428_BusinessCasev3embedsdeleted.docx"

⁴⁹ Source: "\\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx"

⁵⁰ Breakdown of the £584,207 cost avoidance forecast benefits for fires and burglaries in all parishes (source: \ Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx)

Reduction of Burglaries in a dwelling – Forecast Benefits

Outcome	Benefits	Key Assumptions:	Predicted Incidence of Burglary Per Parish	Assumed 5% Reduction as a result of the intervention *	Fiscal Cost Avoided per Burglary	Total Number of Parishes Impacted	Total Potential Benefit	Optimism Bias	Total Benefit
				5%	£		£		£
Reduced incidents of crime - burglary in a dwelling	Reduced police, other criminal justice costs, health costs per actual crime (N.B. Use multipliers to convert from recorded crime or convictions)	2 Volunteers per parish 240 Visits per parish 1 Burglary avoided per parish 36 Parish coverage 60% optimism bias applied Fiscal Cost per Burglary £1,482	20	1	1,482	36	53,357	60%	32,014

⁵¹ Breakdown of the £574,804 cost avoidance forecast benefits for fires and burglaries in all parishes (source: "\\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx")

Reduction of Burglaries in a dwelling – Forecast Benefits (Mar 2017)

* Note: Assumed reduction as a result of the intervention taken from number of domestic burglaries in an average parish over past 3 years (by pop size and mix of properties) x 70

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Outcome	Benefits	Key Assumptions:	Predicted Incidence of Burglary Per Parish	Assumed 5% Reduction as a result of the intervention *	Fiscal Cost Avoided per Burglary	Total Number of Parishes Impacted	Total Potential Benefit	Optimism Bias	Total Benefit
				2.5%	£		£		£
Reduced incidents of crime - burglary in a dwelling	Reduced police, other criminal justice costs, health costs per actual crime (N.B. Use multipliers to convert from recorded crime or convictions)	2 Volunteers per parish 120 Visits per parish 1 Burglary avoided per 2 parishes 70 Parish coverage 60% optimism bias applied Fiscal Cost per Burglary £1,500	20	0.5	1,500	70	52,513	60%	31,508

Total benefit split by partner

Other CJS	2,361
NHS	-
Police	15,812
Courts and Legal Aid	2,986
Probation	1,875
Prisons	8,473
Total	31,508

Reduction in Domestic Fires

* Note: Assumed reduction as a result of the intervention taken from number of domestic fires in an average parish over past 3 years (by pop size and mix of properties) x 70

** Note: Full benefit attributed to the Fire Authority - no costs identified for other partners

Outcome	Benefits	Key Assumptions	Predicted Incidence of Fires Per Parish	Assumed 5% Reduction as	Fiscal Cost Avoided per Fire	Total Number of Parishes	Total Potential Benefit	Optimism Bias	Total Benefit **
				5%	£		£		£
Reduced number of domestic fires	Savings related to response to fires, damage and health impact	2 Volunteers per parish 120 Visits per parish 1 Fires avoided per 4 parishes impacted 70 Parish coverage 60% optimism bias applied Fiscal Cost per Fire £51,743	5	0.25	51,743	70	905,495	60%	543,297

Total for domestic fires and dwelling burglaries

Total Cost Avoided through reduction in burglaries and domestic fires	£ 574,804
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⁵² Source: “\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx”

⁵³ Breakdown of the £574,804 cost avoidance forecast benefits for fires and burglaries in all parishes (source: “\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx”)

Reduction of Burglaries in a dwelling – Forecast Benefits (Mar 2017)

* Note: Assumed reduction as a result of the intervention taken from number of domestic burglaries in an average parish over past 3 years (by pop size and mix of properties) x 70

Outcome	Benefits	Key Assumptions:	Predicted Incidence of Burglary Per Parish	Assumed 5% Reduction as a result of the intervention *	Fiscal Cost Avoided per Burglary	Total Number of Parishes Impacted	Total Potential Benefit	Optimism Bias	Total Benefit
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Outcome	Benefits	Key Assumptions	Predicted Incidence of Fires Per Parish	Assumed 5% Reduction as	Fiscal Cost Avoided per Fire	Total Number of Parishes	Total Potential Benefit	Optimism Bias	Total Benefit **
				5%	£		£		£

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Total for domestic fires and dwelling burglaries

Total Cost Avoided through reduction in burglaries and domestic fires	£ 574,804
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⁵⁴ Net computed as (£584,207 – £77,544) = £506,663.

