



# **SOCIAL IMPACT REPORT 2024/25**

## **Demonstrating our Social Value**

## EXECUTIVE SUMMARY

Bevan is a pioneering community benefit society rooted in the principles of equity, accessibility, and culturally appropriate care.

Inspired by the legacy of the NHS founder Aneurin Bevan, our services and ethos are designed to address deep-rooted health inequalities faced by Inclusion Health populations, including people experiencing homelessness, refugees and people seeking asylum, Gypsy, Roma and Traveller communities and sex-workers across West and North Yorkshire. At the heart of Bevan's service delivery model are four key services:

- 1. Specialist Inclusion Health GP Services:**  
*Culturally responsive, walk-in services embedded within trusted community settings, helping individuals overcome barriers to GP registration, language, stigma, and exclusion.*
- 2. Outreach Services:**  
*Mobile and community-embedded teams engaging socially excluded people in trusted environments including street-based services. This includes hospital in-reach teams and support in intermediate care environments.*
- 3. Wellbeing Services:**  
*Wraparound support, including 1:1 mentoring, advocacy, housing and welfare support, employability and social prescribing, designed to enhance long-term outcomes.*
- 4. Pilot Innovation Projects:**  
*Agile, test-and-learn initiatives co-designed with communities to address urgent gaps and emerging health needs.*

Running across our model is thought leadership and influencing of the system to enable better access for Inclusion Health groups in society and mainstream services. Collaborative projects with academic or research institutions aimed at generating evidence, evaluating service models, or contributing to policy and practice is core to our approach. This includes training the future workforce to better meet the needs of Inclusion Health populations. These partnerships typically involve data collection, analysis, and dissemination of findings to inform improvements in health and care services. It includes the creation and distribution of trauma-informed resources alongside workforce development for professionals to embed inclusion into their practice.

Bevan's Inclusion Health services combine clinical delivery, advocacy, and co-production to deliver maximum social value, centred not only on clinical outcomes and reducing health inequalities but also on providing people with dignity, trust, and inclusion.



## CONTENTS

1	Foreword .....	5
2	Our Vision, Mission & Values .....	12
3	Our Approach .....	17
4	Our Reach .....	22
5	Outcomes & Impact .....	34
6	Monetising our Social Value .....	40
7	Bevan Voices .....	44
8	Our Contribution to Public Priorities .....	56
9	Reflections & Learning .....	60
10	Looking Ahead .....	64

*Bevan has been brilliant. They have allowed me to overcome a 36-year drug addiction, and I have been clean for 2 years. They have helped me to stabilise my mental health and provided me with support such that I can now live in a house and function in a more mainstream way in society. — Person Bevan supports.*

## Section 1 - Foreword

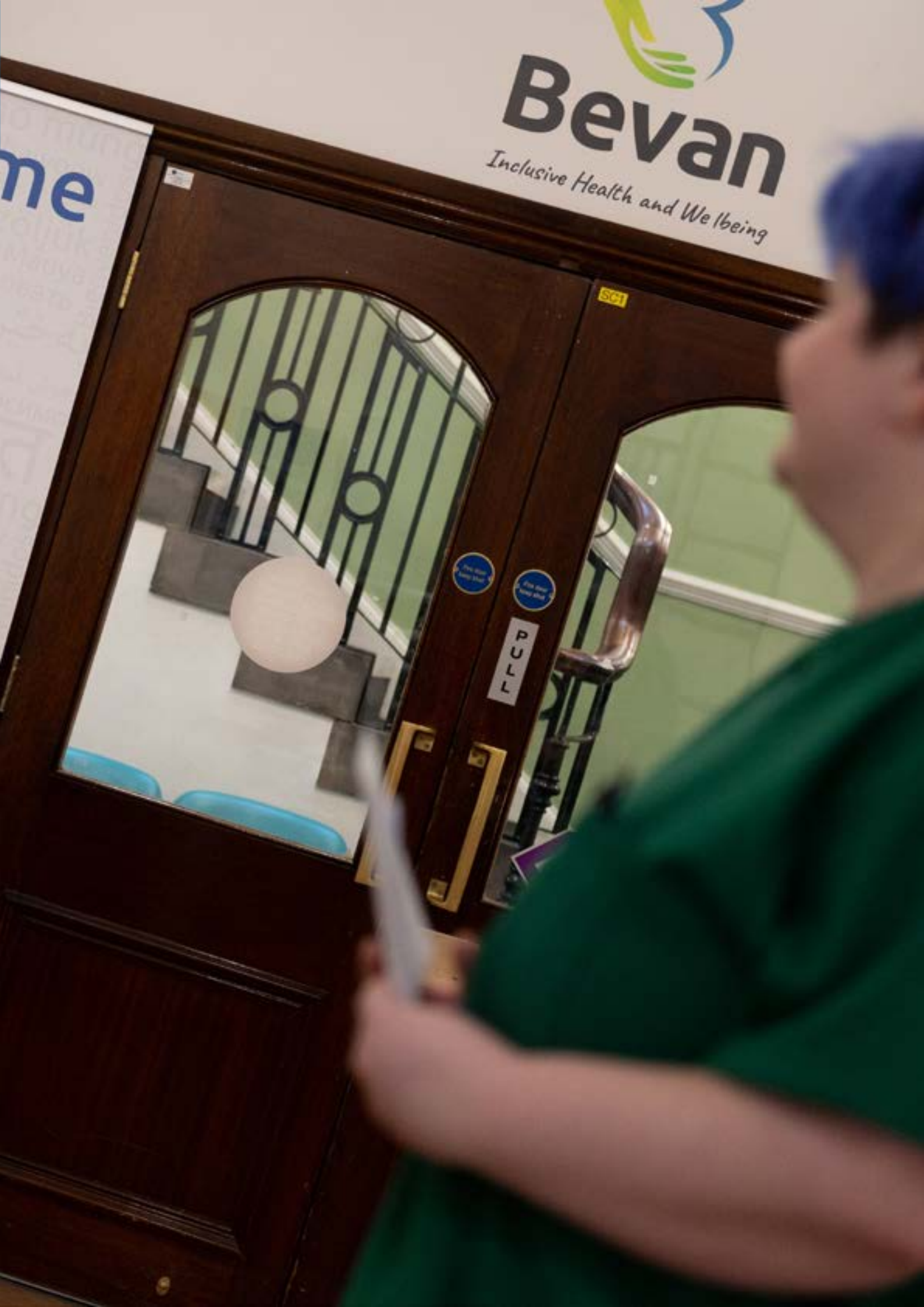




  
**Bevan**

*Inclusive Health and Wellbeing*

me



## FOREWORD

*We are proud to introduce Bevan's first Social Impact Report. This report comes at a time of increasing demand for our services and reduced spending, which affects those who need specialist services the most.*

*In 2024/25, Bevan supported over 13,000 people across West and North Yorkshire.*

*As a provider of Inclusion Health services, we work with the most marginalised individuals, families, and communities. These are people who often face the lasting effects of trauma and have the poorest health outcomes, leading to higher costs at crisis points rather than through early intervention or prevention.*

*Thanks to our integrated, cross-sector model, we have delivered services shaped for them, by them. We have restored their trust in systems and connected them to each other, reducing isolation and fostering community.*

*This is underpinned by our vision of **Health, Hope, and Humanity** for all.*

*This report offers more than statistics; it is a shared account of value created – financially, socially, and emotionally. For commissioners and funders, it evidences outcomes and returns on investment. For policy influencers, it shows how place-based integrated care models can meet national priorities. For our partners, it captures the power of our collaboration. For colleagues and volunteers, it recognises the impact you have daily and the difference you make with your compassion and tenacity. For those we support, it stands as a record of your strength and our commitment to ensuring your voice is heard and change happens.*

*Whether you are a decision-maker, a partner, or an individual Bevan has supported, this report is for you. It celebrates the difference made in one year at Bevan and calls for investment in inclusion, scaling what works, and never losing sight of the people behind the numbers.*

