

# Complex Lives

Identifying partners risk and  
rewards

# Purpose of this slide deck

To Support work on identification of key partner risks and opportunities (rewards)

## Contents

1. Overview of the Complex Lives Alliance model (blueprint)
2. Overview mapping of the 'As Is' commissioning, delivery and financial flows
3. Summary of consumption costs 'deep – dive' analysis
4. Template for partner risk identification



# Complex Lives – overview of Area of Opportunity

## Context

- This cohort includes some of the most vulnerable people living within Doncaster.
- The complex relationship and interdependencies between homelessness, drug and alcohol addiction, mental health problems, domestic abuse, violence, begging, offending behaviours requires integrated investment and delivery, with an increasing focus on prevention.
- This is one of two Team Doncaster prototypes for new delivery models (with town centre), and is one of the two pilot activities listed in the Place Plan (with intermediate care)

## Scope

- The scope and specifics of a new delivery model has been developed through a prototype phase since November 2016. The key components are:-
- Complex Lives Team - Key Workers for complex and less complex cases to provide the focal point for case coordination and ongoing support
- Complex Lives Asset Menu – formal and informal community and service based support
- Housing Plus Pathway – accommodation and support pathway; ‘Housing First’ – the commissioning and development of housing support services to enable stability of accommodation with built in wrap around support
- Changing Lives Fund – support to remove practical barriers to progression
- Prevention and Demand Management – moving from tertiary to secondary prevention
- Case Management - A shared access and case management system enables pooling of intelligence
- Outcomes Framework includes familiar Key Performance Indicators.
- Developmental Evaluation and Learning Strategy – to support the on-going development
- Alliance Governance – robust and progressive multi-partner governance arrangements

## Case for Implementation

- This is a low volume high cost cohort of people who experience very chaotic lifestyles, and have often experienced trauma in earlier life.
- The cohort also has a major impact on place, and in particular the town centre which is a major priority for Team Doncaster
- The response to the issue requires a highly integrated relationship between police, investment and practice from homelessness/supported housing, drug and alcohol and mental health services and the criminal justice system.
- Shared accountability for this cohort between organisations is crucial.

## Key Stakeholders

- A range of current commissioning activity currently focuses directly or in part on this cohort. This includes:-
- Homelessness commissioning managed by DMBC Adults and delivery by St Leger Homes
- Drugs and Alcohol commissioning by Public Health and delivered by RDaSH (via third parties in some cases)
- Mental health provision commissioned by the CCG and delivered by RDaSH.
- Social Care and mental health social work funded and delivered by DMBC
- Support for care leavers provided by DCST, commissioned by DMBC, with accountability lines to DFE
- Support for offenders commissioned by Home Office/Police and Crime Commissioner/Probation and delivered by the Community Rehabilitation Company
- Other services contribute indirectly

## Expected Benefits

- Greater stability for people with complex lives
- Improved outcomes for people with complex lives
- A person centred, asset based model in line with the principles of prevention and early help
- Greater integration of people into mainstream society
- A whole systems , integrated, holistic, personalised response
- A wider system of community support
- Reduction in the disproportionate demand on services from this group eg acute health and social care
- Reduction in the cost of public services which this group of people cause
- More informed commissioning and design of services

## Assumptions / exclusions

- There is a strong partnership commitment to produce a highly integrated response
- A new delivery model requires a joint strategic approach between commissioners across DMBC, Public Health and the CCG, with scope to extend to criminal justice commissioners
- It requires a collaborative delivery model between DMBC, St Leger, RDaSH, South Yorks Police, DCST, DBH & criminal justice agencies
- The development of an accountable care model will be managed in stages
- This is an area where community/peer led support is vital