⁵⁵ Net computed as (£574,804 – £3,911) = £570,893.

Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
		Voids minimised saving	£117,500
		Homeless applications saving	£122,905
Voids minimised through planned moves	£2500 per property	£2,500	£287,500
Homeless Applications	£2615 per application	£2,615	£300,725
		Avoidances based on security improvements only	£166
		Creating new social tenancy saving	£79,182
Creating new social tenancies	£477 per new social housing tenancy - assumed total activity less the 1 for private tenancies would be social housing	£477	£50,562
Total			£638,787

The following are totals with or without various options and improvements:

Total (excluding housing options and advice)	£319,587
Security improvements and managed moves total	£213
Cost saving with security improvements and managed moves as multiplier	£1,191,096

Figures are based on a reworked financial model produced by Intelligence and Insights, ECC, and include data to inform a benefits target with actual data from the Housing database (Charlotte Cannon, pc 19/04/2017). While the included cost avoidance figures are reported with a level of confidence, it is likely that should the database be implemented wider over the duration of the project, more financial benefits may be realised overall.

⁵⁶ source: “\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx”

⁵⁷ We do not know what the basis is for these % reductions and are seeking to confirm if they are informed by some other data or whether they are estimates and whether they are accepted by the current delivery team. source: “\Parish Safety Volunteers\PSV financial benefits review.xlsx”

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It is unclear how these percentages were originally calculated, or what the baseline was and what the basis for proposing them was. Regardless, enough elements have changed (such as the # of visits per parish being drastically reduced; and the fact that the PSVs were originally perceived to be as well-connected community leaders, but in practice they weren't) so that we need to revise our estimates of the percentage reduction.

(source: "\\Parish Safety Volunteers\2016-12-07 Dec - PSV mtg_Essex_Fire_Rescue.docx")

⁵⁸ Understanding when visits first started in each parish/over what period they have been operational will assist monitoring. (source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁵⁹ These figures are taken from the Manchester New Economy model but we need to understand whether they are accepted by the current delivery team - the cost for burglaries seems low? (Source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁶⁰ These figures are taken from the Manchester New Economy model but we need to understand whether they are accepted by the current delivery team - the cost for burglaries seems low? (Source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁶¹ These figures relate to the high-risk households in the 36 parishes in scope but a breakdown of these figures by parish could help analysis. (source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁶² Premise that by raising awareness and installing window locks and smoke alarms etc. that number of burglaries and domestic fires will be reduced - to what extent is this saving recurring without extending the number of houses visited? (source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁶³ source: "\\TCA Evaluation\TCA Benefits Summary_20170223.xlsx"

⁶⁴ source: "\\TCA Evaluation\TCA Benefits Summary_20170223.xlsx"

⁶⁵ These are splits defined by the Manchester New Economy model. Do partners implicated understand that delivery of this program is supporting them to avoid costs. It would be interesting to know if there is there any correlation between predicted savings and actual budgets. (source: "\\Parish Safety Volunteers\PSV financial benefits review.xlsx")

⁶⁶ source: "\\Parish Safety Volunteers\2016-12-07 Dec - PSV mtg_Essex_Fire_Rescue.docx"

⁶⁷ source: "\\TCA Evaluation\TCA Benefits Summary_20170223.xlsx"

⁶⁸ source: "\\TCA Evaluation\TCA Benefits Summary_20170223.xlsx"

⁶⁹ source: "\\Social Prescribing\Social Prescription Business Case V4.docx"

⁷⁰ source: "\\Social Prescribing\Social Prescription Business Case V4.docx"

⁷¹ *Approaches by Locality* (source: "\\Social Prescribing\Social Prescription Business Case V4 (2).docx")

West Essex: 2 Personal Independence Planners will be placed within multi-disciplinary teams in Epping, Harlow and Uttlesford covering a total of 15 GP surgeries. The pilot will cover 50% of West Essex surgeries and a further roll to all 38 practices will follow with 2 PIPs in each district by March 2017.

Castle Point and Rochford: 2 social prescribers will work alongside the emerging Primary Care locality hubs across 26 GP practices in Canvey Island, Rochford, Rayleigh and Benfleet & Hadleigh. The program will be rolled out in 3 phases with the intention of sustainable long term arrangements for 26 practices to be in place by 2017.

