



Changing Futures: Impact So Far

24TH JANUARY
2024

Changing Futures

- £64m national (DHLUC) programme across 15 pilot site areas including Sheffield
- Delivery mobilised in February 2022 and national funding ends March 2025
- Core aims - change the systems and services who support adults experiencing severe and multiple disadvantage (affected by mental illness, homelessness and rough sleeping, domestic abuse and exploitation, substance abuse and crime)



Sheffield Programme Aims

- Directly engage with and support positive outcomes for people identified as living with multiple disadvantage
- Embed coproduction in the city, where people with lived experience are involved in the design, delivery and evaluation of services
- Tackle and challenge health and social inequalities and promote inclusive services that make a difference to people's lives
- Promote and operationalise joint working across organisational boundaries
- Develop learning about what works (both from Sheffield and other areas) to inform future strategies and service developments

2024 - 2025 Programme Delivery

Core Team: 10 Keyworkers, 2 Team Leaders,
2 Team Managers, Business Support

Positive
Activities
Fund

Learning and
Development
Service

Specialist
Mental
Health
Services

Programme
Management

Coproduction
Service



**Changing
Futures &
Multiple
Disadvantage**

Mental
Health
Partnership

Substance
Misuse
Strategy

SHSC Clinical
and Social
Care Strategy

Female
Offender
Strategy

Adult
Safeguarding
Strategy

Domestic &
Sexual
Abuse
Strategy

Safer
Sheffield
Partnership

Homeless
Prevention &
Rough
Sleeper
Strategy

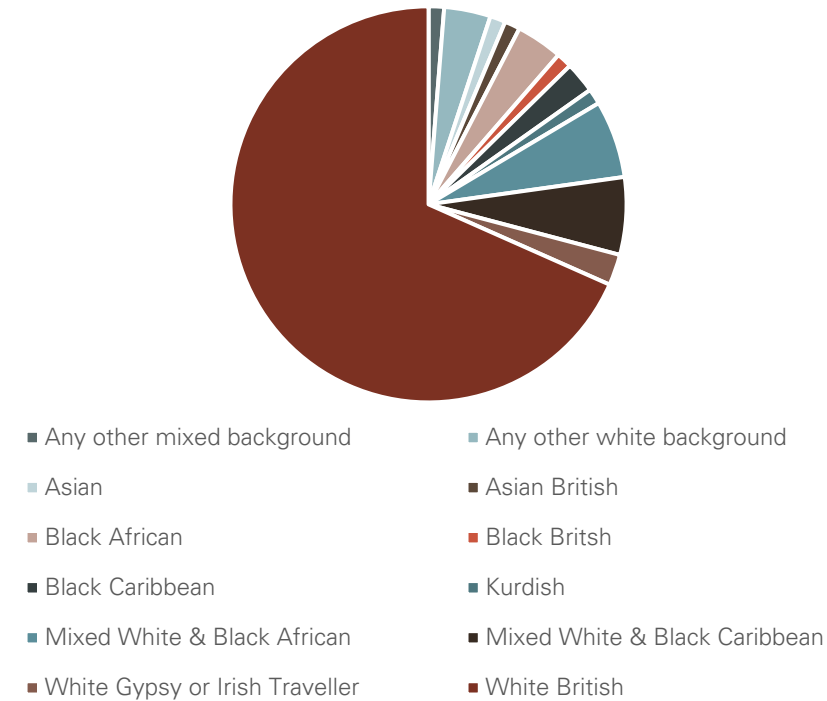
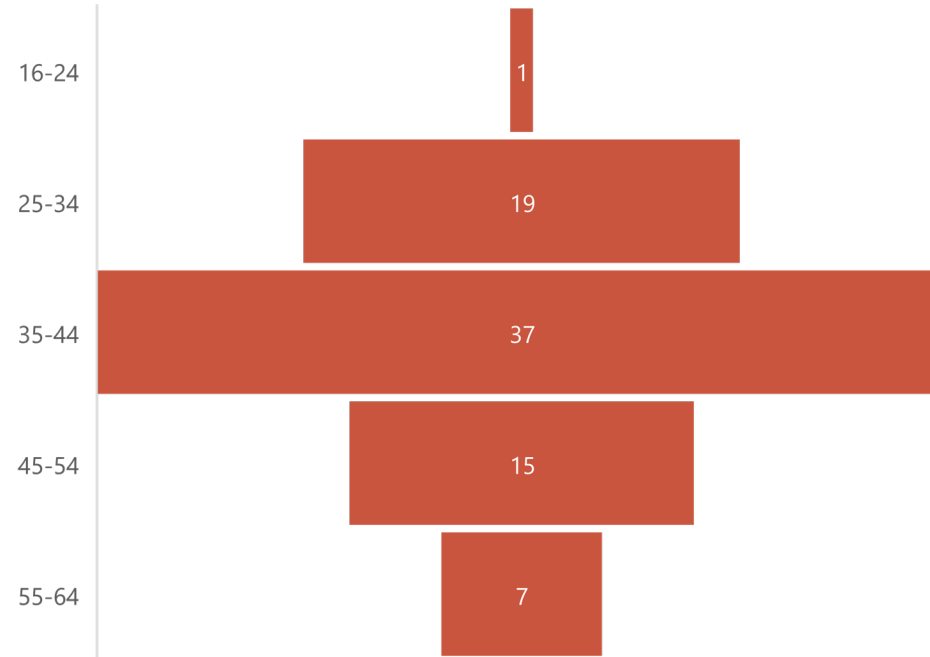
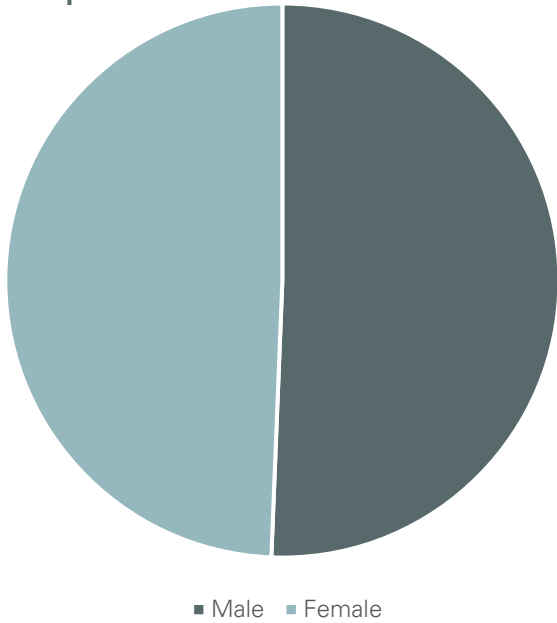
Police Crime
Plan