*Thank you to everyone who has walked this journey with us*



**Emma Perry**  
Chief Executive Officer



**Scott Darraugh**  
Chair

## FOREWORD

### Testimonials from our Partners

*"It has been a pleasure and honour working with and alongside Bevan Healthcare colleagues as part of my Inclusion Health role in the Reducing Inequalities Alliance. Bevan provide 'gold standard' primary care and holistic wellbeing support to some of our most socially excluded residents in Bradford, who often experience multiple disadvantage. They meet people where they are at, offering creative, accessible and integrated services. Most of all they offer a warm welcome to those who often feel the least welcome elsewhere. The staff's ethos should be an inspiration to all of us working in the NHS and public service."*

**- Myrte Elbers**

Reducing Inequalities Lead Bradford District and Craven Health and Care Partnership

*Working with Bevan has been a real eye opener. The wide range of services available, and the flexibility with which they are delivered is so unusual and compares very favourably with NHS provision in other areas. The value to "Inclusion Health groups" is that they can access so much within one trusted place. Solace works with vulnerable refugees and asylum seekers and see the difficulty people have in navigating complex systems, and as a result falling through the gaps. Our therapist based at Bevan highlighted this specifically in our recent evaluation report to Children in Need. She said that the young people she worked with benefitted from receiving wrap around support from a range of professionals. It helped to make her therapy more effective as she was able to draw in expertise from social prescribers, volunteers, GPs, drop-in services and a range of others. Working together like this makes the support so much more than the sum of its separate parts.*

**- Kathryn Ashworth**

CEO at Solace

*Bevan are an absolute joy to work in partnership with. They are an organisation that simply 'gets things done', driven by a passion to support communities most in need, Bevan don't see problems, only solutions.*

**- Abbie Wild**

Family Hubs Start for Life Project Manager

## FOREWORD

### Testimonials from our Partners

*Working with Bevan means being part of an organisation that transforms insight into impact. As partners they value the deep understanding of social issues and are committed to evidence-led innovation. They can convene voices across sectors and turn bold ideas into practical action. Bevan brings clarity, credibility, and courage to the table and bring people together to co-design solutions that combine rigorous research with lived experience to shape policy and practice that works for people. Their collaborative ethos lies in bridging sectors, amplifying unheard voices, and turning ideas into action, whether influencing decision-makers or empowering communities, their work drives progress where it is needed most. Bevan's approach is rooted in trust, evidence, and innovation to empower people and communities and are trusted for their integrity, valued for their expertise, and known for making a difference.*

**- Carolyn Sadler**

Preconception and Maternity Lead, City of Bradford Metropolitan District Council

*I think having Bevan out with us on outreach every week is amazing. It's a unique service and one every town and city should offer. Having physical and mental health provisions that the most vulnerable and marginalised in society can access is so beneficial and lifesaving at times. Without this service I believe we would see an increase in A&E/hospital admissions, and an increase in mortality rates. The staff are brilliant, and I wish I had a GP service like this.*

**- Nicky Pickup**

Independent Sexual Violence Advisor, Basis

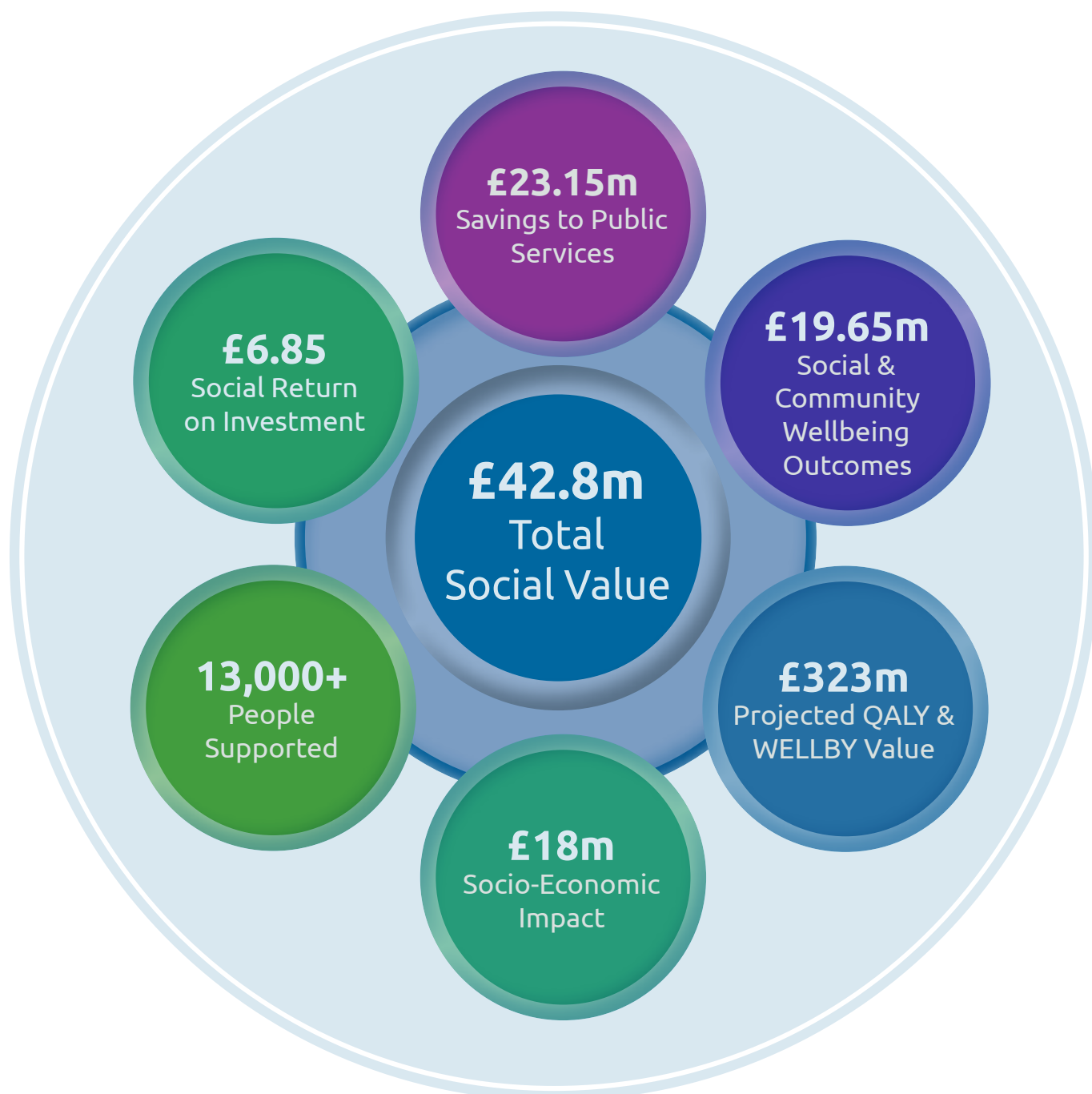
*As a commissioner committed to reducing health inequalities across the Wakefield District, I am proud to highlight the considerable social value delivered by Bevan Healthcare in supporting our Inclusion Health populations. Their person-centred, outreach driven model has transformed how we engage, support and sustain health outcomes for some of our most vulnerable populations. Through their roving outreach teams and mobile Bevan Bus clinics, Bevan has provided accessible, trauma informed care directly to where people live and gather including temporary accommodation, hostels, asylum seeker hotels and community drop-ins. Their presence has not only improved individual health outcomes but has helped shift the system towards integrated, responsive and dignified care for those at risk of exclusion.*

**- Natalie Knowles**

Primary Care Partnership and Transformation Lead Wakefield



## OUR SOCIAL IMPACT AT A GLANCE



**QALY: Quality-Adjusted Life Year**

(1 QALY = one year in perfect health)

Commonly used by NICE (National Institute for Health and Care Excellence) to assess cost-effectiveness of treatments.