Basildon and Brentwood: Basildon, Billericay and Wickford CVS will pilot a scheme in GP hubs in Pitsea (Dipple) and Laindon aligning with CCG plans for Care Coordinators and Named Accountable Professional Teams. 2 Social Prescription Navigators will receive up to 10 referrals daily from 2 groups of participating GP practices (6). In 2016 Phase 2 will target a practice group in Brentwood.

Southend: A Social Prescriber with a team of volunteers will run alongside the pilot Patient Activation Measures (PAM) initiative. A broad selection of opportunities will be identified and the cost of prescriptions will be agreed on a tariff basis where appropriate.

Mid Essex: the program will contribute to a model of self-care / self-management as part of the Mid Essex Living Safe and Well Program for Chelmsford, Braintree and Maldon. It will use a variety of organisations to deliver including the three local authority council services, community housing providers, community pharmacy, three GP practices, leisure providers, voluntary sector organisations.

North East Essex: In Colchester Borough a combined social prescribing and community building team led by Colchester CVS will increase community capacity through volunteer recruitment, neighbourhood development and multi-agency partnership working enabling people to better self-manage:

TCA Interim Financial Benefits Review

- The NECCG and Who Will Care program, My Social Prescription, will offer outreach in Accident and Emergency and Walk-In Centres for patients, families and carers. Health Champions will align with other projects, i.e. Community Matrons, Virtual Ward, Time Banks and Community Agents.
- The community builder will recruit 15 neighbourhood volunteers to become community leaders and identify projects and people within their communities that can address need and build resilience. They will link to the Community Hub at Colchester Library and the Community Resilience Group, a multi-agency partnership that responds to need at times of potential crisis.

Tendring: In Tendring District a Mental Health Hub led by the Citizen Advice Bureau and piloted as part of the Tendring Community Builder program will be established. It will aim to keep people with mental illness health resilient, and offer a single point of access for referral.

⁷² source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx"

⁷³ source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx"

⁷⁴ Breakdown of some of the direct costs of £1,100,00 is included below (source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx") Note that numbers do not add up to the total figure above.

Personnel (within contracts for service)	£391,017
Contract for service (west)	£200,000
Volunteer recruitment & Training	£41,000
Marketing	£43,100
Community engagement	£3,700
Office costs	£26,880
Management of GP based "hubs"	£38,000
Travel	£11,900
IT/comms	£13,000
Prescription Tariff (cost of activity, Southend only)	£40,000
Miscellaneous	£13,650
Evaluation in localities	£45,000
County Evaluation	£*40,000

*Evaluation costs are subject to the methodology yet to be costed by UCL, but for planning purposes they are assumed to be in the region of £40,000 for the pilot period.

⁷⁵ Breakdown of the £44,216 other costs forecast, profiled over a year are (adapted from source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx")

0.2 FTE Strengthening Communities Business Lead ⁷⁵	£14,600
0.3 FTE ECC Strengthening Communities Project Manager ⁷⁵	£17,546
Communications Project Support	£12,070
Total	£44,216

⁷⁶ These are to review 7 legal agreements (source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx")

⁷⁷ source: "\\Social Prescribing\\TCA updated benefits_2015-06-24.xlsx"

⁷⁸ source: "\\Social Prescribing\\TCA updated benefits_2015-06-24.xlsx"

⁷⁹ Source: "\\Parish Safety Volunteers\\20150428_BusinessCasev3embedsdeleted.docx"

⁸⁰ Source: "\\Parish Safety Volunteers\\Revised PSV financial benefits summary - March 2017.xlsx"

⁸¹ Breakdown of the £2,653,000 cost avoidance benefits profiled over the remainder of the project duration (source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx"):

Breakdown of the cost avoidance benefits:

By Sector	Cost Avoidance benefits
Health	£1,921,000
Employment and Economy	£437,897
Housing	£123,528
Social Services	£86,712
Multiple sectors	£70,267
Crime	£18,620
Fire	£6,540

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Education	£1,335
Total	£2,665,899

By Locality	Cost Avoidance benefits
West	£380,532
Castle Point and Rochford	£340,776
Basildon and Brentwood	£417,726
North East: Tendering	£808,822
North East: Colchester	£233,387
Southend	£95,031
Mid	£375,762
Total	£2,652,036

⁸² Breakdown of the £2,652,000 cost avoidance benefits profiled over the remainder of the program (source: “\TCA evaluation\TCA Benefits Summary_20170223.xlsx”)

Outcome	Cost Avoidance benefits
Reduced incidents of crime	£89,000
Improved outcomes for Health	£1,909,000
Reduction in homelessness and complex evictions	£123,000
Reduced Social Care requirement	£85,000
Increased employment and economic benefits	£438,000
Other	£8,000
Total	£2,652,000

⁸³ Source: “\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx”

⁸⁴ Net computed as (£2,653,000 – £1,144,916) = £1,508,084.