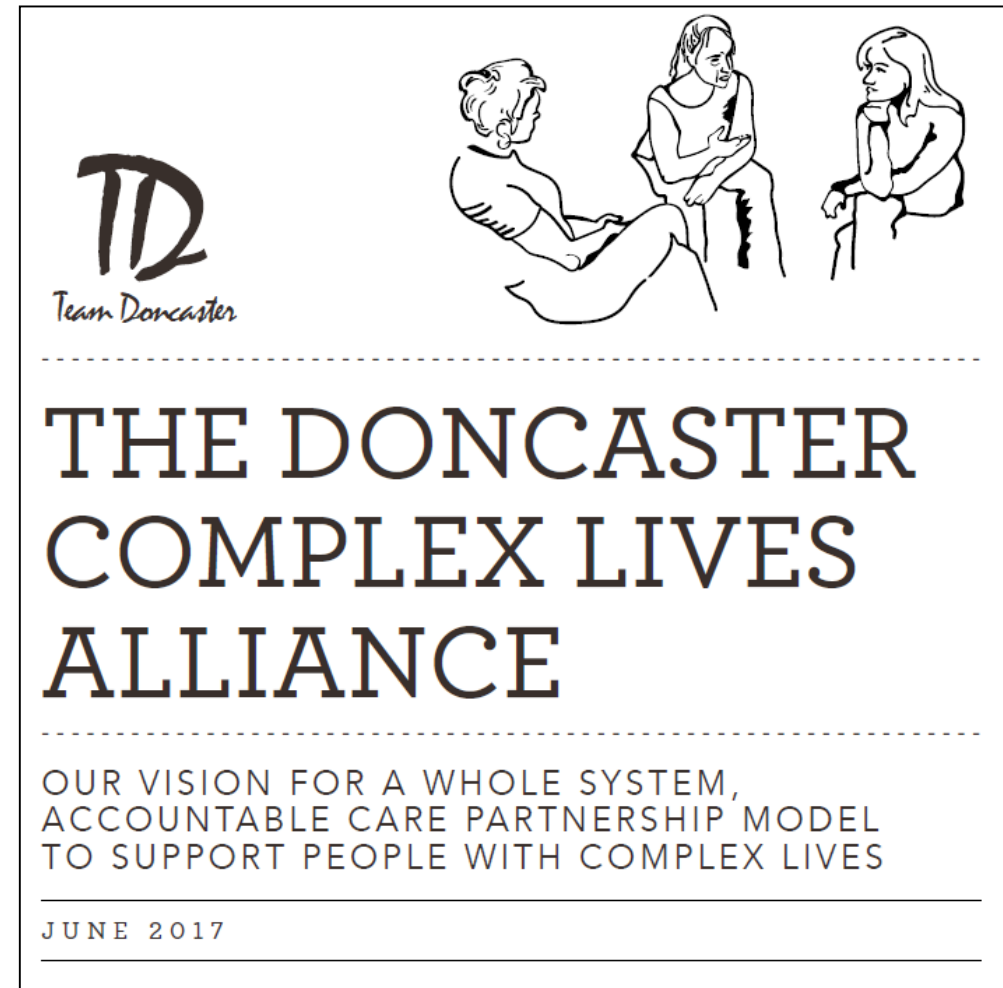
## KPI / outcomes

These are being developed for the individual, services and the system for example:



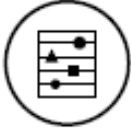
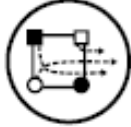




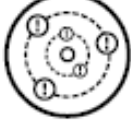
- Motivation and engagement, Accommodation, Drug and alcohol misuse, Physical emotional and mental health, money, daily routines, relationships/networks, offending behaviour, self care and living skills, empowerment and self esteem
- Fall in crime and ASB, rates of reoffending
- Fall in hospital admissions, acute costs related to addiction
- Fall in repeat presentations; rough sleeping
- Satisfaction levels in town centre
- Communities support and embrace this work

# The emerging accountable care model

- The Complex Lives Alliance model developed as prototype from November 2016
- Formed more fully in February 2017
- Responding to pressing needs...
- But keeping on track with strategic reform direction
- Whole system specification agreed June 2017
- Model now being fully mobilised – interesting!
- Immediate delivery pressures and a hot political topic
- Uncertain, unhelpful national policy environment

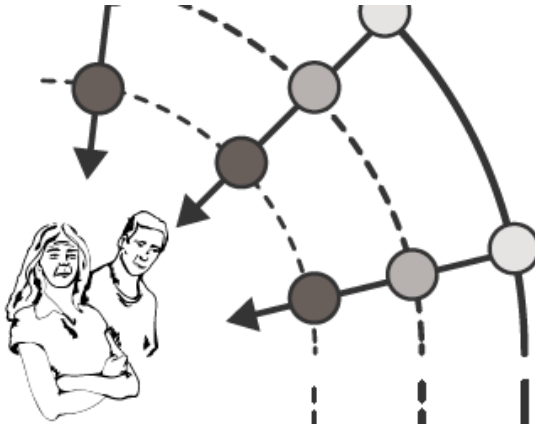


# Key features of the 'to - be' model – mobilisation under way

	OPERATIONAL FEATURES	SUPPORT/ENABLING FEATURES	
	Complex Lives Team - case management capacity	Case Management model - process and ICT system	
	Complex Lives Asset Menu - support services	Outcome Framework and Performance Management	
	Doncaster Housing Plus Pathway - accommodation options	Developmental Evaluation and Learning model	
	Doncaster Changing Lives Fund - to remove barriers	Alliance Governance - to support collaboration	
	Prevention & Demand Management		