Health &
Wellbeing
Strategy

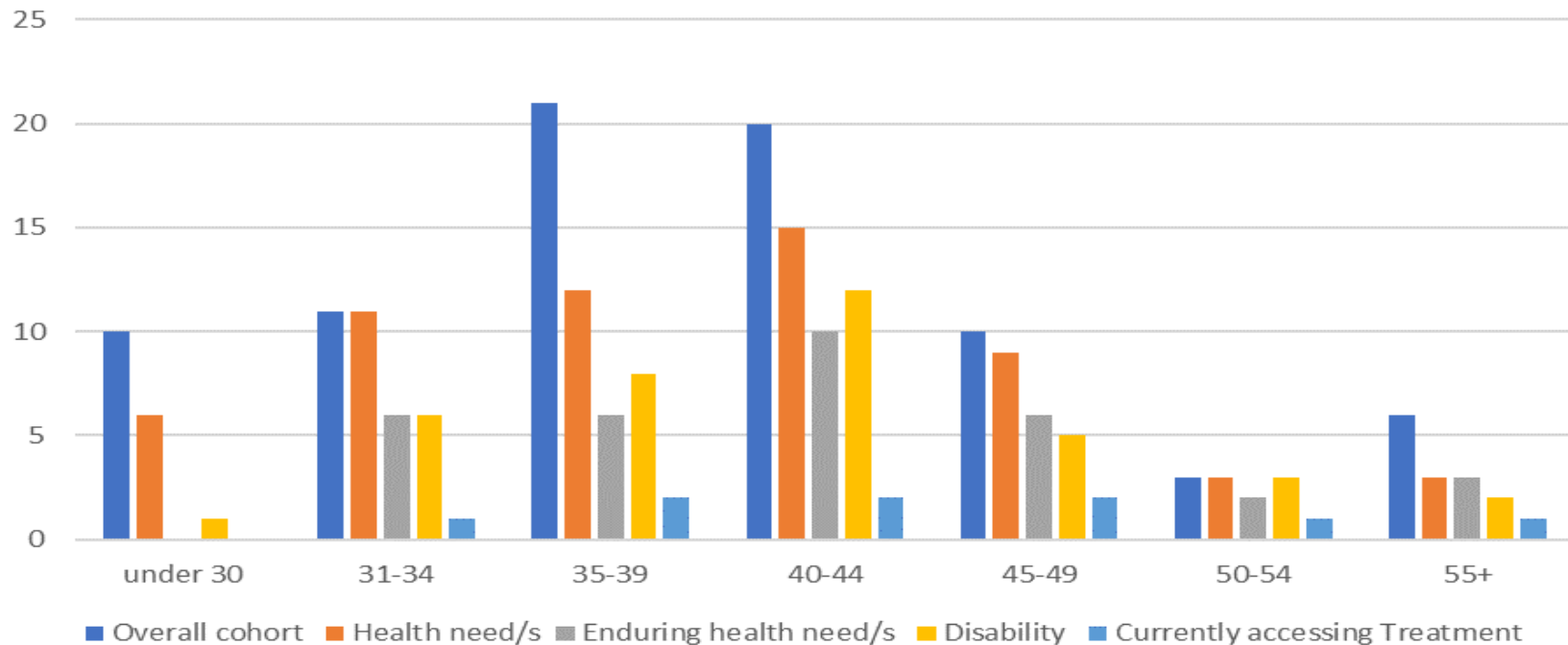
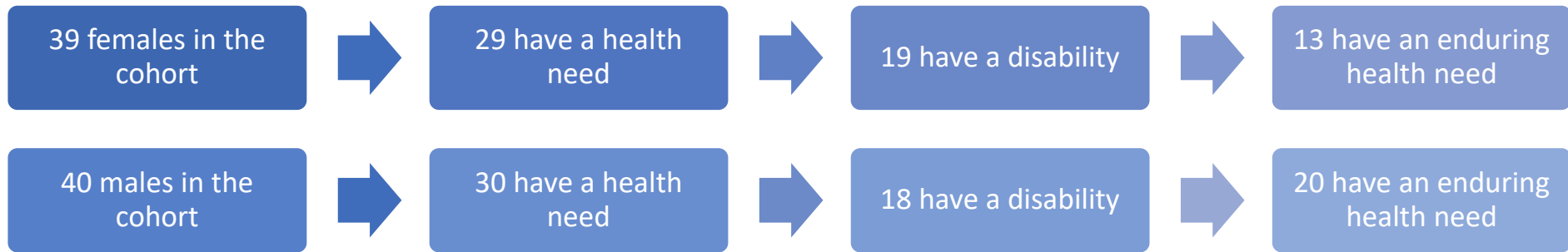
Inclusion
Health
Framework
(NHS)

Combatting
Drugs
Partnership

Beneficiaries Demographics



Beneficiaries Health Demographics

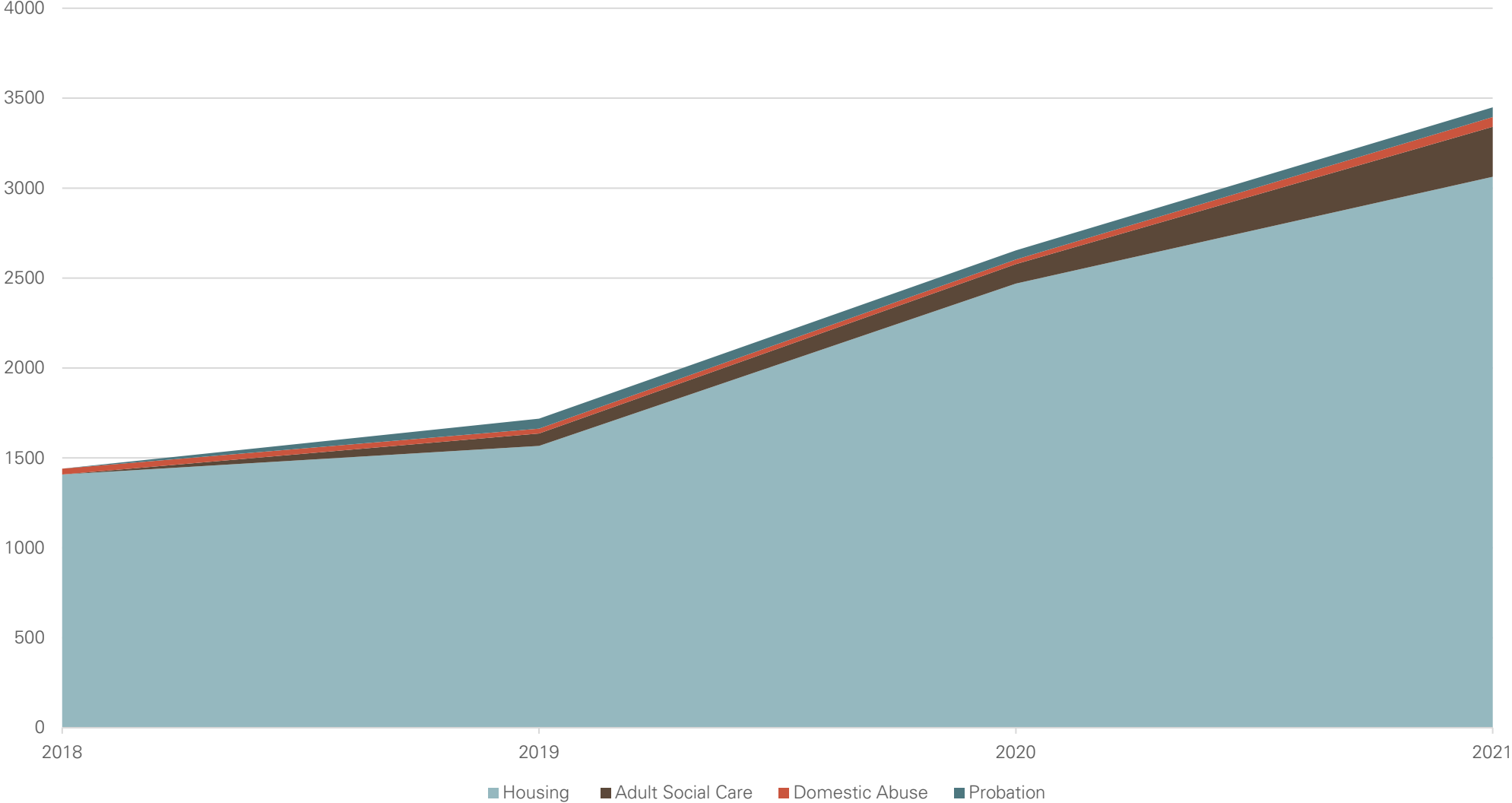


Beneficiaries Health Demographics

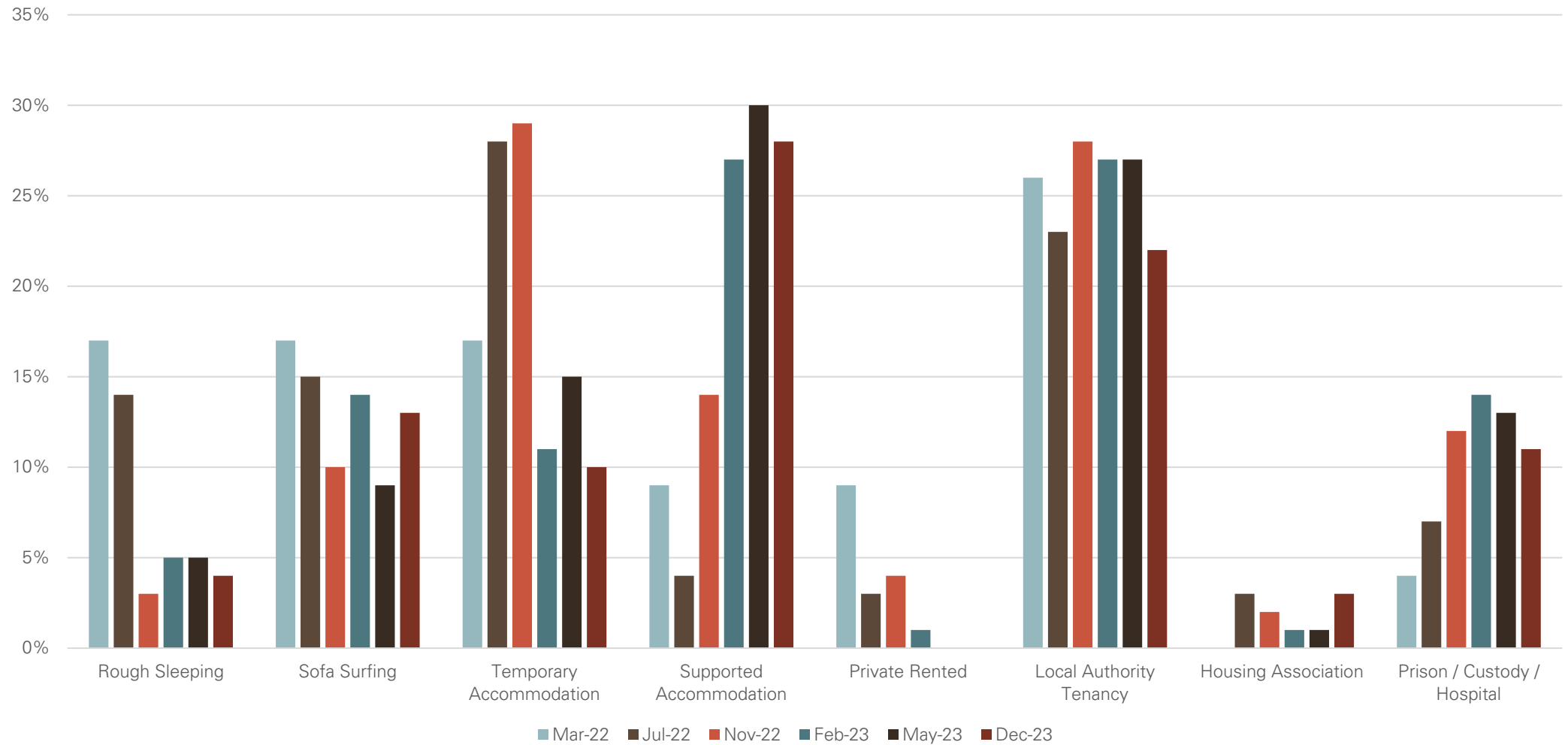
Category
Depression
Anxiety
Personality Disorder
Bi Polar Disorder
Schizophrenia
Psychosis
Hallucinations
ADHD
PTSD