⁸⁵ Net computed as (£2,652,000 – £831,650) = £1,820,350.

Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
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TCA Interim Financial Benefits Review

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⁸⁶ Net computed as (£2,189,957- £ 907,000) = £1,282,957.

⁸⁷ source: "\\Social Prescribing\\Social Prescription Business Case V4 (2).docx"

⁸⁸ source: "\\Social Prescribing\\2017-03-09_notes on social prescribing_model.docx" (notes from phonecall)

⁸⁹ Note that NE Essex & Colchester did not revise their target up – the figure quoted in the original targets was an error.

⁹⁰ source: "\\Essex Data DPaRS Tool\\DPaRS Implementation Business Case v1.0.docx"

⁹¹ source: "\\Essex Data DPaRS Tool\\enc_TCA New Gens Bus case procurement v1.docx"

⁹² source: "\\Essex Data DPaRS Tool\\enc_TCA New Gens Bus case procurement v1.docx"

⁹³ source: "\\Essex Data DPaRS Tool\\DPaRS Implementation Business Case v1.0.docx"

⁹⁴ Breakdown of £131,000 costs for phase 1 are (source: "\\TCA evaluation\\enc_TCA New Gens Bus case procurement v1.docx"):

Direct Estimated Costs for phase 1a	TCA funding over 1 year
Methods Analyst	£14,500
Project Management	£29,500
Other IS resources, incl. SaaS Technical teams Information governance and TDA	£39,000
Finance	£3,500
Legal	£13,500
TSU Program Manager and support (tbc)	£30,000
Other	£1,000
Total	£131,000

Opportunity Costs Phase 1a	
Partners representation and contributions to the work program	£57,000
Total	£57,000

The budget request is for £131,000, this will account for the procurement and identification of the preferred supplier. The actual request is for £120,500 as we will retain the underspend of £10,500 from the previous phase.

The drawdown of the cost for the system and the implementation / integration will be presented once firm costs are known and the preferred supplier is identified.

The budget of £1.1m relates to the Phase 1, 1a and 2 and any on-going costs will need to be considered and the approach to be agreed during this phase.

Any change in demand relating to the systems identified in this phase will be included in the design of the overarching project system.

⁹⁵ Breakdown of what is included in the £524,200 allocation of costs for Phase 2 of the program is below (source: enc_DPARS Business Case Financials v4.1.xlsx)

Note The sums quoted in the business case (source: DPARS Implementation Business Case v1.0.docx) are wrong, the correct ones are below:

TCA Interim Financial Benefits Review

Summary of the Funding Required to Support the Implementation and Operation of the DPaRS Tool Prototype Phase

	2016/17 £'000	2017/18 £'000	2018/19 £'000	Total £'000
Data Sharing and Risk Stratification Tool Contract Costs:				
One-off Implementation costs	70.0			70.0
On-going costs	47.5	95.0	47.5	190.0
Total Contract Cost for Prototype Period	117.5	95.0	47.5	260.0
Implementation resource costs:				
Programme Manager	35.8			35.8
IS Project Manager	26.4			26.4
IS and Information Governance	41.6			41.6
Provision for Partner costs for extraction, transformation and load of data	50.0			50.0
Other resources (legal, finance etc.)	4.8			4.8
Total Implementation resource costs	158.5			158.5
Contingency Risk	65.7			65.7
Insight for Innovation Procurement and Support	40.0			40.0
Total Funding Required for the DPaRS Implementation Phase	381.7	95.0	47.5	524.2

This request covers an estimate of £524,200 for this phase of the program, amended to reflect an underspend of £2,800 from the previous phase.

- i. The award of contract for the implementation and operation of the Data Sharing Platform and Risk Stratification Tool ('DPaRS') for an initial period of two years at a value of £260,000.
- ii. Implementation and data resources required for the implementation in the sum of £158,500.
- iii. Procurement of services to undertake 'Insight for Innovation' analysis, in the sum of £40,000, which is required in conjunction with DPaRS outputs to deepen community understanding and improve commissioning decisions for the necessary solutions to deliver outcomes in the area of the prototype.
- iv. Contingency of £65,700 to cover any program delivery costs that can be reasonably expected to occur but unknown at this time. This currently includes dealing with possible delays to the implementation, securing any additional data that might be required or managing any one of the other program's key risks captured in Section 7.

