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A Social Return on Investment (SROI)
study of the Positive Outcomes
Project (POP)



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Key Findings and Executive Summary

The Positive Outcomes Project (POP) is a one of a kind services based in the centre of Glasgow. It was originally developed by a joint proposal between [Police Scotland](#), [Glasgow Health and Social Care Partnership](#) (GHSCP) and is now supported by lived experience input through [Aid & Abet](#). This service is **the only service in Glasgow where Police Scotland and Glasgow Health and Social Care Partnership work simultaneously sharing information from different databases and jointly case managing in an equal partnership**. The **primary objectives** of this service are **to stabilise people's addiction issues and to reduce their persistent offending**. The service supports individuals who live very complex and chaotic lifestyles.

A Social Return on Investment (SROI) study is a method of analysis that includes both qualitative and quantitative data. **This specific type of study enables the social, personal and environmental outcomes of a service to have a monetary value assigned to them**. This applies a holistic perception on whether the service/enterprise that is being analysed is valuable and cost-effective to the individuals who are using it¹.

The Social Return on Investment (SROI) study was investigated in 2019 and the report was written by Sophie Scott (4th Year [BA Education & Social Services Degree](#) student at Strathclyde University) with support from Margaret Smith (Policy, Planning, and Development Officer at [Community Justice Glasgow](#)) in co-operation with the Positive Outcomes Project (POP) staff and service users.

It was found that the Positive Outcomes Project (POP) service produces a Social Value range between

£1,572,789.26 which equates to a Social Return of **£7.50 per £1 invested**
(based on a duration of 2 years sustained outcomes)

£834,005.45 which equates to a Social Return of **£4.45 per £1 invested**
(based on 1 year of sustained outcomes)

¹ <https://www.nefconsulting.com/our-services/evaluation-impact-assessment/prove-and-improve-toolkits/sroi/>

Introduction

This report is called a Social Return on Investment (SROI) study and focuses on the changes services have made to the individuals using the service (impact).

Scope

The activity being measured in this study is an analysis of the work that the Positive Outcomes Project (POP) aims to achieve. In turn, this will reveal what the service is doing well and what could be improved to increase the service provision.

This study measures the outcomes successfully achieved by the service users and the staff who provide the service at the Positive Outcomes Project (POP).

OUTCOME

The individual's change that occurs as a result of attending the service.

IMPACT

The connected/total value of all outcomes that have successfully been achieved.

Statements from service users at POP

"I got my life back thanks to POP"

(SU6)

"If I wasn't attending POP, I'd be in the jail"

(SU1)

"POP has given me the best help and support I have ever had"

(SU2)

"Working with POP has allowed me to know that there is someone out there that cares about me"

(SU8)

Positive Outcomes Project (POP)

Positive Outcomes Project (POP) is a **unique service that provides an outstanding level of support to the most vulnerable individuals**. They support **predominantly males who have experience of chaotic drug/alcohol misuse and have also been involved in persistently committing crimes**.

If an individual is suitable for the service and meets the criteria, then POP will support them to be considered and presented with treatment which will aid them to minimise their drug/alcohol misuse and reduce their reoffending. Unceasing engagement with **this service is completely voluntary and is the individuals own choice**. Staff work thoroughly with the individual to provide a valuable relationship with community treatment whilst observing their continuing offending. If individuals fail to maintain contact with the service, then staff will **provide an effective outreach service** to try and encourage them to come back and engage with the service and the support. Due to the level of vulnerability and the chaotic nature that the individuals who engage with POP have, **the outreach work that staff does often extends to scouring the streets looking for them**.

The main objectives of this service are to reduce levels of alcohol/drug misuse, reduce levels of persistent crime, reduce drug related deaths and promote community safety.

The staffing arrangements of this **service consists of Police Officers, Addiction workers and a Recovery Coordinator who has lived experience**. The use of a recovery coordinator in this service is key (as noted **by the service users themselves**) **to the service's success** as it allows the service users to observe that their life can change and improve for the better as they are a living example of this. Additionally, it **helps break the barriers towards Police Scotland** down as the service users look upon the Police to have a negative attitude about drug misuse and persistent offending. However, **engaging with POP allows the service users to appreciate that the Police officers involved in this service want to support them to make improved life choices and assist them in changing their life around**.

Methodology: What is a SROI study?