Category	Health Need	Ongoing Health Need
Musculoskeletal	32	29
Vascular	15	8
Respiratory	12	10
Mobility	10	4
Podiatry	8	3
Neurological	8	6
Cardiovascular	4	1
Oral health/Dental Care	3	2
Visual Impairment	4	3
Gastric issues	2	2
Fibromyalgia	1	1
Diabetes	1	1
Human Immunodeficiency Virus	1	1
Cancer	1	1
Gynaecology	1	0
	103	72

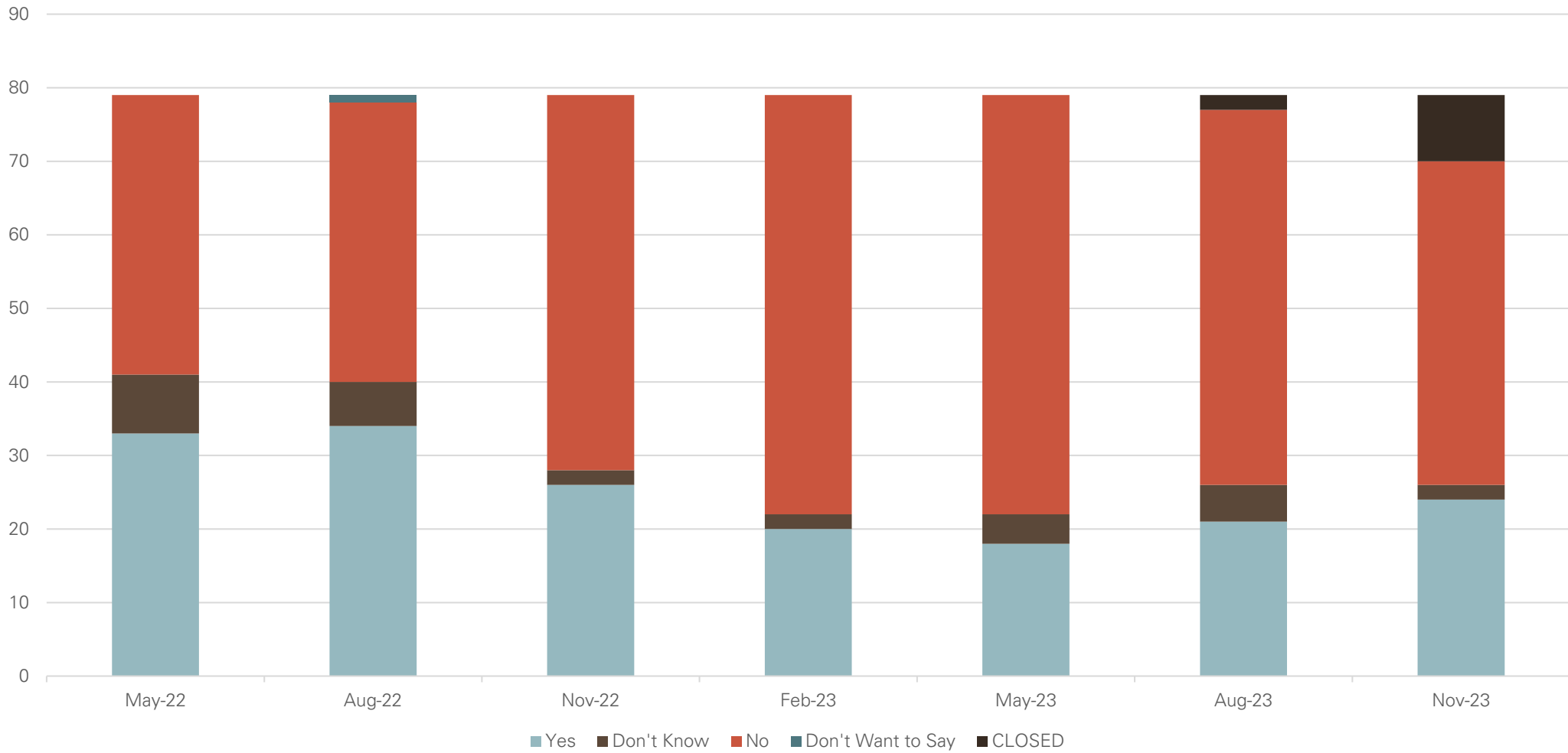
System Contacts Prior to Changing Futures



