



Turning Point Cost-Benefit Analysis

Introduction:

With the increasing political emphasis on outcomes, Turning Point recently commissioned a detailed evaluation of three of our core service models, to demonstrate the outcomes and associated cost- benefits our services provide to local commissioners, the Government and wider society, particularly where an early intervention has taken place.

The models looked at were:

- Rightsteps, an innovative, proven Improving Access to Psychological Therapies Programme (IAPT) model developed by Turning Point and currently being delivered in six areas across the country
- Turning Point's integrated Tier 2 and Tier 3 model for substance misuse services
- Connected Care's 'Experts by Experience' model

Rightsteps:

The London School of Economics' Personal Social Services Research Unit was commissioned to undertake the Rightsteps analysis. They considered the mental health outcomes of the model in terms of return on investment from three different perspectives:

- **Payer's (commissioner's)** - Considered improvement in Quality of Life (QoL) and savings to NHS
- **Government's** - In addition to above, considered reduced benefit payments and increased tax revenue
- **Societal** - In addition to payer's perspective, the productivity improvement through increased employment, reduced absenteeism and improved productivity was considered.

The aim was to estimate the social rate of return of the Rightsteps program, using cost-benefit economic evaluation methods. Analysis aimed to capture as far as possible the full range of benefits and costs of the Rightsteps program.

Findings:

- 10,000 people have received 'treatment' at a Turning Point IAPT service between October 2009 and October 2010.
- Our Derbyshire service delivers to **Government a benefit to cost ratio of £3.35 for every £1 invested** and to **Society a benefit to cost ratio of £3.43 for every £1 invested**.
- The analysis found improvements in the mental health of Rightsteps patients during the course of the treatment. On average, depression scores improved by 11.6%, anxiety scores by 11.4%, phobia scores by 8% and work and social adjustment scores by 9.2% between the first and last therapy session.
- The model was also shown to yield a QALY rate of return of 180% based on a Willing to Pay per QALY gain of £20k.

Conclusion:

The importance of robust mental health to wellbeing is being increasingly recognised. Rightsteps has been demonstrated to improve outcomes for those with common mental health challenges and the model is fundamental in providing the early intervention required to prevent mental health deteriorating and people falling into crisis with the high costs this has, both personally and to the state. We believe that further investment in Rightsteps can improve and retain participation in employment while also strengthening individuals' wellbeing.

Integrated Tier 2 and 3 Service:

The Integrated Tier 2 and 3 model is Turning Point's provision of a 'one-stop shop' for people to meet both their clinical and social needs when addressing their substance misuse difficulties. Turning Point has commissioned Oxford Economics, who advise HM Treasury, to undertake cost-benefit analysis of this model.

Findings:

- In 2009/10, the service saw 3,734 people, of these 2,054 were new clients.
- The analysis is based on the Treatment Outcome Profile form, a standardised measure of the effectiveness of substance misuse services.
- Alcohol was the primary problem substance for 40% of clients with just over a third of clients (36%) abusing more than one substance.
- Before relapse and self-recovery are taken into consideration, the service is estimated to deliver £36.6 million in outcomes for society in 2009/10. Eighty percent of these savings are due to core impacts and 20% non-core.
- **For every £1 invested, a return of £4.07 is achieved.** This takes into account the effects of aftercare and measures core impacts, defined as: increased participation in employment, reduced crime, improved health, including lower rates of blood-borne viruses and more stable housing.
- This contrasts to Home Office analysis of tier 3 and 4 substance misuse treatment which found £2.50 worth of impacts for every £1 invested (Home Office, 2009).

Conclusion:

Turning Point's model of integrated services improves wide-ranging outcomes for those with substance misuse challenges. Our analysis demonstrates that the integrated tier 2 and 3 model is effective in improving social reintegration as well as the delivery of better quality of life for those accessing treatment.

The model has the flexibility to respond to the needs of the local area. Prior to integration there was separation in treatment for those who misuse drugs and alcohol. Oxford Economics' analysis demonstrates that the integrated service model achieves greater productivity in treating people whose primary problem substance is alcohol.



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Connected Care:

Connected Care is Turning Point's model for community led commissioning. Connected Care brings the voice of the community to the design and delivery of services by training community researchers to engage with hard to reach members of the population and involve them in the co-production of local services.

A recommendation made by the Connected Care community researchers in one project was for a community-led and delivered service, Experts by Experience, a model of service navigation for those with complex or multiple needs. LSE's cost-benefit analysis considered the hypothetical costs and savings that could be achieved if this model was implemented.

Findings:

- Substantial savings are generated by providing early intervention support, such as support in maintaining a tenancy, and short-term public health interventions that will reduce demand on crisis based services.
- The model could deliver significant net benefit to the public purse - **with every £1 invested a return of £4.44 is achieved**. When the benefits of improving quality of life to are included, a return of £14.07 is gained for every £1 invested.
- The service could proactively support 500 new people currently being missed by services, and connect them to the services and agencies that can help them.
- These findings are considered to be conservative as the savings in reality are likely to accelerate as the benefits of this model ripple out to members of the community.

Conclusion:

At a time when all public services are facing unparalleled financial pressures and a steep rise in demand for services, commissioners need to turn to new local models of service provision. Our cost-benefit analysis demonstrates that the experience and knowledge of the local community is valuable in providing cost effective early intervention and preventative support.

Turning Point's Cost- Benefit Analysis Key Points:

1. Turning Point saves money for Government through innovation and early intervention.
2. By addressing issues at early stages, Turning Point services save even more resources in the long term. Our analysis shows that Turning Point delivers a quality, value-for-money service with clear results for every £1 invested.
3. Turning Point contributes to a better society, enhancing people's lives.
4. Social Enterprise can break through the silos of Governmental working and add real social value.
5. Increased Government investment in these services dramatically increases the return on investment.
6. By undertaking detailed analysis by externally recognised bodies, Turning Point can demonstrate our ability to save money for society, the state, and the local commissioning body.