**WELLBY: Wellbeing-Adjusted Life Year**

(1 WELLBY = a 1-point increase in life satisfaction for one person for one year)

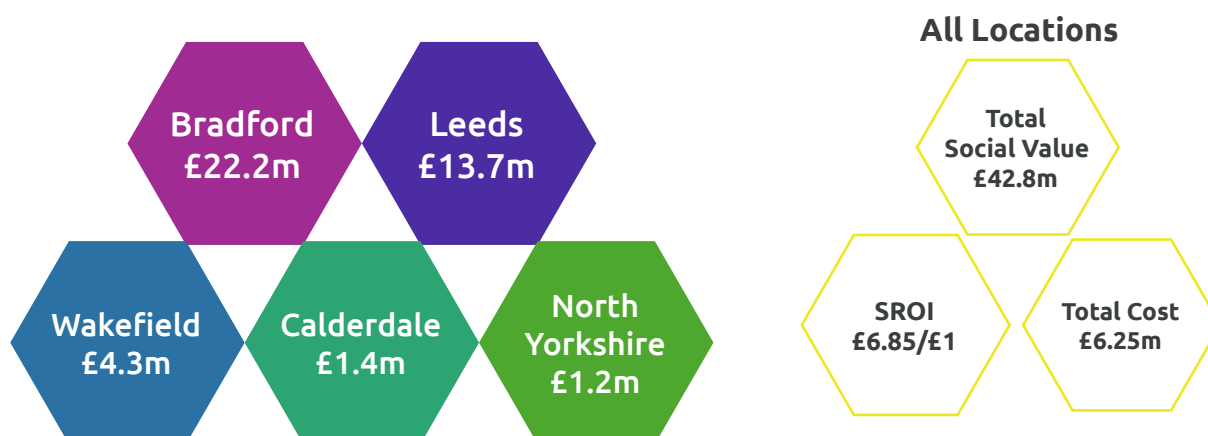
It values changes in subjective wellbeing (e.g., life-satisfaction on a 0–10 scale).

**Sources:** [www.nice.org.uk](http://www.nice.org.uk) and Supplementary Green Book Guidance

## OUR SOCIAL IMPACT AT A GLANCE

### About our Social Impact Report

Our report provides a comprehensive overview of the measurable impact delivered by Bevan across five local authority areas. Our largest social value footprint is in Bradford, followed by Leeds, Wakefield, Calderdale, and North Yorkshire.



Through our four core service types, Specialist Inclusion Health GP Services, Outreach, Wellbeing Services, Pilot Innovation Projects, we have generated substantial clinical outcomes and social value for some of the most marginalised people.

The report captures both the scale and scope of our work, highlighting the effectiveness of its inclusive, community-led health and wellness model in delivering significant value for money, social value and societal benefits.

In 2024/25, Bevan generated a total of **£42.80 million in social value** at a delivery cost of £6.25 million, resulting in a strong Social Return on Investment (SROI) of £6.85 for every £1 invested. These figures reflect our efficiency and our commitment to improving access, equity, and long-term outcomes across the region.

- Improved mental and physical health and wellbeing
- Reduced use of emergency healthcare services
- Increased housing stability and engagement with support services
- Progression toward employment, volunteering, and training opportunities
- Enhanced confidence, resilience, and hope

## OUR SOCIAL IMPACT AT A GLANCE

The 2024/25 Bevan Social Impact Report clearly demonstrates the transformative impact of a personalised, culturally responsive, community-embedded model of care.

With a Social Return on Investment (SROI) of **£6.85 for every £1 invested**, our approach not only delivers cost-effective health interventions but also meaningfully addresses the structural barriers that marginalised communities and individuals face in accessing services.

By combining clinical services with outreach, advocacy, and innovation, we have established our organisation as a regional leader in inclusive health.

The strong clinical and social outcomes delivered across Bradford, Leeds, Wakefield, Calderdale, and North Yorkshire reflect both the adaptability of our model and its alignment with the complex needs of diverse communities.

As health systems nationwide grapple with growing inequality and service pressures, this report highlights the value of inclusive, preventative, and locally rooted solutions.

Bevan offers a scalable and impactful delivery model for reducing health disparities and delivering long-term social value across the health and care landscape.





## Section 2 - Our Vision, Mission and Values





## OUR VISION, MISSION & VALUES

### **We are Bevan.**

**Our vision** is Health, Hope & Humanity for All.

We look to a future where everyone can access health and wellbeing support at any time, with respect, dignity and free from discrimination.

**Our mission** is to change the lives of individuals, families and communities who are the most excluded by removing barriers to get the support they need to live full lives.

**Our values** are Compassion, Innovation, Empowerment, Courage, Collaboration. We aspire to live these every day, whatever role we hold at Bevan, by doing things the '[Bevan Way](#)'.

It means that we work with every person who needs support in a holistic way, recognising that people have complex lives and we work with others to get the right help, at the right time. It means that we recognise that many people we support have experienced trauma in their lives, and the way in which we work is done in a trauma informed way. It means we put the person at the centre of their support, with dignity and respect underpinning all we do.

### **Our Commitment to Inclusion Health**

Bevan was created specifically to address and tackle health inequalities in Inclusion Health communities, through delivery of primary care and support to the homeless, refugee and asylum seeker population in Bradford back in 2011. Fast forward to the Bevan we are in 2025 and that commitment has never been stronger.

We now offer services for all Inclusion Health groups in Leeds, Bradford, Calderdale, Wakefield and North Yorkshire and our service offer has broadened to include a focus on wellbeing.

The external environment we are operating in has never been so turbulent, politically, socially and economically. We will continue to lobby and campaign to raise awareness and understanding of why Inclusion Health services are so important and as necessary today as they were over a decade ago.



## OUR VISION, MISSION AND VALUES

### The Communities We Serve and Why It Matters

At Bevan, we work with marginalised people from Inclusion Health backgrounds across five Local Authorities within West and North Yorkshire.

We support people experiencing homelessness, refugees and people seeking asylum, Gypsy, Roma and Traveller communities, sex workers, and others who face persistent health and social exclusion and discrimination.

Inclusion Health populations experience multiple and overlapping risk factors for poor health including poverty, insecure housing and complex trauma.

Healthcare barriers including stigma and discrimination, lack of culturally appropriate services and language barriers, exacerbate their risk of poorer health and social outcomes compared to the general population.

Our work matters because we strive to address the inequity experienced by Inclusion Health populations and ensure that everyone, regardless of their background, status, or circumstances has a fair and dignified opportunity to live a healthy life.

When these populations are excluded from care, it not only widens health and social inequalities but also places greater pressure on emergency and acute services, as support is often only sought during crisis.

By addressing the root causes of exclusion and delivering person-centred care that meets people's physical, cultural, and emotional needs, we can improve health and wellbeing outcomes, reduce avoidable systemic pressures, and build a more compassionate, inclusive, and cost-effective healthcare system for all.

*"Doing the right thing is also the smart thing: Inclusion Health and person-centred care reduce avoidable crises, protect overstretched services, deliver better value for the public purse, and—most importantly—bring earlier, dignified support to people most often excluded." — Emma Perry, Chief Executive*

## Section 3 - Our Approach







## OUR APPROACH

The Bevan approach is about accessibility, preventative care, and outreach, offering an integrated, person-centred approach to health and wellbeing that is tailored to the needs of under-represented people in the most vulnerable circumstances across West and North Yorkshire.

At its core, Bevan seeks to break down systemic and structural barriers that prevent people from accessing mainstream healthcare, particularly those who are experiencing homelessness, seeking asylum, living with uncertain immigration status, or experiencing multiple forms of exclusion.

Accessibility is delivered through walk-in, no-referral-necessary clinics based in our Leeds and Bradford GP Services, but also in trusted community settings, such as hostels, mosques, refugee support centres, and food banks.

These spaces reduce intimidation, stigma, and cultural disconnect, and allow people to receive healthcare in familiar, welcoming environments.

Services are offered in multiple languages, with interpreters and cultural mediators on hand, ensuring communication is never a barrier to care.

Preventative care is embedded throughout our work, with a focus on early intervention and long-term health improvement.

This includes routine health checks, vaccination outreach, mental health support, sexual health services, and social prescribing.

Rather than treating illness in isolation, we address the wider social determinants of health such as housing, nutrition, and employment thereby improving resilience and reducing future reliance on crisis care.

*Other surgeries are impersonal. Bevan sees you as a complete person - they don't just see the illness.*

**-Person Bevan supports**

## OUR APPROACH

**Outreach** is a cornerstone of our model. Bevan's mobile and embedded teams proactively engage with people in places they already trust such as hostels, drop-in centres, streets, and temporary accommodation, building relationships with people over time and reducing the fear and mistrust often associated with statutory services. This "go to them" model is especially critical for transient or disengaged populations who fall through the cracks of conventional healthcare systems.