The Board also agreed the contingency fund will be held separately from the main budget of the project with authority given to the Program Sponsor, Richard Puleston, to approve its use should one or more of these risks materialise. Should part of or the entire contingency not be required, this must be returned back to the TCA fund or transferred for use on another project as directed by the TCA Steering Board.

⁹⁶ Breakdown of £131,000 costs for phase 1 are (source: "\TCA evaluation\enc_TCA New Gens Bus case procurement v1.docx"):

Direct Estimated Costs for phase 1a	TCA funding over 1 year
Methods Analyst	£14,500
Project Management	£29,500
Other IS resources, incl. SaaS Technical teams Information governance and TDA	£39,000
Finance	£3,500
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TSU Program Manager and support (tbc)	£30,000
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TCA Interim Financial Benefits Review

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The drawdown of the cost for the system and the implementation / integration will be presented once firm costs are known and the preferred supplier is identified.

The budget of £1.1m relates to the Phase 1, 1a and 2 and any on-going costs will need to be considered and the approach to be agreed during this phase.

Any change in demand relating to the systems identified in this phase will be included in the design of the overarching project system.

⁹⁷ source: "\Essex Data DPaRS Tool\DPaRS Implementation Business Case v1.0.docx"

⁹⁸ source: "\Essex Data DPaRS Tool\enc_TCA New Gens Bus case procurement v1.docx"

⁹⁹ For Phase 1, no cashable benefits were envisaged at the time the business case was put together. Note that as this phase it was not envisaged that any cashable benefits could be realised - the intention was rather to progress with the procurement using the business and technical requirements which will fit with the preferred design. This phase will identify the preferred supplier with associated costs for agreement by the Steering board. (source: "\TCA evaluation\enc_TCA New Gens Bus case procurement v1.docx")

¹⁰⁰ Cost savings of £20,649 calculated from the following figures (source: "\Essex Data DPaRS Tool\Risk Stratification Costs and Benefits v1.210.xlsx").

Projection Costs and Savings from FIF Interventions:				
<i>WITHOUT DPaRS insight</i>				
Number of FIF Interventions	FIF Interventions costs	Reduction (50%) in Not School Ready FIF Interventions	Savings in School Readiness with FIF Interventions	Net Results: FIF intervention costs minus savings in school readiness due to FIF interventions
131	-£29,151	65	£68,830	£39,680
<small>1g</small>	<small>1k = [1e] x [1g]</small>	<small>1h = 1g x 0.50</small>	<small>1i = [1c] x [1h]</small>	<small>[1i] - [1k]</small>
<i>WITH DPaRS insight</i>				
Number of FIF Interventions	FIF Interventions costs	Reduction (65%) in Not School Ready FIF Interventions	Savings in School Readiness with FIF Interventions	Net Results: FIF intervention costs minus savings in school readiness due to FIF interventions
131	-£29,151	85	£89,479.52	£60,329
<small>1g</small>	<small>1k = [1e] x [1g]</small>	<small>1i = 1g x 0.65</small>	<small>1j = [1c] x [1i]</small>	<small>[1j] - [1k]</small>

The intervention projections are calculated for 65 children not school ready in the Ward of Vange (estimated), 131 estimated Family Innovation Fund (FIF) interventions based on the Essex Poverty Levels. It is profiled for 65 FIF interventions deemed to be successful in Vange without Essex Data (50%) and 85 FIF interventions deemed successful in the same area with Essex Data (65%). Numbers assume:

- There are 812 children under 5 years of age in the Ward of Vange as the comparison group
- The poverty rate in the area is 16.1% (ECC Figures 2016)
- The cost of getting a child school ready is £1,053 (based on the New Economy Model (1.4))
- The cost of a FIF intervention is £223 (2016 Estimated Costs)

Note: FIF figures have been used to provide a baseline reference to help demonstrate how the availability of additional insight, The ED tool will provide could help increase the effectiveness of interventions. The Family Innovation Fund enables (ECC) to work with its partners in the voluntary and community sector to offer early help and support children, young people and adults. This includes parenting support, counselling and mediation, coaching and mentoring, and the identification of risky behaviours. The projects in the FIF complement existing work going on with families with additional needs to increase their stability and resilience and where possible prevent the need for specialist or intensive interventions.