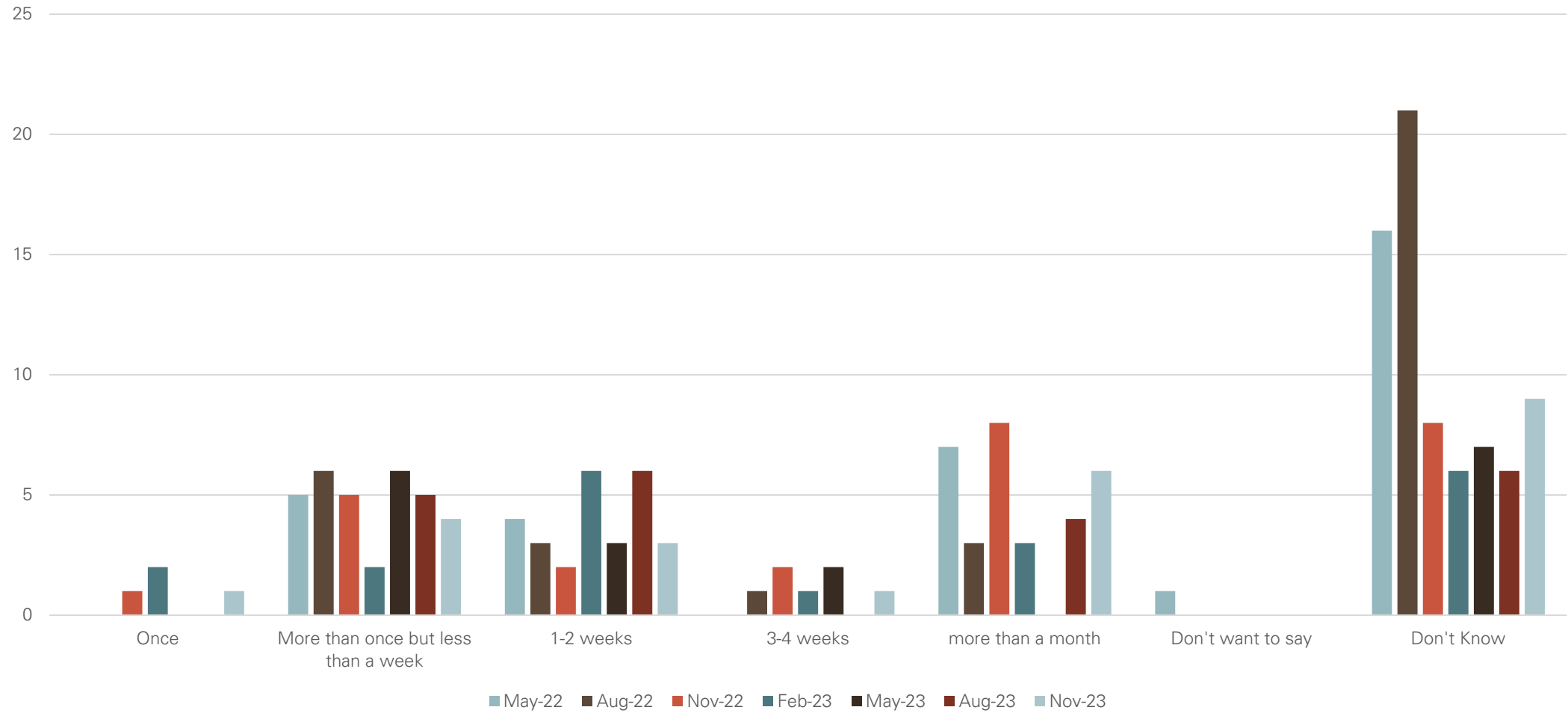
Individual Outcomes: Housing



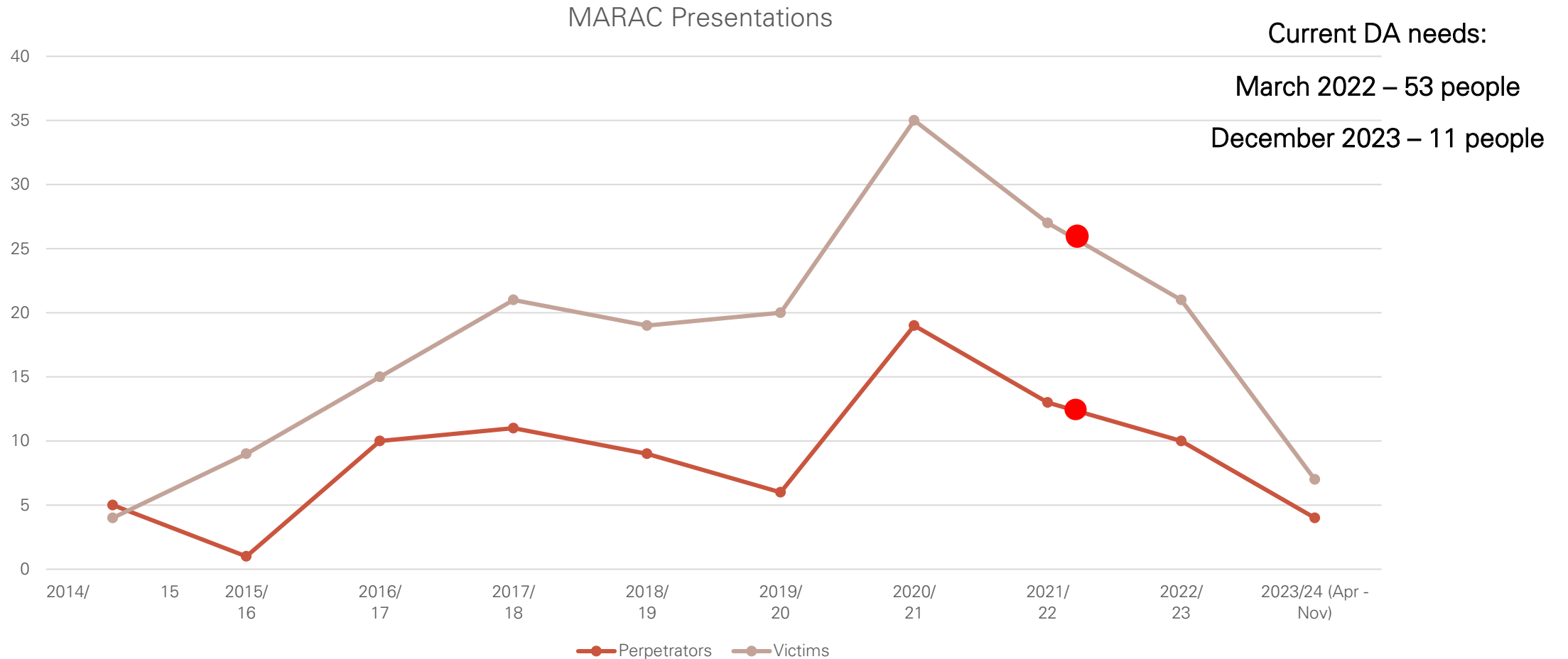
Individual Outcomes: Housing



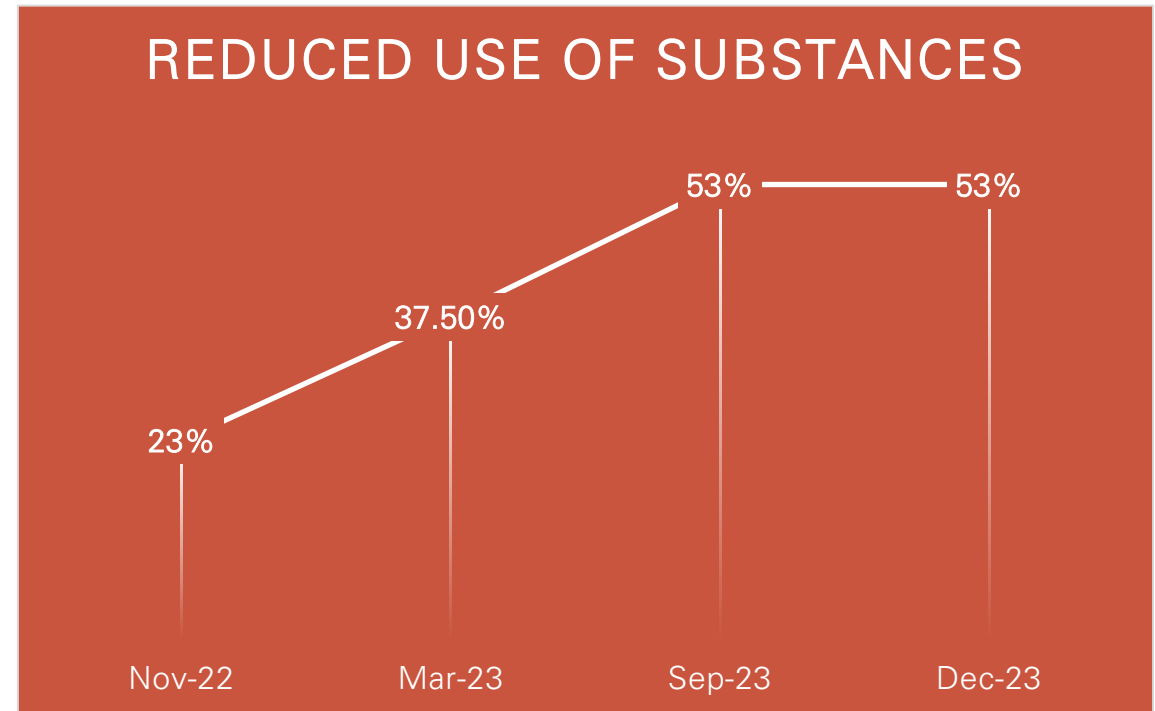
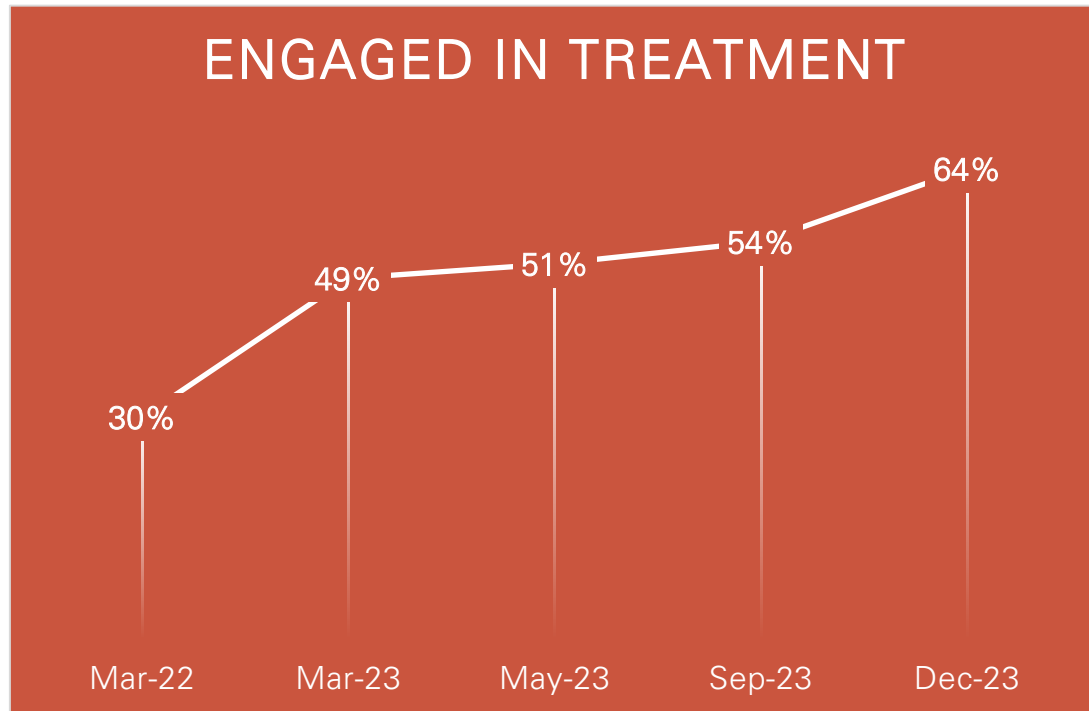
Individual Outcomes: Housing