*100% Bevan has made an improvement to my health. It is the persistence of the staff and especially the outreach team that have helped. Even if you don't want to engage one day, they will come back the next where other services will just leave you.*

**-Person Bevan supports**

Crucially, our approach is co-produced with the communities we serve, ensuring services are culturally appropriate, relevant, and dignified. This commitment to equity and inclusion not only improves individual outcomes but also contributes to significant social and health equity gains across the region, reducing emergency admissions, improving continuity of care, and building healthier, more resilient communities.

*The flexibility afforded by staff, as we are often just a few minutes late, as well as the interpreter services [make a difference]. Life would be very different if we were not a patient here. When we first arrived, we were struggling with our health. We are still struggling now but we are much better. Bevan has been a real help through this journey.*

**-Person Bevan supports**

Bevan sees the person. We listen and we work alongside the people we serve to deliver personalised care and support recognising that people need to feel in control of their own choices, feel respected and have hope.

*Bevan always makes a difference to my health. I have suffered with mental health and depression and self-harm. (I've) been coming here for many years and I know most of the staff and they told me: 'if ever you have a problem just call us and we can help' and that is what I do, and they sort it.*

**-Person Bevan supports**

## OUR APPROACH

We recognise that sustainable wellbeing cannot be achieved in silos. That's why we operate through an integrated, cross-sector model that brings together health, housing, wellbeing, and community outreach into one cohesive and integrated offer. What makes Bevan distinct is the way we deliver care through a joined-up system, with key elements including:

- Specialist Inclusion Health GP Services providing on-site primary care services which meet the diverse needs of our Inclusion Health populations in Leeds and Bradford
- Hospital In-Reach and Intermediate Care Beds: bridging hospital to home by optimising hospital admissions and providing a seamless transition to care outside of hospital.
- Outreach Teams & Street Health Vehicles (affectionately known as the '**Bevan Buses**'): delivering outreach through a multidisciplinary team to people experiencing homelessness including those experiencing street homelessness and people, living in hostels or housed in temporary or contingency accommodation
- Wellbeing Mentors: delivering trauma-informed social prescribing, case coordination and group-based activities as well as drop-in provision and helping people to make long-term changes and connections.
- Migrant health specialist teams: multidisciplinary teams delivering services to migrants in vulnerable circumstances including comprehensive initial health assessments for newly arrived migrants
- Services for children, young people and families delivering health and wellbeing support as well as therapeutic interventions to help to heal trauma.





## OUR APPROACH

Our work is place-based, trauma-informed, and grounded in co-production. While our service model flexes to local needs, our values remain constant, ensuring dignity, trust, and personal agency are at the centre of every intervention.

This is the Bevan in action — an organisation with an approach for reducing inequality, fostering community, and helping people reclaim a sense of stability, purpose, and belonging.



## Section 4 - Our Reach



A person with long, straight blonde hair is seen from behind, wearing a black hooded jacket. The jacket has the words "Bevan Street Health Team" printed in white on the back. The person is standing in front of a building with large arched windows. To the left, another person is partially visible, looking towards the camera. The background is slightly out of focus, showing some greenery and a bright sky.

**Bevan Street  
Health Team**



## OUR REACH

Bevan is engaged with a wide spectrum of marginalised communities, including people experiencing homelessness, people seeking asylum, refugees, sex workers, Gypsy, Roma and Traveller communities and other marginalised groups and individuals. We deliver targeted, person-centred services across five local authority areas: Bradford, Leeds, Wakefield, Calderdale, and North Yorkshire. Services were delivered through four primary models:

### 1. Specialist Inclusion Health GP Services

Inclusive services that enable individuals, especially those facing barriers to mainstream healthcare, to access primary care. This includes GP, nurse and pharmacist consultations, health screening, vaccinations, long-term condition management, and referrals. These services are designed to reduce health inequalities by making care available to the most marginalised and excluded populations.

### 2. Outreach

Proactive services delivered outside of traditional clinical settings to engage individuals who might not otherwise access care. Outreach typically involves meeting people where they are—such as on the streets, in shelters or hotels, or community spaces—and offering health assessments, screening and treatment, signposting, harm reduction, and support to connect with broader health and social systems. We also have teams working on an in-reach basis within hospital settings and Intermediate Care Beds to enable safe discharge or prevention of admission to secondary care.

### 3. Wellbeing Services

Our locally based services that address wider determinants of health and wellbeing, such as housing support, mental health care, employability and volunteering, 1:1 wellbeing mentoring, community connection activities, and social prescribing. These services are often delivered in partnership with voluntary, community, and faith sector organisations, and are designed to build resilience, reduce isolation, and improve quality of life.

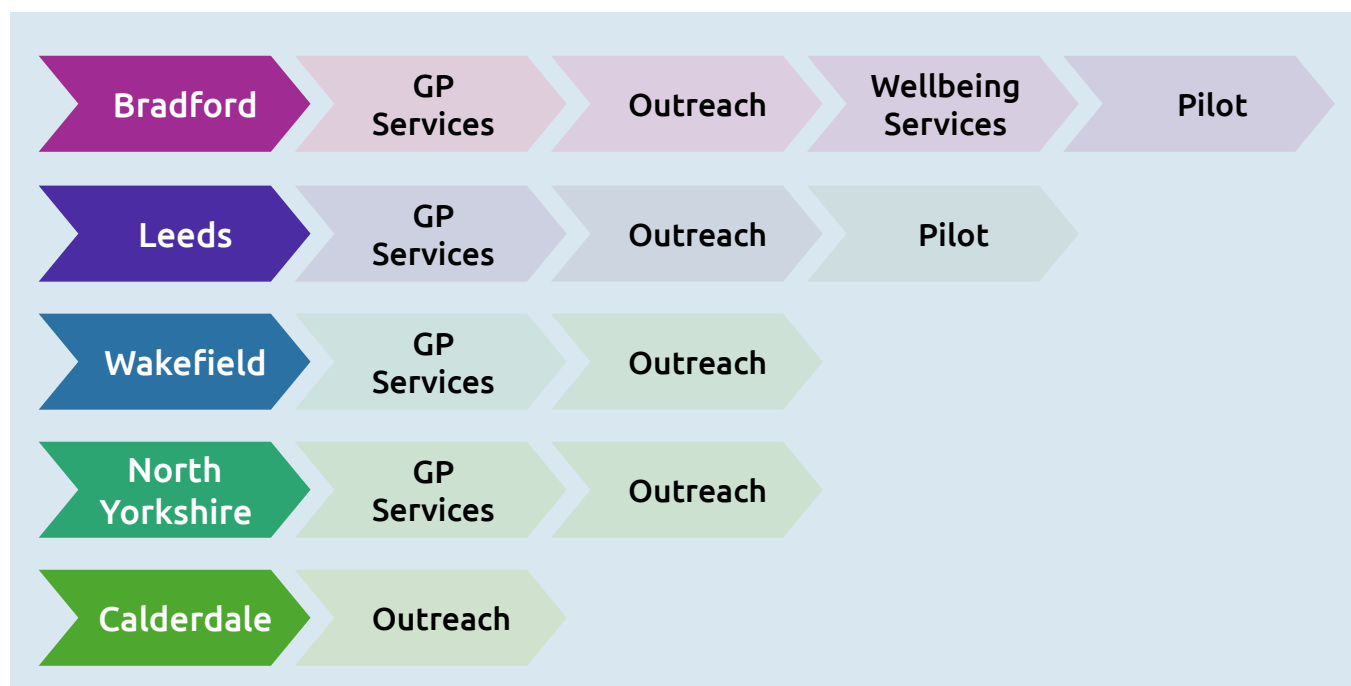
### 4. Pilot Projects

Time-limited, small-scale initiatives designed to test innovative approaches to service delivery or engagement, our pilot projects are used to evaluate the feasibility, impact, and scalability of new models or interventions before wider implementation. These may focus on specific populations, health conditions, or system improvements. We are proud to lead the way by using pilots to test proof of concept and pave the way for better Inclusion Health services.