# Key strategic features and partners in the Alliance



## COMMUNITY SUPPORT

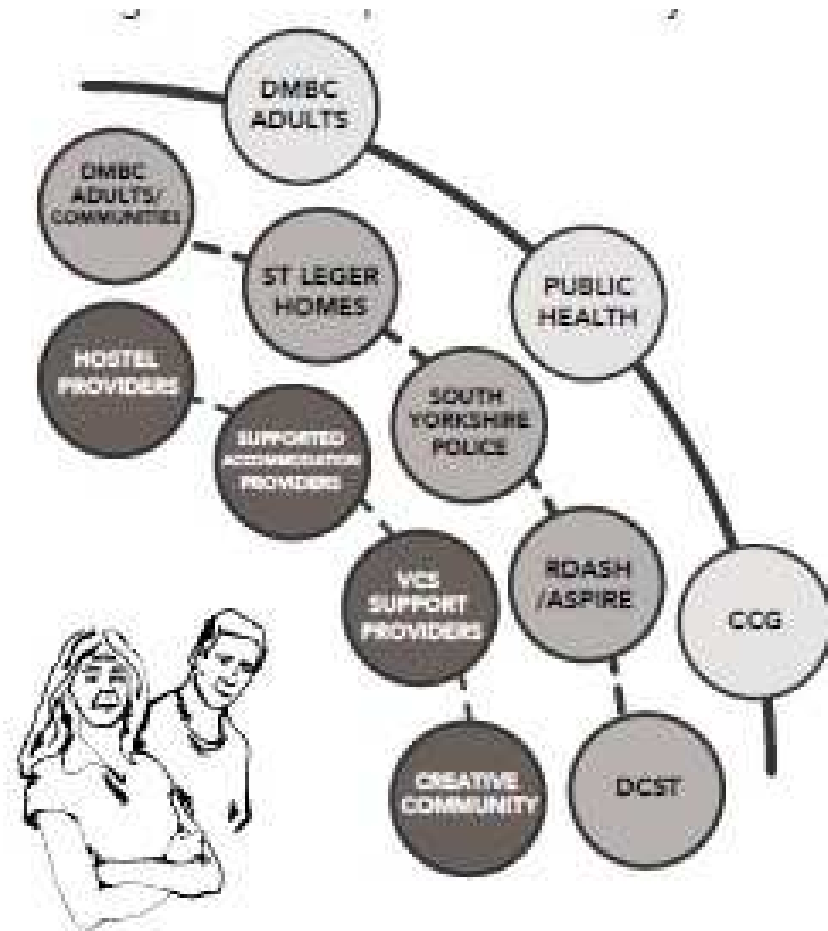
A wider ecosystem of organisations and individuals providing support to people living complex lives. This support is both formal and informal, commissioned and emerging directly from the community. This ecosystem also creates present a platform for engagement with the views and experiences of people living complex lives.