Individual Outcomes: Domestic Abuse



Individual Outcomes: Substance Use



Individual Outcomes: Criminal Justice

Criminal Convictions

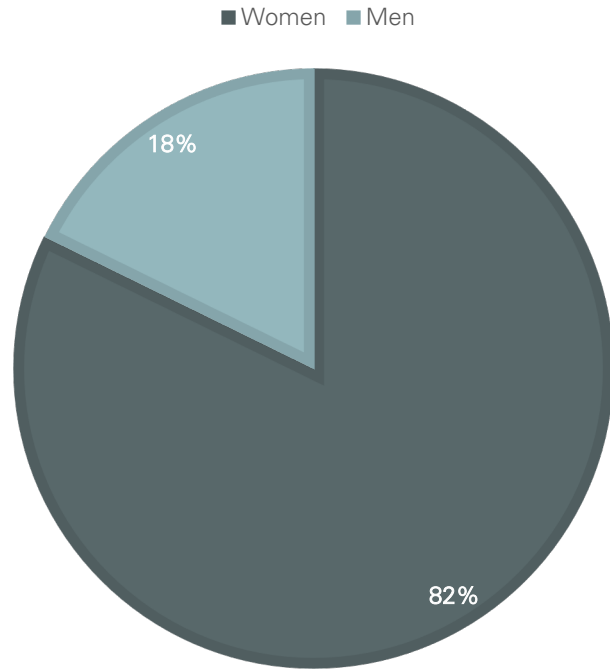


MARCH 19 - FEB 20 MARCH 20 - FEB 21 MARCH 21 - FEB 22 MARCH 22 - FEB 23 MARCH 23 - JAN 24

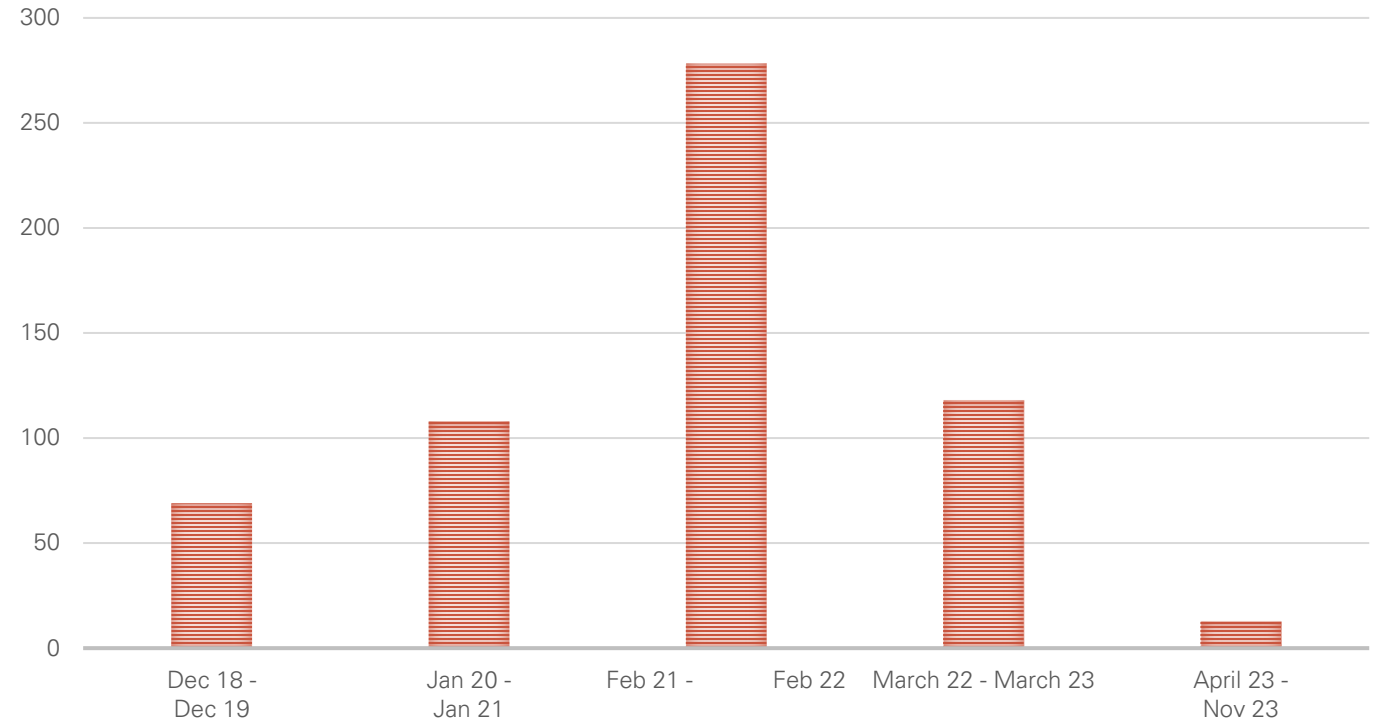
	Feb 2022	Dec 2023
Open to Probation	35%	27%
Engaging with Probation	79%	86%

Individual Outcomes: Adult Social Care

ADULT SOCIAL CARE CONTACTS DEC 2018 – NOVEMBER 2023



ADULT SOCIAL CARE CONTACTS



Individual Outcomes: Physical Health

Accessing Necessary Healthcare:

March 2022 – 43%

December 2023 – 59%

Emergency Department:

33% of the Changing Futures cohort attended A&E in financial year 2021/2022

2021/22 attendances – 188

2022/23 attendances – 102 (46% reduction)

Registered at GP:

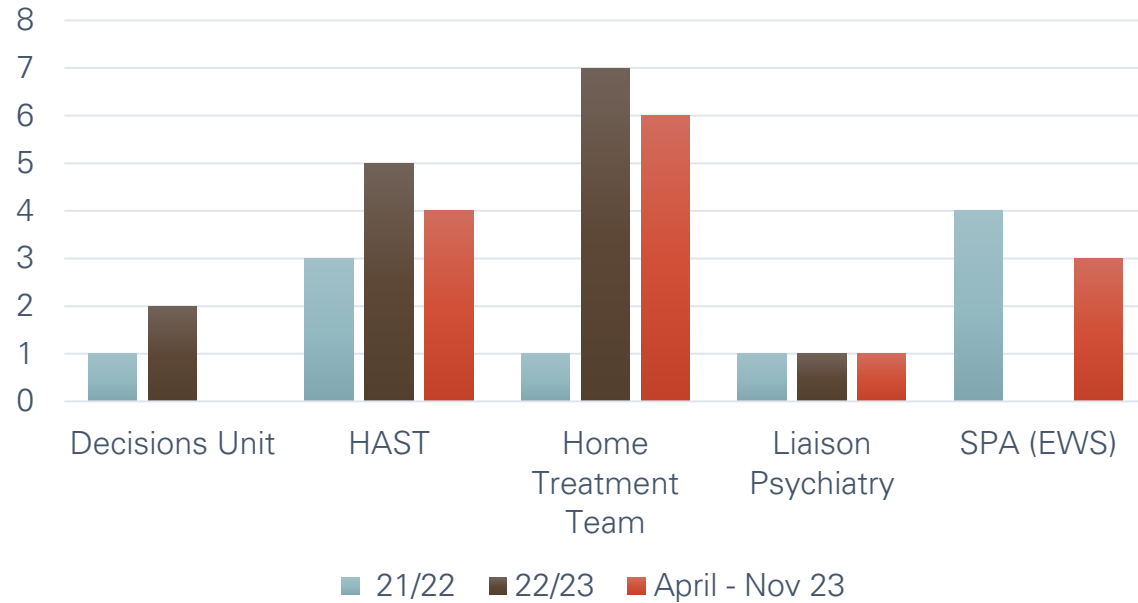
July 2022: 68%

December 2023: 90%

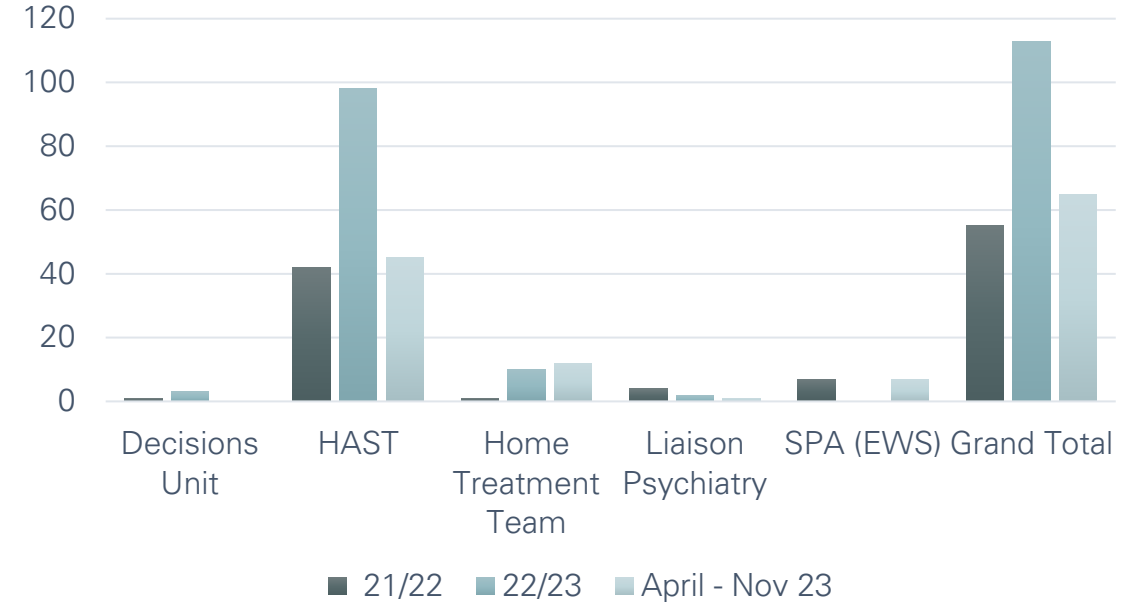


Individual Outcomes: Mental Health & Wellbeing

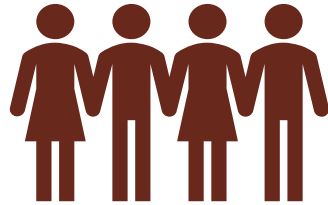
Referrals



Contacts



Individual Outcomes: Mental Health & Wellbeing



May 2022 - 58%
have improved
trust in services

December 2023 -
79% have
improved trust in
services



May 2022 – 33%
feel supported with
their wellbeing

December 2023 -
67% have
improved wellbeing
and self-efficacy



May 2022 – 4%
received support to
access groups in the
community

November 2023 - 46%
received support to
access groups in the
community



May 2022 – 4%
received support
from friends and
family

November 2023 -
48% have improved
relationships with
friends and family

Cost Avoidance

	Sept - Nov 2022	Oct - Dec 2023	Cost Saving
Ambulance Call Outs	£9,415.00	£3,228.00	£6,187.00
Emergency Department Presentations	£12,474.00	£4,158.00	£8,316.00
Hospital Admission (Physical Health)	£134,332.00	£65,364.00	£68,968.00
Contact with Police	£1,560.60	£1,734.00	-£173.40
Arrest	£5,720.00	£4,680.00	£1,040.00
Prison / Custody / Remand (Per Week)	£68,246.50	£33,966.00	£34,280.50
Fire Service Response	£0.00	£0.00	£0.00
Criminal Court Proceedings	£2,520.00	£7,840.00	-£5,320.00
Civil Court Proceeding (Housing)	£0.00	£1,750.00	-£1,750.00
Supported Accommodation Placement (Per Week)	£6,944.00	£48,608.00	-£41,664.00
Temporary Accommodation Placement (Per Week)	£20,020.00	£15,480.00	£4,540.00
Homeless Presentation	£9,010.00	£10,600.00	-£1,590.00
Mental Health ward Admission (Per Day)	£48,008	£16,238	£31,770
Totals:	£318,250.10	£213,646	£104,604.10
Average Cost Per Person	£3,929	£2,704	£1,225

Cost Avoidance

	Cashable Cost	Total Savings
MARAC Victims 31 Cases	£24,565 (per MARAC)	£761,515
MARAC Perpetrators 12 Cases	£38,835 (per MARAC)	£466,020
Adult Social Care 265 contacts	£94 (2 hours per contact)	£24,910
TOTAL		£1,252,445

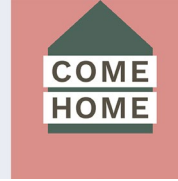
	Cost Saving
Yearly Cost Avoidance Emergency Services, Criminal Justice, Housing	£104,604
Average Yearly MARAC Saving	£574,165
Average Yearly Adult Social Care Saving	£12,455
Total Average Yearly Saving:	£691,224

Police / CJS: £32,000
 Health: £13,410
 Children's Services: £14,390
 Housing: £3,600

Hester et al, 2019

Coproduction Service

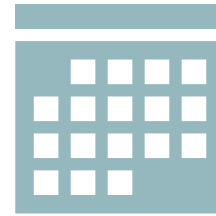
South
Yorkshire
Housing
Association



Recruit people with Lived Experience of Multiple Disadvantage to work on Coproduction activities across the city, informing service development & system change



Involves 80+ people with lived experience



Facilitates an average of 8 sessions, events or workshops a month



Coproduction Service – Positive Activities Fund

'Positive Activities should be meaningful and purposeful events, clubs or groups which help participants develop new social connections, build their 'recovery capital' and reduce their reliance on formalized support services.'



Associates have been the 'golden thread' throughout this project:

- Participating in several initial mapping workshops
- Co-designed the purpose of the fund and the bid
- They, also, make up 50% of the assessment panel for potential providers
- And will be involved in auditing and reviewing the successful providers

Coproduction Service – System Change

- Co-designed and launched Service Peer Audits - 10 trained Associates have audited 4 services to date
- Coproduced a ‘Coproduction’ training session which will be offered out to all services in Sheffield and co-delivered by Associates
- A group of our Associates have had board prep training from national company ‘Making Your Voice Heard’
- Represent Sheffield at the National Experts Citizens Group with Revolving Doors, feeding into questions from Whitehall
- Co-designed and co-facilitated a service wide webinar for the launch of a proposed Sheffield Coproduction Network and will be part of it’s structure going forwards



Coproduction Service – Women’s Agenda



- Women’s group meets once a month for a mix of social and system change objectives

- Supported the recommissioning of Community Domestic Abuse Service, including coproducing the specification and tender marking