## OUR REACH

### Overview of Our Reach

- **Total individuals supported through unique service interactions:**  
*Approximately 13,000 people reached in 2024/25 through both the Inclusion Health Surgeries and bespoke services that meet local needs*
- **Number of Local Authority Areas covered:**  
*5 Local Authority Areas – Bradford, Leeds, Wakefield, Calderdale and North Yorkshire with different services commissioned in each location.*
- **Colleagues and volunteers involved:**  
*We currently employ 129 full-time equivalent colleagues. In addition, we support 48 volunteers to help us deliver our services*
- **Total costs to operate all Inclusion Health services:**  
*£6,251,605*
- **Sources of funding:**  
*We receive a variety of funding from Primary Care Networks, Integrated Care Boards, Local Authorities, charitable trusts, grant makers and fundraising donations.*



## OUR REACH

### 1. Bradford - Comprehensive Service Coverage

Bradford includes the full scope of intensive service offering, encompassing Specialist Inclusion Health GP services, Outreach Services, Wellbeing Services, and Pilot Projects.

#### Key Services and Reach

Inclusion Health GP Surgery	Outreach	Mental Health Nursing	Sex Worker Outreach
<b>6,102 People</b> from Inclusion Health Groups	<b>715 People</b> experiencing Homelessness	<b>564 People</b> with mental health needs	<b>318 People</b> who work as sex workers
Asylum Seekers in Contingency Accommodation	Occupational Therapy	Hospital In-Reach	Special Allocations Service (SAS)
<b>465 People</b> who are asylum seekers	<b>248 People</b> experiencing homelessness and substance abuse	<b>161 People</b> experiencing street homelessness	<b>103 People</b> who are GP-excluded patients
Bevan Wellbeing Mentors	Volunteers for "Warm Spaces" & "Bevan Babies"	Cancer Safety Net Pilot	VCSE Trainees
<b>337 People</b> receiving community support	<b>30–80 People</b> supported through Bevan programmes	<b>31 People</b> experiencing issues related to cancer	<b>83 Trainees</b> upskilling & work-force development

*"The homeless lunch is a good opportunity to get out of the same four walls. It provides some structure to the day when otherwise we could just be drinking and doing drugs."*

– Person Bevan Supports



## OUR REACH

### Key Insights from Bradford

*Bradford remains Bevan's operational hub, with the most diverse and extensive offer across all service types.*

Bradford accounts for the largest volume and breadth of service delivery within Bevan's network.

It is the only location where all four of our services - Specialist Inclusion Health GP Services, Outreach, Wellbeing Services, and Pilot Projects - are active at scale.

The Inclusion Health GP Surgery in Bradford served nearly 6,000 people, while additional services addressed homelessness, mental health, sex work, employment support, and cancer screening.

Bradford's embedded community partnerships and long-standing local infrastructure allow for deep, wraparound support that meets both immediate and long-term needs, making it a model of fully integrated Inclusion Health delivery.



## OUR REACH

### 2. Leeds – Partial Service Coverage

Leeds had high outreach activity, especially among people experiencing homelessness, asylum seekers, and women at risk.

#### Key Services and Reach

Inclusion Health GP Surgery	Homelessness Outreach	Mental Health Nursing	Sex Worker Outreach
<b>4,022 People</b> from Inclusion Health Groups	<b>572 People</b> engaged with Outreach Team	<b>817 People</b> with mental health needs	<b>131 People</b> who work as sex workers
Asylum Seekers in Contingency Accommodation	Occupational Therapy	Hospital In-Reach	Special Allocations Service (SAS)
<b>830 People</b> who are asylum seekers	<b>572 People</b> experiencing homelessness and substance abuse	<b>48 People</b> experiencing street homelessness	<b>109 People</b> who are GP-excluded patients
Drug and Alcohol Services	Intermediate Care Beds	Women's Night Safe Space	Pilot Projects
<b>86 People</b> supported with substance misuse	<b>11 beds</b> to support people in crisis	<b>97 Women</b> who are vulnerable were supported	1. Art Psychotherapy 2. Spirometry in Substance Users. 3. Hepatitis C Elimination Project

*"The proactiveness and the adaptability of the service is excellent and an essential part of what they do. Clients out on the street may be reluctant to come to the GP Services, may be intoxicated etc. [The] early morning sweep is critical."*

– Support worker from external organisation

## OUR REACH

### Key Insights from Leeds

*Leeds plays a vital role in supporting people experiencing homelessness and asylum seeker support with a focus on mental health interventions, particularly through its strong outreach infrastructure.*

Leeds has emerged as a central hub for the street homeless community and asylum seeker health, supporting over 2000 individuals experiencing homelessness and 800 individuals in contingency accommodation.

Additionally, it has the highest number of individuals supported through mental health nursing (817 people), reflecting the scale of unmet mental health needs among excluded populations.

The city's commitment to street-level outreach, coupled with trauma-informed clinical delivery, enables Bevan to reach people who may never engage with mainstream services.

The Leeds Women's Night Safe Space also highlights targeted interventions for those facing gender-based violence and exploitation.



## OUR REACH

### 3. Wakefield – Focus on Asylum Support and Homelessness

Our Wakefield services prioritised support for asylum seekers and homeless populations, with service delivery focused on outreach models including a specialist GP service delivery for Asylum Seekers in Contingency Accommodation.

#### Key Services and Reach

Asylum Seekers in Contingency Accommodation	People Experiencing Homelessness	Mental Health Nursing	Special Allocations Service (SAS)
711 Asylum Seekers	598 Disordered Substance Use	307 People with Mental Health needs	48 GP-excluded Patients

#### Key Insights from Wakefield

*Wakefield has strengthened its offer for both asylum seekers and homeless populations through effective outreach and clinical integration.*

Wakefield demonstrated a strategic expansion of Inclusion Health services in 2024/25, particularly in outreach-based primary care for people experiencing homelessness with substance misuse (598 individuals) and asylum seekers (711 individuals).

The provision of mental health nursing to over 300 people reflects growing need and effective service response. Bevan’s model in Wakefield shows the importance of combining clinical integration (e.g., GP and nursing services) with on-the-ground outreach, allowing for a flexible and coordinated approach that adapts to fluctuating population movements and housing conditions.



## OUR REACH

### 4. Calderdale – Targeted Asylum Support

#### Key Services & Reach

Bevan's work in Calderdale demonstrates a focused, high-impact intervention aimed at supporting asylum seekers living in contingency accommodation—settings often characterised by temporary housing, limited mobility, and significant vulnerability.

- 327 individuals were supported through outreach-based healthcare and wellbeing services.
- Services addressed both urgent clinical needs and longer-term health determinants, including mental health, immunisations, and care navigation.
- Outreach teams worked closely with local accommodation providers and third-sector partners, ensuring trusted relationships were built with a transient and often traumatised population.
- This work is vital in Calderdale, where access to mainstream services remains limited for newly arrived or undocumented populations. Bevan's presence helps reduce health inequalities while preventing future strain on local emergency services and public health.

### 5. North Yorkshire – Support for Asylum Seekers with GP input

#### Key Services & Reach

Our North Yorkshire Inclusion Health offer was tailored to vulnerable individuals accommodated in hotels, many of whom were asylum seekers or people with insecure immigration status.

- A total of 443 individuals were reached through a dedicated Inclusion Health GP Surgery model.
- Services were mobile, flexible, and trauma-informed, designed to meet patients where they were—both physically and emotionally.
- Care included initial health assessments, long-term condition management, mental health screening, and referrals to community or specialist services.
- By embedding GP services within hotel settings, Bevan overcame significant barriers such as GP registration, language, transport, and cultural mistrust, helping integrate isolated individuals into the health system earlier and more effectively.

## OUR REACH

### Key Insights from Calderdale and North Yorkshire

*Calderdale and North Yorkshire, while smaller in footprint, deliver highly targeted, impactful services addressing critical gaps in care for Inclusion Health groups.*

Though limited in scale, Bevan's work in Calderdale (327 asylum seekers) and North Yorkshire (443 vulnerable hotel residents) illustrates how focused services in high-need environments can deliver impact. In both areas, we filled critical service gaps, providing GP access in temporary accommodation for North Yorkshire, and direct outreach to asylum seekers where local health systems had limited capacity. These sites demonstrate the importance of region-wide Inclusion Health equity, ensuring that rural and smaller urban areas are not left behind in access to specialised support.

### Other Key Insights from the Impact Report

*The scale of support for asylum seekers, people experiencing homelessness, and individuals with complex needs highlights the importance of specialist, inclusive healthcare models.*

With over 2,300 asylum seekers, thousands of people experiencing homelessness, and hundreds more facing GP exclusion, mental ill health, or drug use, Bevan's data underscores the persistent structural inequities in mainstream health access. Our trauma-informed, relational practice-based model is crucial in reaching people who fall through the cracks. Our holistic approach, integrating health, social care, advocacy, and community support, proves that investing in inclusive, personalised healthcare not only improves outcomes but also reduces long-term costs by preventing crisis-driven demand on emergency services.