## OPERATIONAL DELIVERY

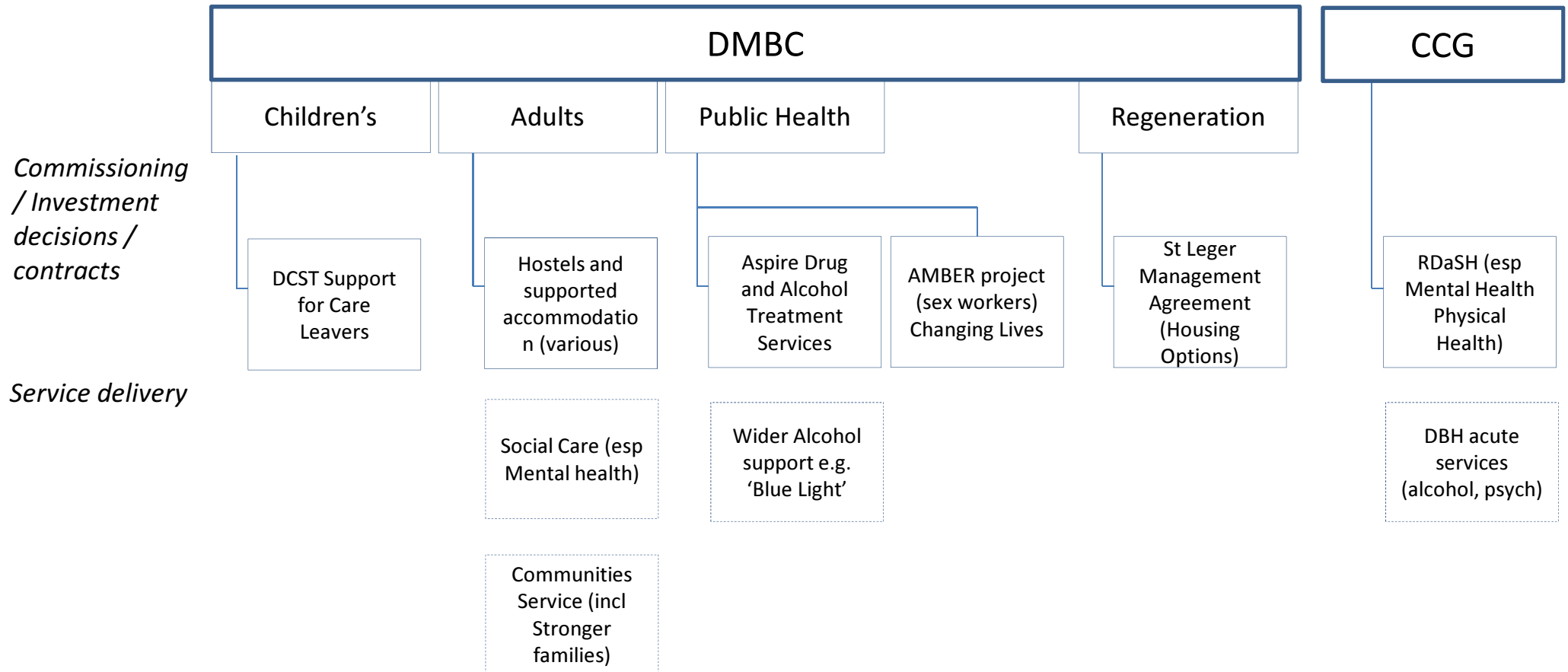
Integrated delivery by key organisations with joint responsibility for operationalising the whole systems specification, and delivering against the outcomes framework. Commissioned through a single contract that creates room for innovation whilst ensuring shared accountability.

## STRATEGIC PLANNING AND COMMISSIONING

Joint investment in improving outcomes for people living complex lives, and those who are on the edge of complexity, whilst reducing demand on acute health and social care settings. Underpinned by a clear outcomes frame and a whole system operating model (both codesigned by the alliance itself).