A Social Return on Investment (SROI) study is about calculating the broader aspects of a service and the outcomes that have been achieved through engagement at the service. Also, it looks at the changes that a service has impacted on people. This then results in enabling a service to continuously improve so that they can provide a service that will have maximum social impact for the people who are using it. Unlike other studies a SROI provides an opportunity to place a monetary value on the savings to the public purse against the investment and the wider community benefit.

In order to examine the work that POP does, semi-structured interviews were used with 10 service users who engage with the service. These 10 service users were all at different stages of their journey with the POP service. Some were just beginning, in the middle and then about to be signed off from the service. Successfully interviewing 10 service users was **one third of the full capacity at POP**, as they work and support only 30 service users at any given time. Furthermore, **interviews were undertaken with all staff at the POP service**. This included 2 Police Officers, 2 Addiction Workers, and a Recovery Coordinator. The use of semi-structured interviews allowed a discussion to be had and allowed for all participants' opinions and views to be stated.

National Context

In the year 2016-17, there were a total number of 33,435 offenders in Scotland with a total reconviction rate of 28%². In Scotland, **the average annual cost per prison place per prisoner is £33,091³ compared to investment in POP of £8,066 per person over a 12-month period** (based on total annual investment in the service / capacity for service users in a given financial year). Furthermore, the Scottish Government estimates that the total economic and social costs of reoffending are around £3 billion a year⁴.

POP's central focus is to stabilise their service user's addiction and reduce their continuous reoffending. Statistics from **Scottish Prison Service (SPS) concluded that 71% of individuals were found to have tested positive to having illegal substances in their system at the time of being imprisoned⁵**. In addition, there are suggestions surrounding such crimes like shoplifting being committed with a reason to gather funding

² <https://www2.gov.scot/Topics/Statistics/Browse/Crime-Justice/Datasets/ReconvictOffendDatasets>

³ Scottish Prison Service Annual accounts <http://www.sps.gov.uk/Publications/Publication-5433.aspx>

⁴ <http://www.howardleaguescotland.org.uk/news/2014/october/scottish-imprisonment-rates>

⁵ <https://www.scotpho.org.uk/media/1641/sps-addiction-prevalence-testing-2017-18.pdf>

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to source an individual's drug/alcohol dependency⁶. There is a strong desire to significantly reduce reoffending rates due to the significant high cost of reoffending, it destructs communities, wastes potential and the impact it has on the individual who is incarcerated. Community Justice Glasgow shares a focus of reducing reoffending as well as POP. Community Justice Glasgow works to successfully review already existent partnerships between services and their contributions. Also, they ensure that new services can develop and provide support to people who are continuously reoffending with the view of putting the correct support in place that is easily accessible for people who reoffend.

Homelessness in Scotland is a very demanding issue which is proving to be a challenge to eliminate. There are a variety of reasons as to why a person may become homeless, some of these are: shortage of housing, poverty, being without a job and life occasions that they may have endured. Also, **people can become homeless when they are liberated from prison**, leave the army or leave the care system. **Mental health illnesses, drug and alcohol misuse, and breakdown of family relationships can be a trigger for some people to become homeless.** These are common issues amongst the service users at POP and a key part of the work that POP undertake is to work towards stable, suitable accommodation. **Homelessness is a key underlying driver that contributes to an individual committing crime.** There was a total of **3,229 people in the year 2018-19 who became homeless due to involvement with criminal behaviour⁷.** Moreover, **3,193 people became homeless due to being dependent on drugs/alcohol.** In the year 2018/19 statistics demonstrate that there were 36,345 homeless applications submitted and 29,894 households were considered as homeless. These horrendous statistics estimate that a household becomes homeless every 18 minutes in Scotland.

In Scotland, there are several **changes being made to the welfare system which is having detrimental consequences on single individuals and families.** POP works with and supports individuals who **persistently offend therefore, some of these service users may be incarcerated on more than one occasion and who are particularly vulnerable to the negative impact of recent welfare changes.** People entering and leaving prison are at a high chance of confronting difficulties with being in receipt of the correct benefit they are entitled to. **Current reforms to the benefit system are triggering homelessness for some people and causing more complications for people who are already experiencing homelessness.** The launch of Universal Credit is the core setback that is initiating challenges for individuals as this benefit (Universal Credit) substitutes all other benefits in to the one and is predominantly a monthly

⁶ Community Justice Glasgow Annual Report 2018-19. <https://www.glasgowcpp.org.uk/CHttpHandler.ashx?id=46954&p=0>

⁷ <https://www2.gov.scot/Topics/Statistics/Browse/Housing-Regeneration/RefTables/homelessness1819tablescharts>

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payment. The Scottish Government has a duty to safeguard people who are experiencing homelessness and ensure that they have the correct financial support available. Similarly, services who work with people who are experiencing homelessness are attempting to provide universal support so that the homeless people they support can have access and be in receipt of the correct benefits.