- Co-designed women’s only move on accommodation for rough sleepers



System Change Objectives

Women

Cuckooing

Acquired Brain Injury

Approaches to Risk

Increasing the Voice of Lived Experience

Physical Health

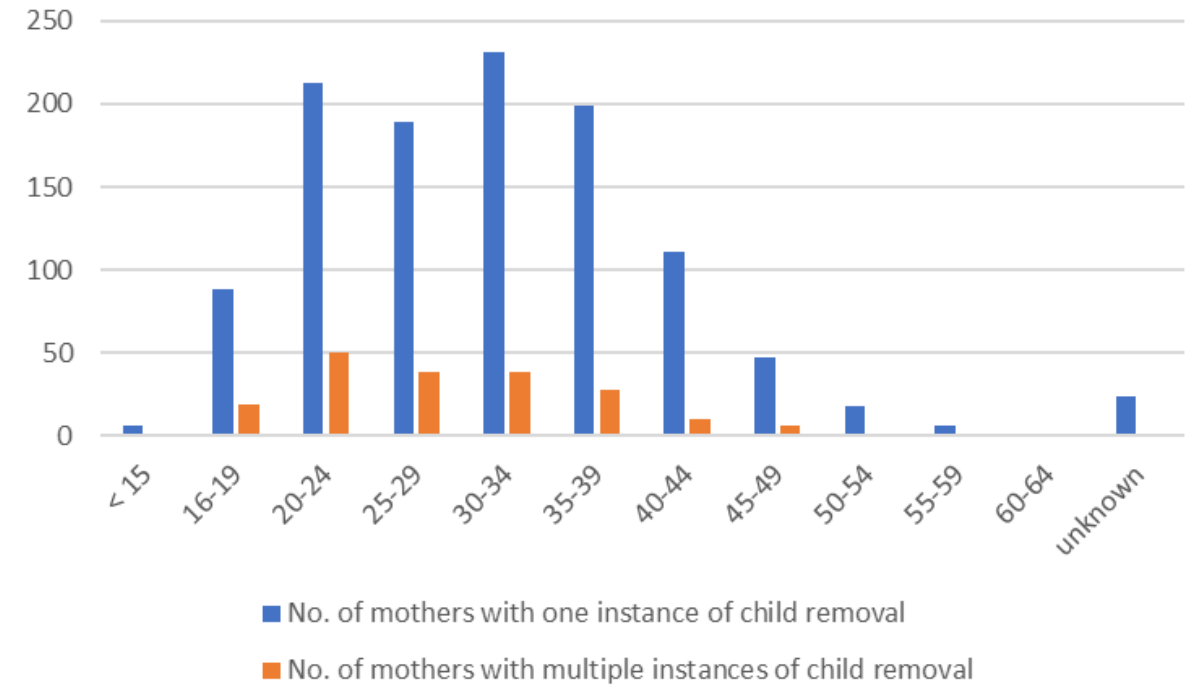
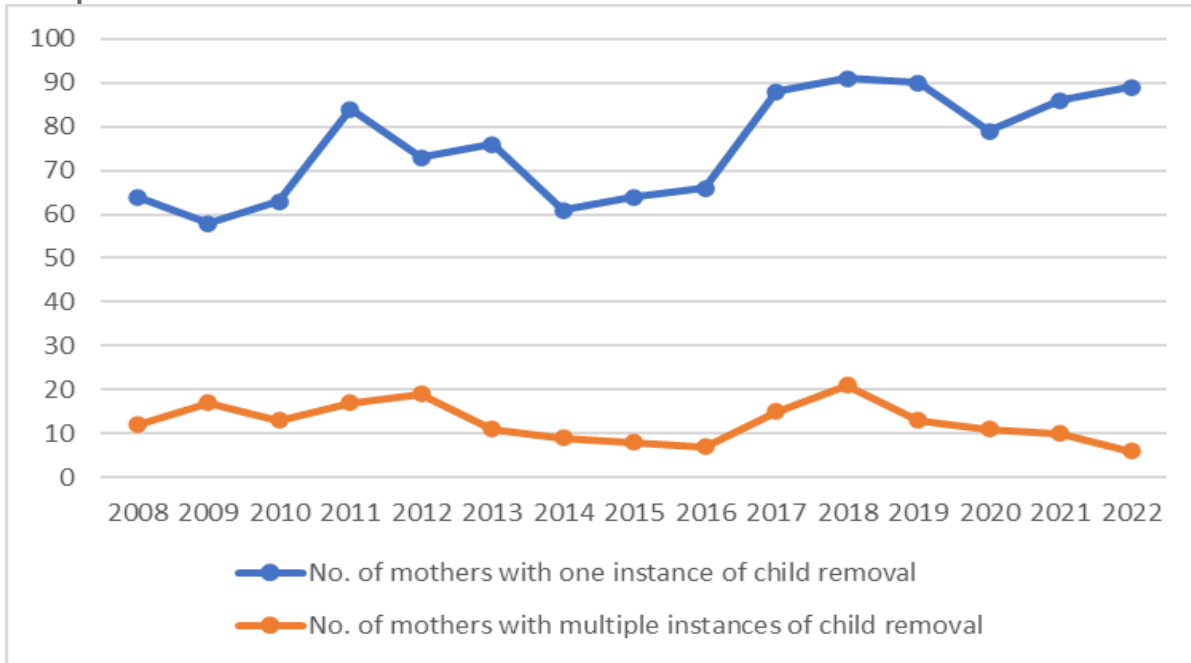
Takes time to embed strategically and operationally and see effects

AND...there is always more work to do!

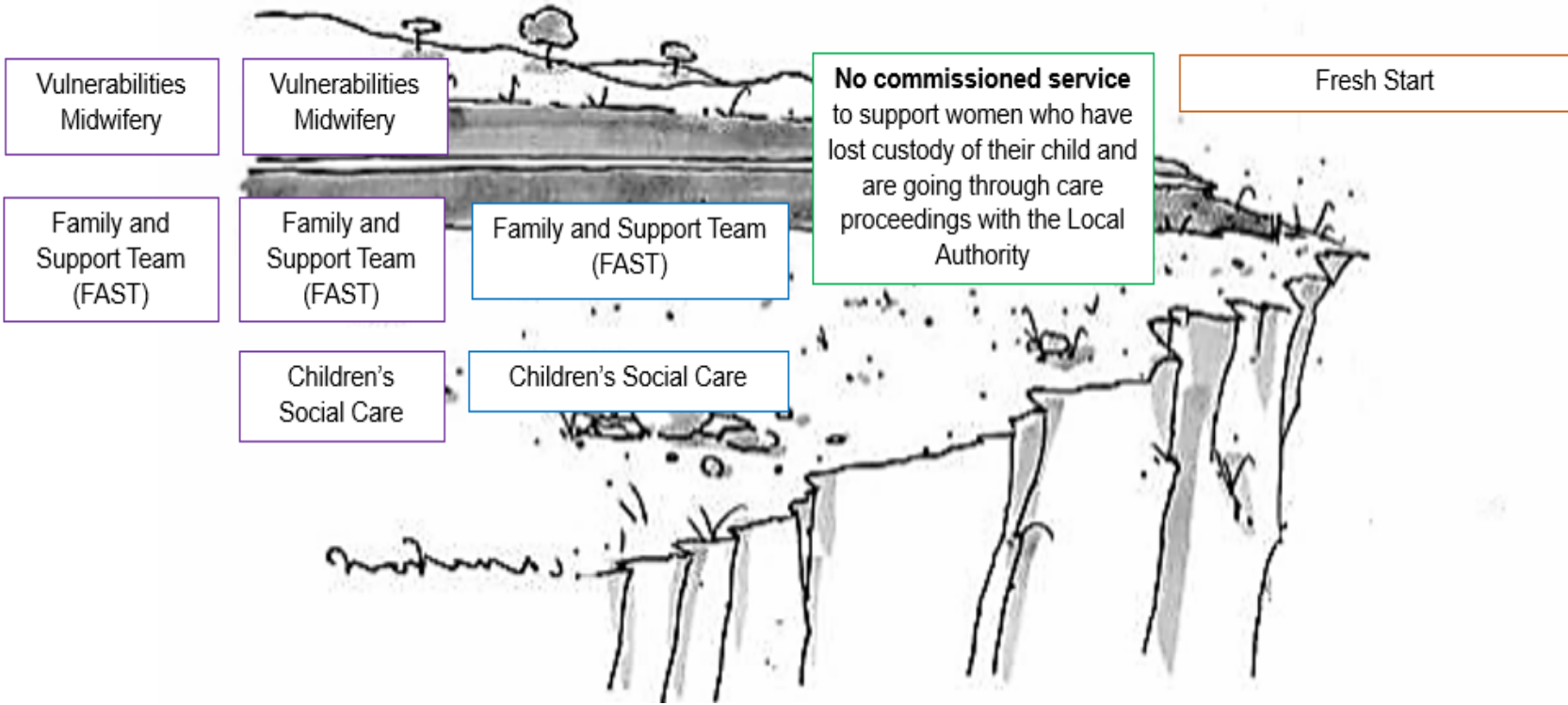
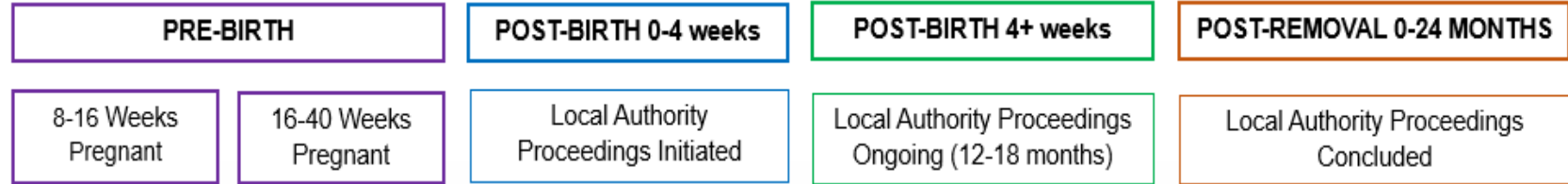