*The reach and variety of pilot programmes reflect Bevan's commitment to agile, community-led innovation.*

We piloted several test-and-learn initiatives, including:

- Cancer Safety Net Pilot – early detection among high-risk, excluded groups resulting in reduced 'Did not Attend' (DNA) rates among the targeted group.
- VCSE Trainee Programme – capacity-building through skills development.
- Chronic Respiratory Care in Drug Users – addressing overlooked chronic health needs.

These pilots were co-designed with communities and stakeholders, allowing us to respond quickly to emerging health challenges and inequalities. The pilots not only address specific gaps but also generate valuable learning for wider system reform and potential scaling.

## OUR REACH

### Our Volunteers

Volunteers are a core part of Bevan's integrated, trauma-informed model. They extend our reach, bring lived experience, language and cultural insight, and help us create welcoming, person-centred services in clinics and community settings. This section summarises their contribution in 2024/25 and our plans for the year ahead.

#### At a glance (Apr 2024–Mar 2025)

- 33 active volunteers contributing 2392 hours
- 100% with lived experience of homelessness, migration, or social exclusion
- 15 community languages offered through informal interpreting/cultural mediation
- 28 volunteers progressed into accredited training or 2 into paid roles

#### How volunteering creates impact

- **Better access & trust:** familiar faces and lived experience reduce barriers to care; uptake and retention improve.
- **Improved wellbeing:** regular social contact and group activity reduce loneliness and anxiety; confidence grows.
- **Increased capacity & efficiency:** volunteers free clinical time, smooth clinic flow, and extend our community reach.
- **Safer, more culturally competent care:** language support and cultural insight improve understanding and outcomes.
- **Pathways for volunteers:** skills, references, and networks lead to training and employment



## Section 5 - Outcomes & Impact







## OUTCOMES & IMPACT

### Our Theory of Change

At Bevan, we operate on a simple but powerful premise: better access to care and support leads to better outcomes for people and communities.

Our Theory of Change reflects this commitment. It maps the relationship between the activities we deliver—across outreach, health, housing, wellbeing, and system navigation—and the measurable benefits experienced by individuals, public services, and society.

This framework is grounded in an accredited, evidence-based approach that combines several government-endorsed methodologies to calculate our social impact:

- **Cost Benefit Analysis (CBA)** – to understand the saving to public sector spend and Treasury benefits through efficiencies in NHS, Housing, Police, Children and Young People’s Mental Health, Adult Social Care, etc
- **Cost-Efficiency Analysis (CEA)** – to understand the long-term impact of health interventions and reducing health inequities through improved quality of life and life satisfaction: Quality-Adjusted Life Years (QALYs) and Wellbeing-Adjusted Life Years (WELLBYs).
- **Social Return on Investment (SROI)** – used to assign financial value to improvements in wellbeing such as mental health, confidence, resilience, and employment outcomes.
- **Local Multiplier 3 (LM3)** – captures the ripple effect of Bevan’s spending on staff, local suppliers, and reinvestment in communities.
- **Gross Value Added (GVA)** – measures productivity gains when people move into sustained employment or regain independence.

These methodologies are embedded within the Social Value & ESG Calculator accredited by Social Value International and used by Social Value Consultancy Ltd, our delivery partner, to ensure transparent, consistent, and auditable reporting.



*Theory of Change Diagram*

## OUTCOMES & IMPACT

### Linking Activities to Outcomes

Bevan's integrated delivery model, through Specialist GP Services, mobile outreach teams, Wellbeing Mentors, hospital in-reach and intermediate care pathways supports some of the most excluded populations across West and North Yorkshire.

The people we serve face multiple and intersecting challenges. Our approach is person-centred, trauma-informed, and co-produced. And most importantly, it works.

By delivering stabilisation, support, and trust-building, we help people reconnect to services, regain a sense of agency, and rebuild their lives. These changes in turn generate measurable outcomes:

- Improved mental and physical wellbeing
- Reduced emergency healthcare usage
- Increased housing stability and service engagement
- Progression toward employment, volunteering, or training
- Enhanced confidence, resilience, and hope

Each of these outcomes is mapped in our Theory of Change and assigned an impact proxy that allows us to estimate their value over time, applying drop-off rates, deadweight, attribution, and displacement factors to avoid over-claiming.

### From Outcomes to Impact

Bevan's contribution to improving people's lives is not just anecdotal - it is measurable.

Our Theory of Change is more than a planning tool; it is the foundation of how we generate and demonstrate social value.

This means we are not just delivering services; we are creating public value. We are reducing pressures on the NHS and local authorities, supporting healthier and more resilient communities, and unlocking economic and wellbeing gains across the region.

By embedding this framework in our service design and reporting, we uphold our social licence to operate, remain accountable to stakeholders, and ensure that every pound spent on Bevan translates into real and lasting impact.

## THEORY OF

### THEORY OF CHANGE - WHAT HAS ACTUALLY CHANGED

Savings to NHS	✓	✓	✓	✓
Reduction in Substance Misuse		✓		✓
Improved Wellbeing	✓	✓	✓	✓
Savings to the Police		✓		✓
Improved Physical Health	✓	✓	✓	✓
Reduction in Food Poverty	✓	✓	✓	✓
Reducing Homelessness	✓	✓	✓	✓
Increased Collaboration	✓	✓	✓	✓
Improved Sexual Health & Sex Worker Safety		✓		✓
Improved Wellbeing of Volunteers				
Improved Mental Health	✓	✓	✓	✓
Improved Parenting Skills	✓		✓	
Improved Employability Skills	✓			
Relief from Food Poverty		✓	✓	✓
Increased Education Support	✓	✓	✓	
Support through Housing Crisis	✓	✓	✓	✓
Improved Financial Inclusion	✓	✓	✓	✓
Support with Street Homelessness	✓	✓	✓	✓
Occupational Therapy		✓		
Contingency Accommodation Provision	✓	✓	✓	✓
Night Safe Space		✓		✓
Community Resilience	✓	✓	✓	✓
Support to Young Mothers (Bevan Babies)	✓	✓	✓	✓
Reducing Health Inequalities	✓	✓	✓	✓

*Vulnerable Migrants*

*Drug and Alcohol Users*

*Resettled People*

*Homeless People*

### BENEFICIARIES - GROUPS IMPACTED BY BEVAN



## CHANGE MATRIX

✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
✓			✓						✓
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	✓		✓						
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
✓		✓	✓				✓		✓
✓		✓	✓	✓		✓			✓
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
✓			✓	✓					
						✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
✓		✓	✓	✓					✓
		✓		✓		✓	✓	✓	
✓				✓					
✓		✓		✓		✓	✓	✓	✓
			✓	✓		✓			
✓				✓					
✓		✓				✓			✓
✓									
✓		✓	✓						
✓			✓	✓					✓
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
✓		✓		✓					
✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Vulnerable People	Special Allocation Patients	Asylum Seekers	Sex Workers	Vulnerable Women	Cancer Patients	Early Years' Parents	Bevan Volunteers	Wellbeing Mentors	Mental Health Patients



## Section 6 - Monetising Our Social Value







## MONETISING OUR SOCIAL VALUE

At Bevan, we are committed to not only improving lives but also demonstrating the measurable value of our work in ways that resonate with commissioners, communities, and the wider public sector.

We use the **Social Value & ESG Calculator**, an accredited software tool that enables us to assign credible financial values to the social outcomes we deliver. The calculator is powered by a robust, transparent, and evidence-based valuation framework — independently accredited by Social Value International.

Through this tool, we can estimate the equivalent financial value of the outcomes we've generated across our service delivery areas. This process is known as monetisation — translating qualitative improvements in people's lives into proxy financial values that reflect either public sector savings or wider societal benefit.