Local Context

In Glasgow, there are several similarities with the national picture for the amount of people experiencing homelessness. In response Glasgow Health & Social Care Partnership has introduced the [Housing First Rapid Re-Housing Transition Plan](#) Model to eradicating homelessness. However, this model is in its infancy in Glasgow and there are still a high number of individuals who declared as homeless. **POP advocates in behalf of its service users to ensure that they are able to benefit from the Housing First Model.**

Glasgow Housing First is an approach which delivers mainstream tenancies to individuals who are 18 and over, declared homeless and misuse drugs/alcohol. This approach places people who are homeless directly into a mainstream house which increases their opportunities of accessing community support, be part of a community and improved health care. The person is offered wraparound support where they choose whether they would like to accept it. The aim of this approach is not only to try and eradicate homelessness but is also, to give everyone a chance regardless of their circumstances and challenges that they are up against.

Glasgow Health and Social Care Partnership (GHSCP) has a vision to bring all health and social care services in to one community, full of partnership working where they support people and help them flourish. The GHSCP puts the responsibility of planning and developing health and social care services on to the local authorities. They must ensure that they are effectively delivered to those who require the services.

The Theory of Change

Research shows that many **individuals that experience homelessness have increased chances of being involved with drug/alcohol misuse and offending issues**. It is estimated that **5,700 people in Scotland per year experience all of these multiple disadvantages**.

The service users who attend POP reported in their interviews that due to the support they have received through the service they now think about their actions before offending which often prevents them from going through with the crime. Additionally, **majority of the service users** have learned to make better informed decisions about their drug/alcohol misuse and **have reduced their levels of misuse**.

Social Return Calculation

The social return calculation could be completed only after a decision was finalised about how long the changes produced by POP would last. In an SROI the duration of time that the outcome lasts for is accounted so that future values can be calculated. Due to the chaotic and complex lifestyles that the service user group POP works with has, this calculation was completed for a one year and two year period.

It was found that the POP service generates Social Value in the range of:

- 2 Year period - £1,572,789.26 which equates to a Social Return of £7.50 per £1 invested
- 1 Year period - £834,005.54 which equates to a Social Return of £4.45 per £1 invested

Recommendations

Through completing semi-structured interviews with both the clients and the service users there were recommendations that were highlighted so the POP service could be improved. Recommendations that were highlighted from the service users were:

- If POP could have a **premise like [Tomorrow's Women Glasgow](#)**
Having a **key worker system implemented for when their original addiction worker is off**. The Majority of the service users emphasised that they hoped for POP to have a premise where they could visit and sit in. Tomorrow's Women has a community justice centre for women who have

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been involved in offending. This centre is a place where the women can go, sit, have a cup of warm tea and a chat with someone. The men at POP have no premise to go to therefore, the recommendation they highlighted was that they would like somewhere similar for them to go to. Having a key worker system was another suggestion from the service users as they all have a specific addiction worker that they work with and who supports them. So, the idea of a key worker system was that if their set addiction worker was off, then they will be aware of what staff member they will be working with. This was a suggestion that was emphasised as it has taken time for them to build trust with their original worker therefore, working with someone who they do not usually work with may present as difficult and challenging for them.

- Throughout the interviews with Service Users the **availability and support of the Lived Experience Co-ordinator was a key element of their journey** towards stabilised alcohol & drug misuse and in turn reduced / stopped levels of offending. **Due to caseload access to the co-ordinator at times of specific need could be limited.** Therefore the recommendation is to increase this support as a matter of urgency.
- A final recommendation that I would make as being a student on placement and observing the way the service operates, I would suggest that there should **be improvements surrounding the lack of access to information.** The Police who work within POP have a database that they can monitor criminal activity from service users who are engaged with the service. The addiction workers work from another database where they store all information on about service users including their observations and concerns, they may have when working with them each week. The difficulty that is presented with this is that the Police working at POP do not have access to this database therefore, they do not get any access to this information. Potentially, this could pose strong difficulties for staff at POP. An example of a difficulty that they may be challenged with is if both addiction workers were off for unforeseen circumstances then the Police who work at POP will have no access to any information on the service users apart from the knowledge that they already have from perhaps supporting them on an occasion before. For that reason, I would suggest that **accessing information should be reviewed** in the hope that the Police staff have accessibility to this data.