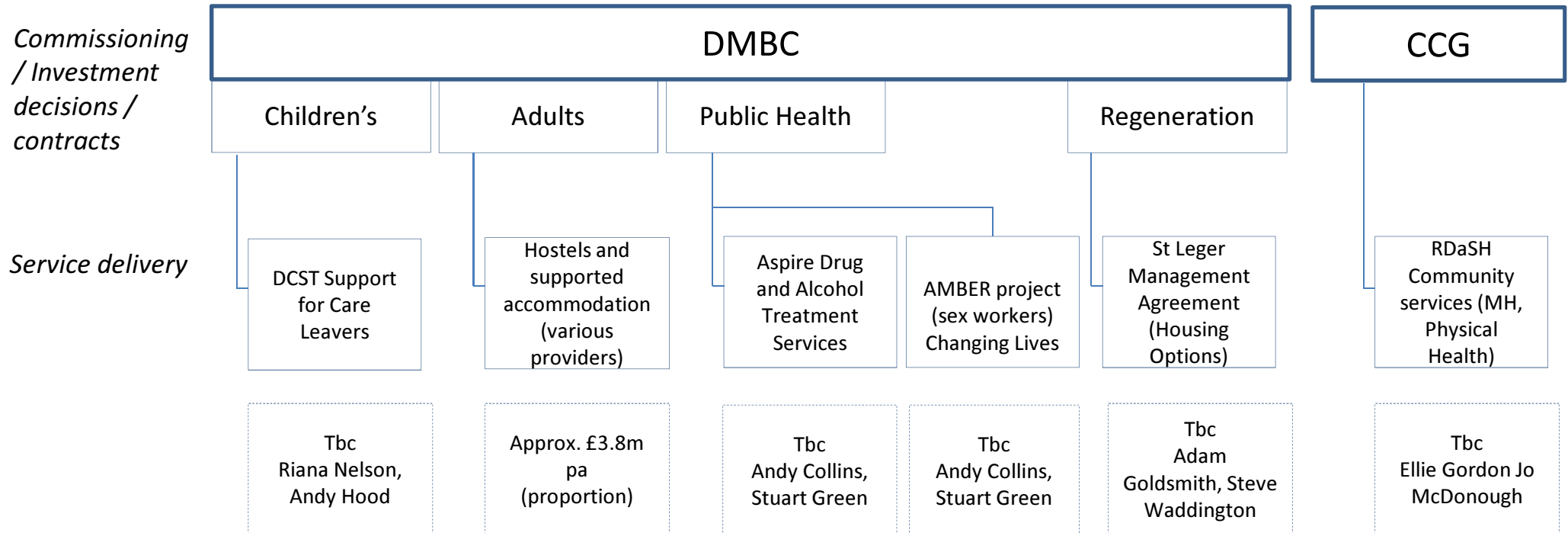


# Overview of 'As IS' commissioning and delivery landscape



- The point is there is no deliberate 'as is' planned commissioning for integrated support for people with complex lives.
- Work is required to understand better the proportion and value of services that are focused on the cohort. The deep dive study gave a perspective on this