### Our Valuation Methodology

The monetary values above are not arbitrary. Our approach to valuation combines multiple best-practice methods to ensure estimates are:

- **Credible** – based on publicly available and peer-reviewed sources
- **Comparable** – aligned to national benchmarks
- **Proportional** – reflecting the scale, depth, and likelihood of impact
- **Transparent** – with clear audit trails for each proxy

Our blended methodology includes:

- Social Return on Investment (SROI) principles — assigning financial values to social outcomes based on stakeholder feedback and evidence of change
- Cost-avoidance metrics from authoritative sources such as the HM Treasury's Green Book and NHS cost benchmarks
- Qualitative outcomes validated through lived experience, service-level data, and stakeholder engagement

Together, this enables us to demonstrate not just activity — but value. Our social impact narrative is grounded in the real-world experiences of the people we serve, while speaking directly to the needs of commissioners, funders, and decision-makers.

We believe that transparent, meaningful measurement is part of our accountability — and our invitation to collaborate on scaling what works.



## MONETISING OUR SOCIAL VALUE

### Robust Impact Measurement

Bevan worked in close collaboration with Social Value Consultancy Ltd (SVC Ltd), a recognised leader in Social Value and ESG measurement, to design and implement a pioneering Inclusion Health Outcomes Framework.

This framework is underpinned by accredited methodologies and powered by SVC Ltd's Social Value & ESG Calculator — one of the few tools worldwide to hold formal accreditation from Social Value International (SVI).

SVI accreditation is an internationally recognised mark of quality, assuring our stakeholders that every result we publish is produced using rigorous, transparent, and standardised methods. It confirms that our impact calculations are consistent with the highest global standards and can be trusted by commissioners, funders, and policymakers alike.

Our framework combines robust quantitative analysis with meaningful qualitative insight, drawing on:

- **HM Treasury Cost-Benefit Analysis (CBA)**  
*Aligning with government best practice in economic appraisal.*
- **Social Return on Investment (SROI)**  
*Expressing the wider social value created in monetary terms.*
- **Local Spend Multipliers (LM3)**  
*Quantifying the value retained in local economies*
- **Localised Economic Productivity (Gross Value Added – GVA)**  
*Assessing contribution to local and regional growth.*
- **Quality-Adjusted Life Years (QALYs)**  
*Valuing improvements in life expectancy and quality of life.*
- **Wellbeing-Adjusted Life Years (WELLBYs)**  
*Capturing gains in mental wellbeing and life satisfaction.*



By combining accredited software with SVC Ltd's deep consultancy expertise, we can monetise impact with precision, evidence results with confidence, and present them in a way that resonates with technical and non-technical audiences alike. This approach ensures Bevan's outcomes are not only felt in the communities we serve but are also recognised, trusted, and valued at every decision-making level.

## Section 7 - Bevan Voices







## BEVAN VOICES

### **Data tells us how many. Stories show us how much.**

The true measure of our work lies not only in metrics but in the lives changed: wounds that heal, safety restored, confidence regained, and futures rebuilt. Everyone who walks through our doors, or whom we meet on the streets, in hostels, in temporary accommodation, or via our buses brings with them a unique story of strength.

Our role is to walk alongside them: providing healthcare, housing support, emotional safety, and dignity. This section of our report shares just some of those stories. They are a tribute to our team's compassion, the strength of those we serve, and the collective commitment across Bevan to support those most at risk of exclusion. These stories demonstrate the practical, emotional, and systemic value of Bevan's model - trauma-informed, person-centred, and rooted in partnership.

They also align with public priorities: preventing avoidable hospital admissions, improving quality-adjusted life years (QALYs), reducing health inequalities, and advancing integrated, inclusive care. In telling them, we honour the people at the heart of our work—and the trust they place in us.

### **Why These Stories Matter**

Each story is more than a moment of change—it's a microcosm of system transformation.

Bevan's work meets people where they are, walks with them through crisis, and advocates for better outcomes for both individuals and public services.

Together, these stories show how compassion, integration, and inclusion can rewrite futures—and why our approach should be scaled, funded, and championed.



## BEVAN VOICES

### Responsive, Integrated Care: Jane's Story

*Outreach • Hospital In-Reach • Intermediate Care Beds*

#### Snapshot

Jane (name changed), street homeless with COPD, deteriorated with suspected sepsis. An Outreach paramedic found dangerously low oxygen saturation and escalated urgently.

#### What we did

- Paramedic assessment and immediate ambulance conveyance
- Hospital In-Reach holistic plan and coordination
- Timely transfer to step-down Intermediate Care

#### What changed

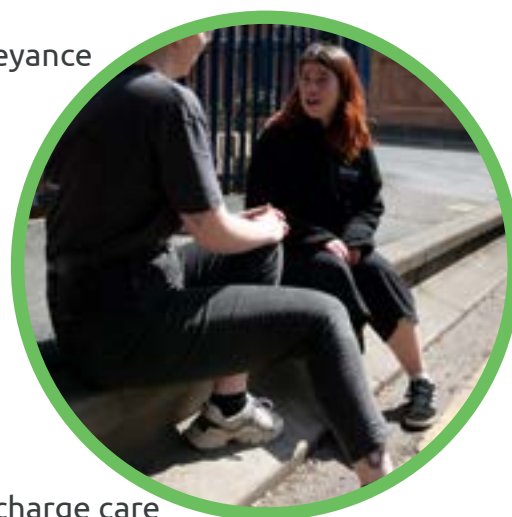
- Rapid treatment; prevented further deterioration
- Safe discharge to supported accommodation
- Coordinated follow-up; no discharge delays

#### Person-centred outcomes

- Health & wellbeing: Stabilised COPD; effective post-discharge care
- Housing/stability: Appropriate step-down placement secured
- Connection/trust: Clear plans; consistent team contact

#### System value / learning

Joined-up outreach–in-reach–step-down model reduces bed days and readmissions.



## BEVAN VOICES

### Rebuilding Trust, One Drop-In at a Time *Inclusion Health Outreach • Bevan Bus*

#### Snapshot

John and Pete (names changed), recently moved and experiencing homelessness, had unmanaged lower-limb wounds. Met at a partner drop-in, they were assessed and treated in the Bevan Bus, with follow-up arranged.

#### What we did

- Assessed, cleaned and dressed wounds on-site
- Arranged district nurse referral and follow-up
- Taught self-care; prescribed correct dressings via pharmacy

#### What changed

- Improved self-management and timely help-seeking
- Fewer urgent presentations to A&E/services
- John healed; Pete's infections markedly reduced

#### Person-centred outcomes

- Health & wellbeing: Healing/progress; reduced infection episodes
- Independence: Confident to change dressings correctly
- Connection/trust: Ongoing engagement with Outreach team

#### System value / learning

Self-care plus 'to-go' dressing kits reduce avoidable care and scale safely.



*Huge knowledge, expertise, intelligence, lots of love and compassion and sense of humour, interesting ideas, many ways to learn and develop your skills. Mix it together with amazing people You will end up with ....Bevan.*

– Bevan Colleague

## BEVAN VOICES

### From Vulnerability to Visibility *Homeless Drop-In • Wellbeing Mentors*

#### Snapshot

Laura (name changed), with trauma history and alcohol misuse, presented distressed and hungry after sleeping rough; recently housed but unsafe.

#### What we did

- Ensured safe accommodation the same day
- Referred to alcohol support and trauma counselling
- Linked to crisis service and wellbeing group

#### What changed

- Feels safer and supported in housing
- Engages with treatment and counselling
- Finds belonging through weekly group

#### Person-centred outcomes

- Health & wellbeing: Support for alcohol and mental health
- Housing/stability: Safe placement; reduced risk
- Connection/trust: Positive peer interactions

#### System value / learning

Social prescribing reduces GP use, A&E attendances and unplanned admissions.



*"I have finally found my place where I am working with like minded people that share the same high values and beliefs as I do and go above and beyond for their patients, that's the Bevan way"*

– Bevan Colleague

## BEVAN VOICES

### Stabilising Diabetes Through Outreach Care *GP & HCA Outreach in Emergency Accommodation*

#### Snapshot

Adrian (name changed), in his 50s and homeless, struggled to manage diabetes with repeated hypoglycaemia and ambulance call-outs.