Appendices

Appendix 1 (Case Studies)

The individuals in these case studies will be known as AB and YZ to ensure all identities remain anonymous.

Case Study AB

Background

AB is a 49 year old male who started using drugs at a young age and reports that he was involved in gang related activities from the age of 14. AB is addicted to Heroin and Street Diazepam and was not using any prescribed medication or Opioid Replacement Therapy (ORT). He resides in privately rented accommodation and has several health issues including cancer.

Previous Convictions/Offending

AB has 37 previous convictions mainly related to Thefts /Acquisitive crimes but also including drug misuse and road traffic offences.

Initial Engagement and Assessment

AB was initially assessed by the Drugs Court for a Drug Treatment and Testing Order (DTTO) however on attempting to engage with him, the DTTO acknowledged that he was unsuitable due to memory issues and was failing to attend any appointments or testing orders on the correct day or time. POP were asked to assess AB as a potential client. A POP Addiction Worker was allocated the assessment and Recovery co-ordinator/Peer Mentor was asked to also attend and engage with AB as he had previously not engaged with any Services. The initial assessment identified AB was self-medicating for pain issues relating to his cancer treatment by smoking heroin and that he was offending to support his addictions. AB also confirmed he was not taking any ORT as he did not wish to be and assumed he would be prescribed methadone.

Addiction/Healthcare

The POP Recovery Co-ordinator had an immediate rapport with AB and was able to discuss alternative ORT's. The Recovery Co-ordinator then advocated the DTTO medical staff to review AB's treatment and persuaded the DTTO Doctor to prescribe Suboxone over the standard methadone prescription. To tackle AB's ongoing pain issues, the Addiction Worker and Recovery Co-ordinator contacted and support AB's attendance at his GP's office resulting in him being prescribed a daily dispense of pain relief medication.

Finances

AB was only receiving basic payments from DWP and was struggling accordingly. Enquiries by the POP workers confirmed AB was eligible for but had not received his PIP payments for 2 years as DWP did not have his current contact details. The Recovery co-ordinator worked with DWP and AB to gather all the necessary documentation required to re-start his PIP payments and for the back payments to be released. The Recovery Co-ordinator then arranged and support AB in opening a new bank account.

Recovery

The Recovery Co-ordinator regularly visited and contacted AB building an immediate working relationship that enabled AB to be challenged about his associates, addictions and how he spent his days. AB was accompanied by the Recovery Co-ordinator to various Recovery Cafes enabling him to be introduced and develop new friendships within the recovery network. POP also arranged for AB to attend a camera filming course organised by Community Justice Glasgow.

Offending behaviour

Since working with POP, AB has made all his DTTO linked appointments and court appearances and passed several drugs tests. Although not suitable for a full order, the changes to his attitude, life and behaviour were acknowledged by the court and his sentences were deferred accordingly. AB has been charged for 2 shoplifting offences since starting to work with POP which is a significant reduction in his previous offending behaviour.

Current Position

AB is now on a prescription and has reduced his drug intake to occasional use of Street diazepam only. He is still within his private accommodation and is now in full receipt of his benefits. He continues to attend Recovery initiatives across Glasgow. Unfortunately AB has committed a further two offences since he has started working with POP and has been challenged about this. Work is ongoing in relation to his offending behaviour and to support him in his recovery journey.

Case Study YZ

Background

YZ is a 39 year old male who started using illicit drugs from a young age. YZ was residing with his mother, however this was a complex situation and volatile relationship as YZ blamed his mother for his father's suicide 2 years earlier. YZ had also found his father deceased which had impacted on his mental wellbeing. YZ is addicted to heroin and regularly uses Street Diazepam.

Previous Convictions/Offending

YZ has over 77 previous convictions including thefts, housebreakings, drug possession, assaults, and Breach of the Peace etc.

Initial Engagement and Assessment

YZ agreed to work with POP after being approached by POP workers at the Glasgow Sheriff Court in February 2019. He had been assessed from his previous police and social work records as being suitable for the POP service due to his chaotic lifestyle, addictions and offending behaviour. An initial home visit, also highlighted the issues with YZ's housing due to the volatile relationship with his mother which caused numerous arguments and ultimately resulted in the POP workers removing YZ from the house for both YZ and his mother's safety.