# Overview of 'As IS' broad contract values – core elements

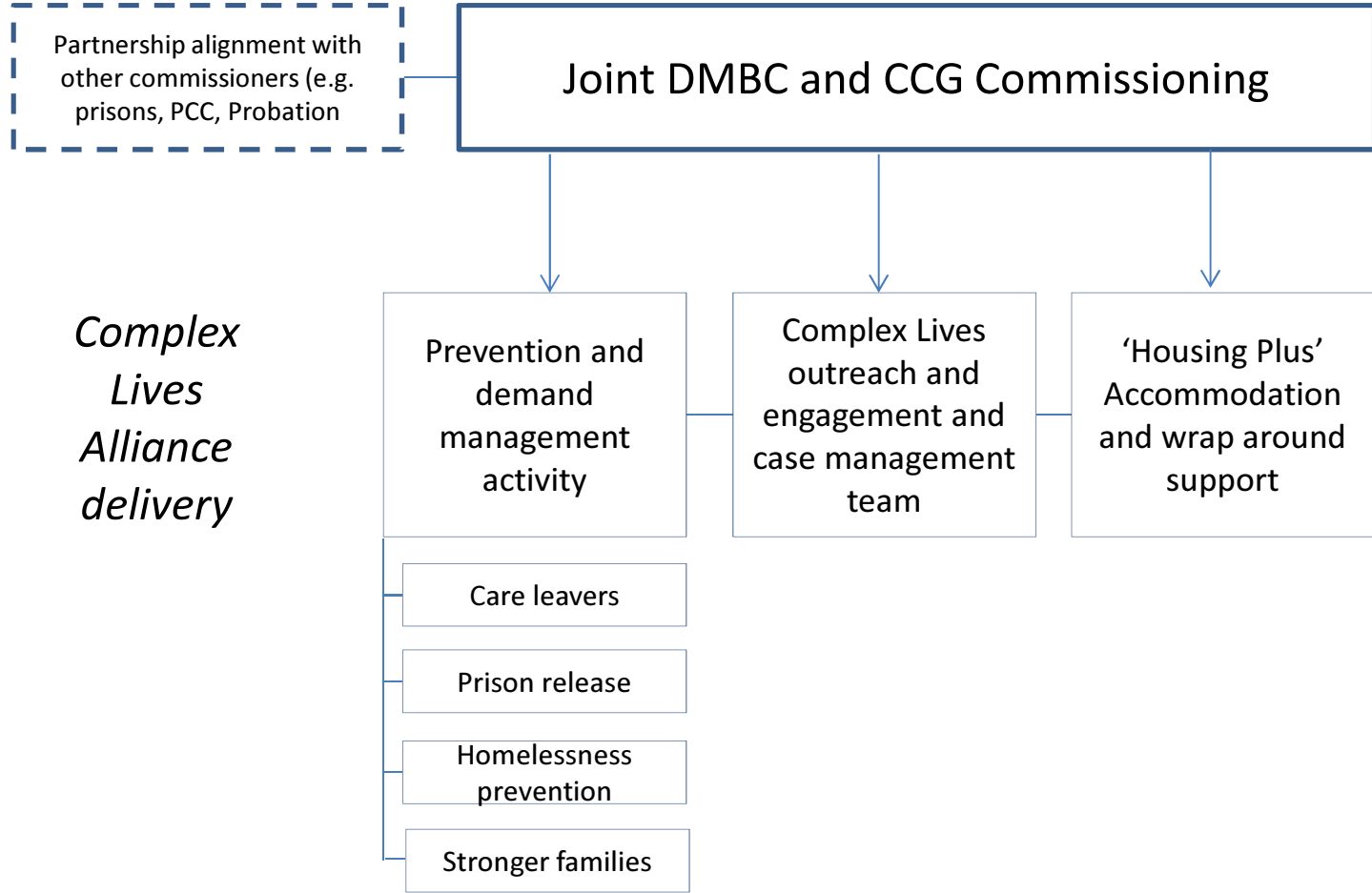




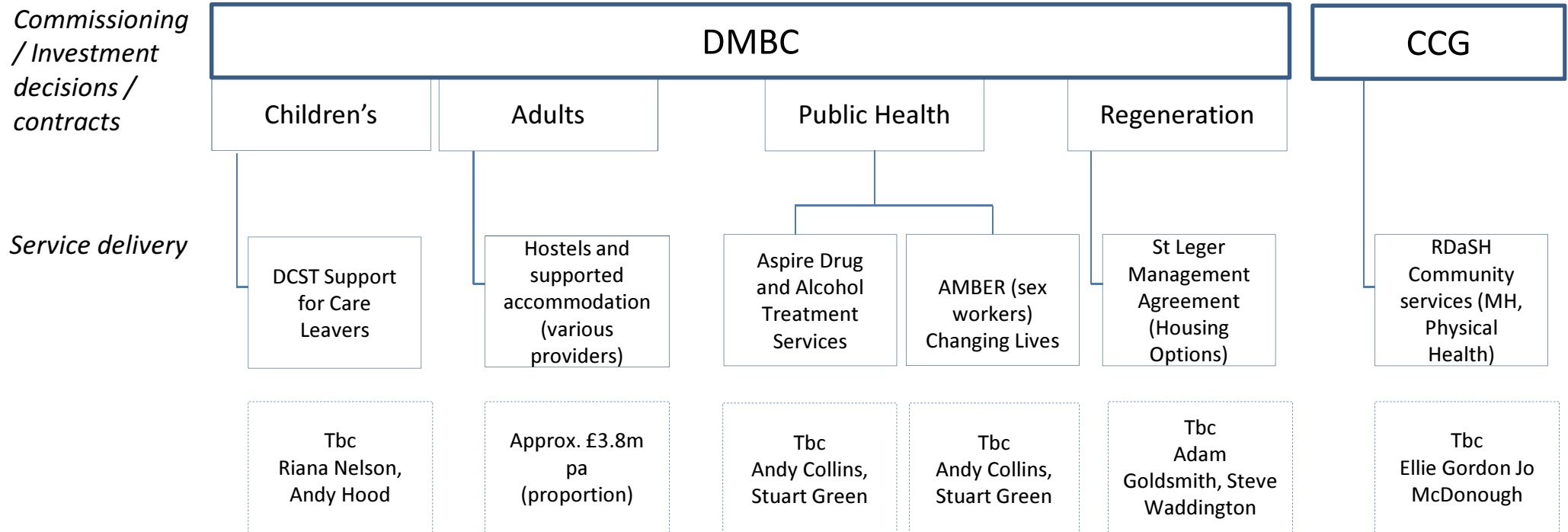
# Summary of deep dive analysis

- Evaluation of the costs of 57 people with complex dependencies
- 39 men and 18 women aged 19-55
- Contributors: DCST, DMBC, Health – DBHT, DCCG, RDaSH, St Leger Homes, South Yorkshire Police, Riverside Homeless Support Services
- Cohort cost partner organisations £508,624 during 12 months of 2016 = £8,923 per person
- Costs are conservative - key absences in costs are administration; voluntary, community and faith sector; criminal justice system; welfare benefits
- South Yorkshire Police analysis based on a smaller sample
- 50% of costs are from housing
- 25% of costs are from the NHS
- Cohort increased to 83 individuals =£750,000 for 2016 alone
- Estimated that 4,400 people in Doncaster have complex dependencies =£39m per annum

# Direction of travel for commissioning and delivery



# Overview of 'As IS' broad contract values – core elements



# Complex lives – overview ‘risk and rewards’ assessment

## Risks & Issues

Level	Opportunities/reward	Risks
System (all)		
DMBC		
RDASH		
St Leger Homes		
SYP		
ASPIRE		
DCST		

# Questions/Discussion