<https://changingfuturesheffield.info/our-learning>

System Change Objectives: Women & Child Removal



System Change Objectives: Women



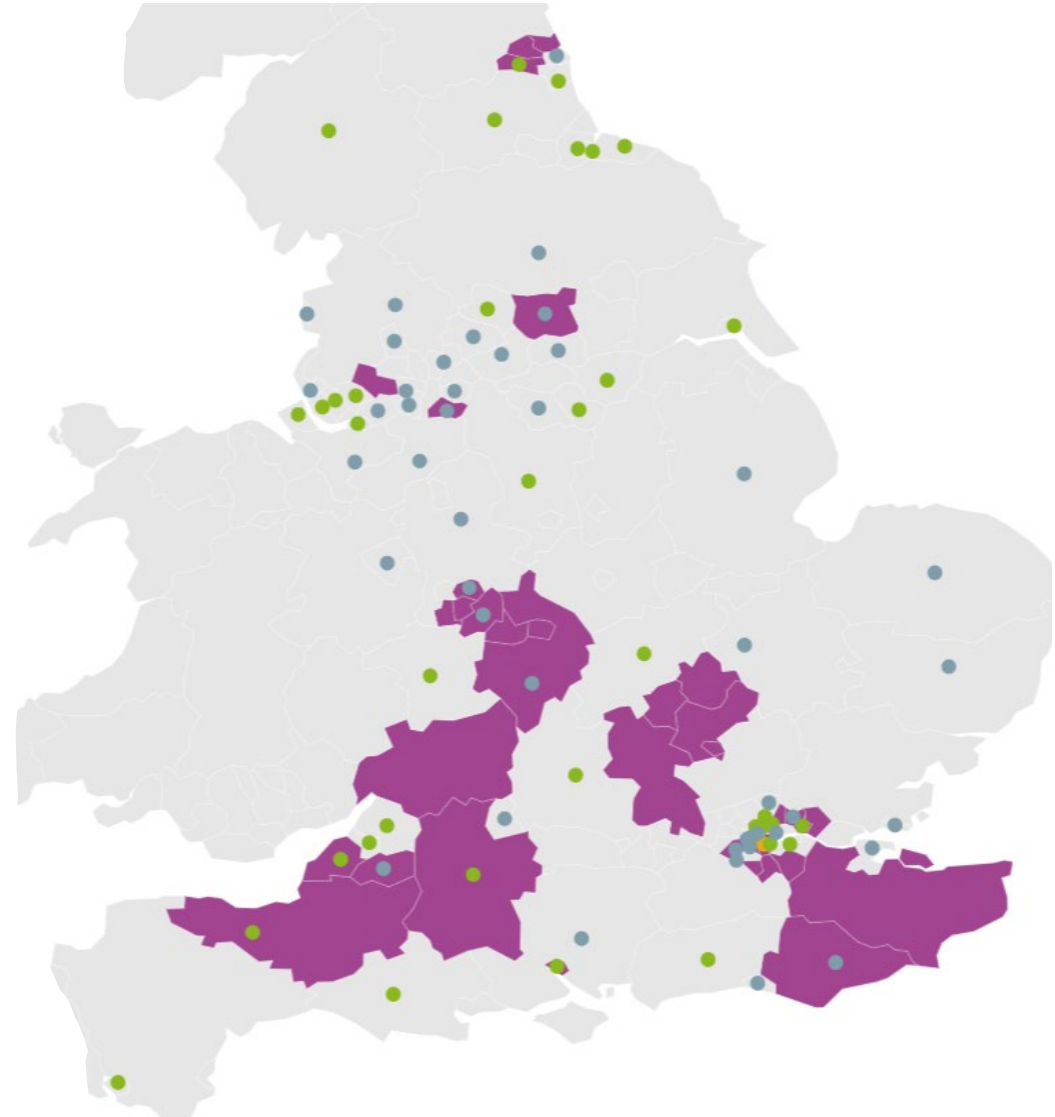
POST-REMOVAL 24+ MONTHS

No commissioned service to support women who've experienced child removal

Therapeutic services have limited capacity and are dependent upon specific need e.g. domestic and sexual abuse, trafficking, bereavement

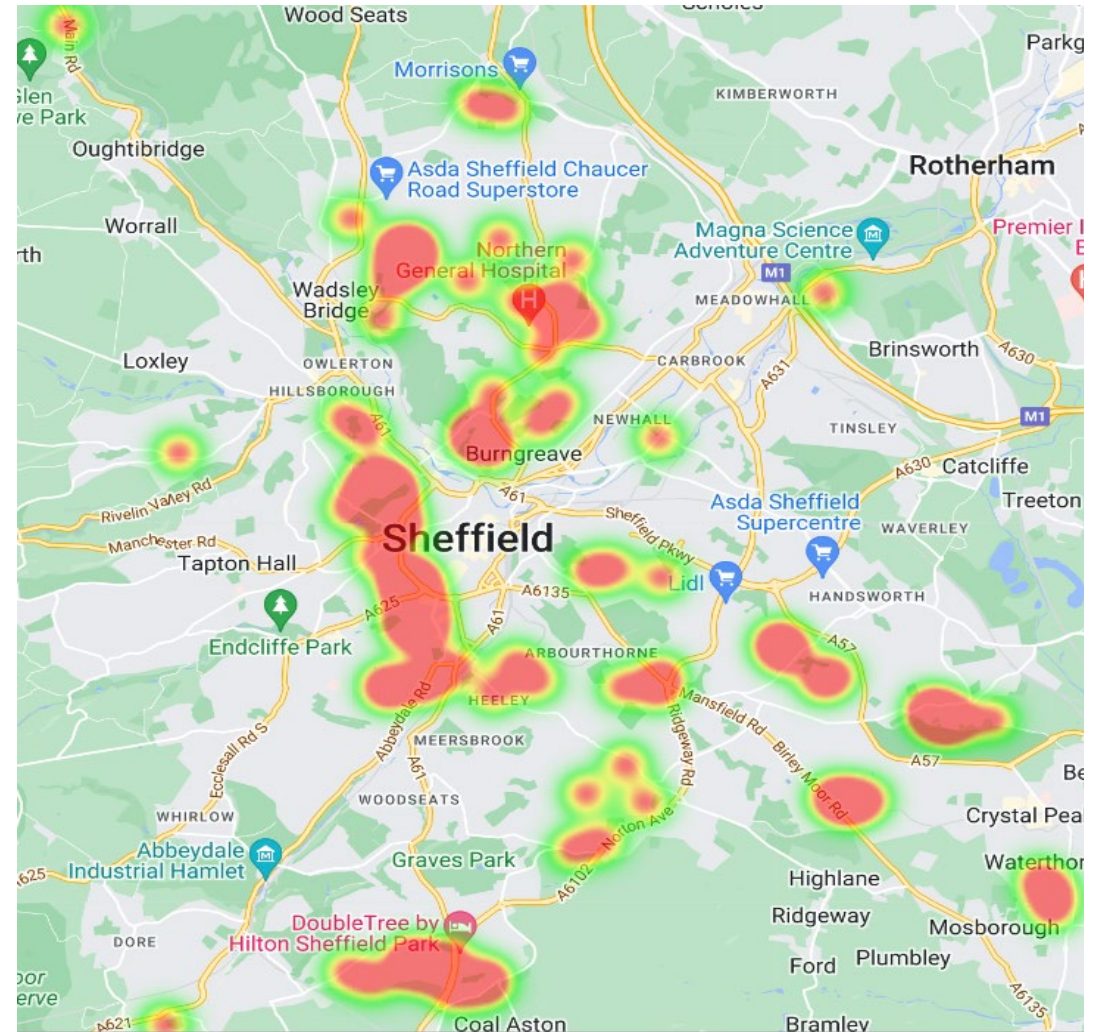
System Change Objectives: Women

- Age
- Time since removal
- Contraceptive choice
- Custody of remaining children
- Stops if mother becomes pregnant
- Starts once proceedings have concluded



System Change Objectives: Cuckooing

- Quantative data – Council Housing, Adult Safeguarding, Shelter, housing providers
- October 2020 – October 2022 – 166 individuals identified as victims
- In 2022 there was a 43% increase in victims



System Change Objectives: Cuckooing



- Victim profile –
‘White British, aged 36-45 with a history of homelessness and current substance use & mental health support needs’
- a significant proportion of women identified as victims were also known victims of Domestic Abuse
- There is a risk that conflation between these concerns has resulted in an underreporting of female victims in relation to Cuckooing

System Change Objectives: Cuckooing

- Strong multi-agency partnership approach & joint protocol
- Data collection process
- Training for frontline practitioners which includes proactively identifying intersecting identities and needs
- Positive community links
- Role of peer support



System Change Objectives: Acquired Brain Injury



Generate a better understanding of:

- lives lived within the margins of society when accompanied by the additional burdens of an unrecognised and untreated brain injury
 - the professional practices and organisational backdrop of services that might offer support to brain injured people
 - how research in such contexts might be conducted effectively
- The research team aims to interview male (3) and female (3) individuals that have been screened for brain injury as well as professionals (4) who are attempting to provide support to this cohort

What have we learned so far?



- This is a *longer than 3 year job*. Some other Changing Futures areas had existing services and programmes funded by a previous Govt programme (Fulfilling Lives) and are seeing more embedded change after 7 or 8 years.
- Work with individual people is *labour intensive*, takes *patience and persistence*, but can really *deliver changes for the better*. Some people engaged with the programme have sadly passed away, but there are many others who are likely still alive in part because of the support they have had.

- The Programme has directly supported 92 people, but the initial data work identified a potential 3000 people in Sheffield who met the criteria for severe and multiple disadvantage. The good work that has been done in the programme is arguably nowhere near enough to deliver large scale strategic change yet.
- The Govt programme aimed to work with *the most severely affected people*. This makes achieving lasting change hard and has meant people who have slightly lower, but still very severe, needs have not received the same support