Accommodation

Due to the necessity of removing YZ from his home address, POP workers accompanied and assisted him in registering as homeless. This resulted in a period where YZ was attending the local night shelter and sleeping rough. Continued advocating with the Housing department by POP resulted in YZ being housed in the Newlands Project, Simon Community. Being accommodated within the project improved not only his living conditions but provided YZ with further support and improved his drug use and wellbeing. This initial placement ultimately lead to YZ being offered his 1st temporary furnished flat.

Addictions/Healthcare

YZ's drug use significantly deteriorated whilst he was homeless. He was regularly overdosing with Street Diazepam resulting in hospital admissions and serious concerns for his wellbeing. During this time POP workers and in particular the Recovery Co-ordinator ensured YZ had regularly safety, trigger causing and harm reduction discussions including ensuring he was receiving his script and had a supply of naloxone.

Once YZ was accommodated within the Newlands Project he did go through a period of stability but there were short periods of chaotic and offending behaviour. These were usually linked to his use of street diazepam however there were no overdoses and these times were of a shorter and less intense nature than previously.

Offending behaviour

YZ's offending behaviour did significantly decrease after he started working with POP. He still did commit offences and these were linked to his occasional and reduced use of street Diazepam. YZ was incarcerated for a short time but POP continued to support him and ensured his accommodation was secured for his release to maintain the overall improvement in his life. As YZ was more stable and able to engage with Criminal Justice Services he was able to be assessed and was accepted on a Drug treatment and testing order (DTTO) which would not have been possible before POP started working with him.

Finances

YZ was assisted by the POP worker with his ESA and PIP applications to ensure he was in receipt of his entitled benefits.

Recovery

The Recovery Co-ordinator supported YZ's attendance at some of the Recovery Initiatives in the Southside of Glasgow and linked him into the Build a Bike Course (Common Wheel). The Recovery Co-ordinator also spent time with YZ working on his attitude towards recovery and his drug use/offending behaviour.

Current Position

YZ is no longer an active POP client as he is currently successfully complying with his DTTO, working positively with his DTTO Criminal Justice Workers and is providing clean drug screens. YZ has his 1st ever short term tenancy in a temporary furnished flat and is being supported by Housing first into a full time tenancy.

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Appendix 2 (Feedback on the service delivery that POP achieves)

These are some statements that were highlighted about the service delivery of POP when interviewing the staff who work within POP and the staff at the Drugs Court who oversee the work that POP achieves.

Question: What would the gap and impact be if POP was not available?

“The impact would be there would be an increased number of fatalities due to drug misuse as they would get lost and nobody would know where those people were. POP completes welfare checks and goes out on the streets looking for them until they track them down.”

Question: Why do you think people need this service?

“Due to the chaotic drug use, being homeless and not engaging with any statutory services, the vulnerability levels of these individuals are extreme. POP is a service that has no technical statutory order and allows easy engagement to be created. The outreach work that is provided is invaluable.”

Appendix 3 (Service User Transcripts)

These are some samples transcripts from the semi-structured interviews that were completed with the service users.

Interview SU 1

What difference has POP made to you?

"POP has helped me to turn my life around, it has encouraged me to become a more honest person. The staff are supportive and always giving encouragement, they help me to attend any appointments I have. There is always someone available."

In what ways has POP aided you to change things in your own life?

"POP has helped me to think differently and actually see my life changing for the better. I have outcomes now that I want to achieve. The staff have supported me to complete Housing First. All the support they give prevents me from panicking and worrying."

Are there any changes positive or negative, that you have noticed as a result of attending POP?

"My life has improved for the better, I have now started engaging in recovery."

Interview SU 2

What difference has POP made to you?

"I am treated like an individual. The staff give me great support and would do anything."

In what ways has POP aided you to change things in your own life?

"I have improved my housekeeping skills. The staff have helped me to attend appointments."

"I have got my own life back thanks to POP."

What do you value most about your relationship with POP?

"The staff. They have helped me to reduce my drug use significantly after 35 years. The help they give service users is indescribable."

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Staff at POP Questionnaire

1. What role do you play in the service provision of POP?
2. Why do you think people need this service?
3. What would be the gap and impact if POP was not available?
4. How do you see the service developing in the future?

Service User of POP Questionnaire

1. What difference has POP made to you?
2. In what ways has POP aided you to change things in your own life?
3. What do you value most about your relationship with POP?
4. Are there any changes positive or negative, that you have noticed as a result of attending POP?
5. Would you like any changes made to the service?