¹⁰¹ Source: "\Parish Safety Volunteers\Revised PSV financial benefits summary - March 2017.xlsx"

TCA Interim Financial Benefits Review

¹⁰² Cost savings of £20,649 calculated from the following figures (source: "\\Essex Data DPaRS Tool\Risk Stratification Costs and Benefits v1.210.xlsx").

Projection Costs and Savings from FIF Interventions:				
<i>WITHOUT DPaRS insight</i>				
Number of FIF Interventions	FIF Interventions costs	Reduction (50%) in Not School Ready FIF Interventions	Savings in School Readiness with FIF Interventions	Net Results: FIF intervention costs minus savings in school readiness due to FIF interventions
131	-£29,151	65	£68,830	£39,680
<small>1g</small>	<small>1k = [1e] x [1g]</small>	<small>1h = 1g x 0.50</small>	<small>1i = [1c] x [1h]</small>	<small>[1j] - [1k]</small>
<i>WITH DPaRS insight</i>				
Number of FIF Interventions	FIF Interventions costs	Reduction (65%) in Not School Ready FIF Interventions	Savings in School Readiness with FIF Interventions	Net Results: FIF intervention costs minus savings in school readiness due to FIF interventions
131	-£29,151	85	£89,479.52	£60,329
<small>1g</small>	<small>1k = [1e] x [1g]</small>	<small>1l = 1g x 0.65</small>	<small>1m = [1c] x [1l]</small>	<small>[1j] - [1k]</small>

The intervention projections are calculated for 65 children not school ready in the Ward of Vange (estimated), 131 estimated Family Innovation Fund (FIF) interventions based on the Essex Poverty Levels. It is profiled for 65 FIF interventions deemed to be successful in Vange without Essex Data (50%) and 85 FIF interventions deemed successful in the same area with Essex Data (65%). Numbers assume:

- There are 812 children under 5 years of age in the Ward of Vange as the comparison group
- The poverty rate in the area is 16.1% (ECC Figures 2016)
- The cost of getting a child school ready is £1,053 (based on the New Economy Model (1.4))
- The cost of a FIF intervention is £223 (2016 Estimated Costs)

Note: FIF figures have been used to provide a baseline reference to help demonstrate how the availability of additional insight, The ED tool will provide could help increase the effectiveness of interventions. The Family Innovation Fund enables (ECC) to work with its partners in the voluntary and community sector to offer early help and support children, young people and adults. This includes parenting support, counselling and mediation, coaching and mentoring, and the identification of risky behaviours. The projects in the FIF complement existing work going on with families with additional needs to increase their stability and resilience and where possible prevent the need for specialist or intensive interventions.

¹⁰³ Net computed as (£0 – £131,000) = -£131,000.

¹⁰⁴ Net computed as (£20,649 – £655,200) = -£634,551.

Impact	Cost avoidance	Units (£)	total @ end of year three
Increased availability of live data to partners	* Reduction in referral to refuges and the need to relocate victims. * Increased early intervention services available to support victims and families	Expected Activity Profile	£115
		Avoidances based on management moves and mutual exchanges	£47
		Voids minimised saving	£117,500
		Homeless applications saving	£122,905
Voids minimised through planned moves	£2500 per property	£2,500	£287,500
Homeless Applications	£2615 per application	£2,615	£300,725
		Avoidances based on security improvements only	£166
		Creating new social tenancy saving	£79,182

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Creating new social tenancies	£477 per new social housing tenancy - assumed total activity less the 1 for private tenancies would be social housing	£477	£50,562
Total			£638,787

The following are totals with or without various options and improvements:

Total (excluding housing options and advice)	£319,587
Security improvements and managed moves total	£213
Cost saving with security improvements and managed moves as multiplier	£1,191,096

Figures are based on a reworked financial model produced by Intelligence and Insights, ECC, and include data to inform a benefits target with actual data from the Housing database (Charlotte Cannon, pc 19/04/2017). While the included cost avoidance figures are reported with a level of confidence, it is likely that should the database be implemented wider over the duration of the project, more financial benefits may be realised overall.

¹⁰⁵ Net computed as (£666,348 - £1,000,000) = -£333,652.

¹⁰⁶ source: "\\Essex Data DPaRS Tool\DPaRS Implementation Business Case v1.0.docx"

¹⁰⁷ source: "\\DA Housing Database\DA in Housing Benefits Summary - Dec 16.xlsx"