#### What we did

- Welfare check identified hypoglycaemia; paramedics treated
- Built trust; registered with Bevan GP
- MDT planning, capacity assessment, staff education

#### What changed

- Appropriate housing secured with trained staff
- Engages in assessments to guide management
- Reduced hypoglycaemia risk and related harms

#### Person-centred outcomes

- Health & wellbeing: Regular on-site inputs; safer control
- Housing/stability: Suitable supported accommodation
- Independence: Growing understanding and shared planning

#### System value / learning

Holistic outreach reduces crises and avoidable hospital use for long-term conditions.



*I reached out to York Street for a placement to support me with my Advanced Clinical Practice (ACP) training. After getting no responses from all other practices I was really excited to receive an almost immediate yes from Bevan. The placement led me to applying for a job and being successful. I think most of my interactions have been similar to my first one in the sense that I really do feel we are an organisation that find ways to creatively support people; staff and patients alike and have a can-do attitude. I really can't imagine myself working anywhere else and taking on this role has fully revived my enthusiasm and drive for nursing and healthcare.*

– Bevan Colleague



## BEVAN VOICES

### Dignity in a New Land *Migrant Health • Occupational Therapy*

#### Snapshot

Victor (pseudonym), recently arrived with blast injuries, had lost his wheelchair and struggled with mobility, bathing and safety in contingency accommodation.

#### What we did

- Secured wheelchair and pressure-relieving cushion
- OT assessment; home adaptations and equipment trials
- Coordinated physio, social care and community supports

#### What changed

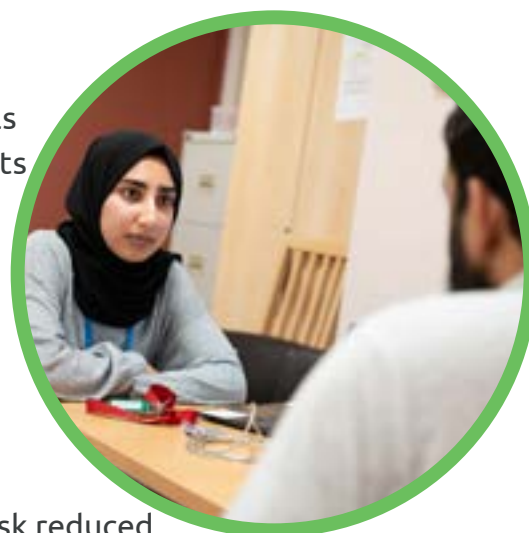
- Increased mobility; safer transfers and bathing
- Improved daily living participation; fewer falls risks
- Access to services; advocacy for relocation near family

#### Person-centred outcomes

- Health & wellbeing: Comfort, pressure-sore and falls risk reduced
- Housing/stability: Adaptations and care package in place
- Connection/trust: Linked to community/Your Space

#### System value / learning

OT-led enablement lowers reliance on costly care packages.



*The first workplace I felt truly myself, with the ups and the downs I've felt supported, I felt encouraged to grow and develop in my career, I have overcome challenges and proven to myself that I am intelligent, I've always been an outcast but since joining Bevan I no longer feel out of place. Thank you, Bevan, for giving me the opportunities that I wouldn't have reached for.*

– Bevan Colleague

## BEVAN VOICES

### Living Healthier, on Her Own Terms *Genetics Project • Personalised Care*

#### Snapshot

Anika (pseudonym), referred for preconception support, sought culturally sensitive help to change diet, activity and routines without losing cultural identity.

#### What we did

- Midwife + Support Worker personalised plan
- Culturally appropriate nutrition and activity guidance
- Flexible phone-based follow-up to reduce barriers

#### What changed

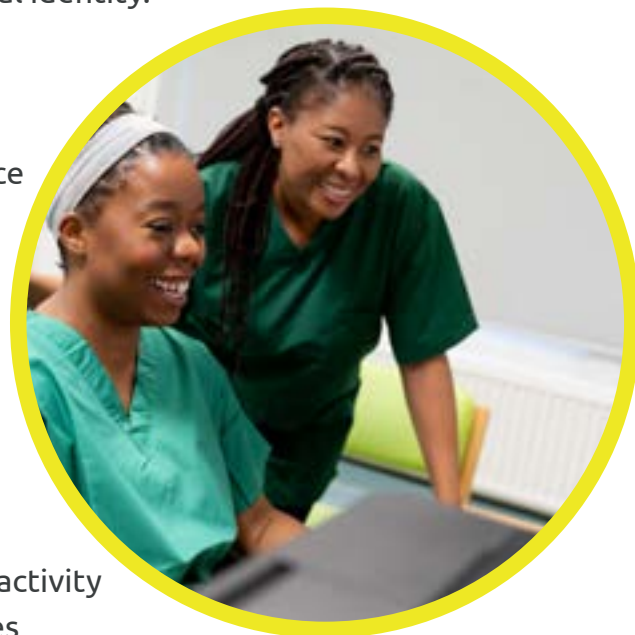
- Regular walking; improved sleep; weight loss
- Confident meal planning and self-management
- Sustained habits aligned to culture and goals

#### Person-centred outcomes

- Health & wellbeing: Healthier weight, better sleep, activity
- Independence: Plans and sustains nutritious routines
- Connection/trust: Ongoing, preferred-channel contact

#### System value / learning

Person-centred self-care reduces future perinatal risks and costs.



*"I am forever grateful for Bevan for believing in me even when my confidence was at its lowest. It has been the most wonderful 2 and half years of my entire life. I have met great mentors, great colleagues, family and friends. Finding yourself in situations of being in a foreign country 10,000 miles from your own family and kids and not even knowing if you will ever see them again is the most terrifying situation in life. The love, care and support I receive from Bevan has kept me sane for all these years."*

– Bevan Colleague

## BEVAN VOICES

### Inclusive Primary Care That Sticks GP Services • Nursing • Hepatitis C Support

#### Snapshot

Jamie (pseudonym), street homeless with chronic ulcers and substance dependence, walked in for care; screening found Hepatitis C.

#### What we did

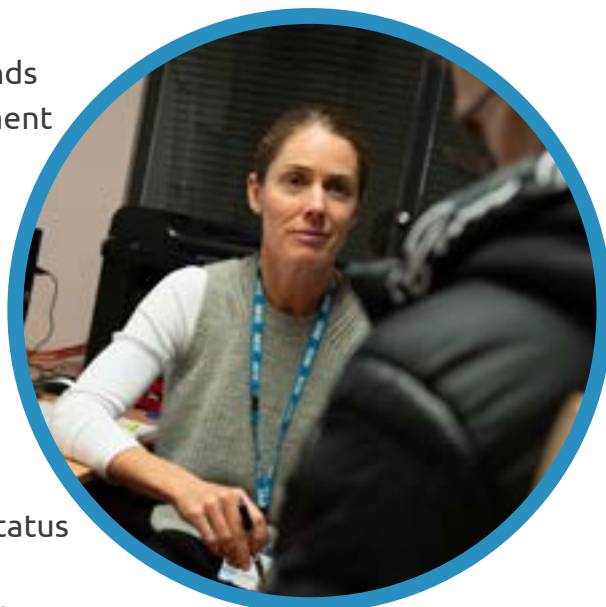
- Registered immediately; treated and dressed wounds
- Intensive compression therapy; infection management
- Coordinated Hep C treatment via support worker

#### What changed

- Hepatitis C cured
- 0 DNAs in the past 3 months
- No A&E admissions; stable on methadone

#### Person-centred outcomes

- Health & wellbeing: Cured HCV; improved wound status
- Independence: Attends and completes care plans
- Connection/trust: Reliable, integrated appointments



#### System value / learning

Early screening plus integrated support averts high-cost complications.

*"I just remember thinking when I started at Bevan that it was not only the clients that mattered but the staff did too. Bevan has put the care back into healthcare again. I have finally found my place where I am working with like minded people that share the same high values and beliefs as I do and go above and beyond for their patients, that's the Bevan way"*

– Bevan Colleague

## BEVAN VOICES

### Trust, Patience and Harm-Reduction

*SBSW Outreach • Bevan Bus • Multi-agency*

#### Snapshot

Emma (name changed), with trauma and polysubstance use, sex-working on the streets, had low engagement with services and repeated overdoses.

#### What we did

- Initiated same-day methadone script via partners
- Continued prescriptions near trusted drop-ins
- Coordinated VCSE, police, housing and drug services

#### What changed

- 6 months maintained on methadone
- Marked reduction in illicit drug use
- Longer, safer engagements; discloses risks early

#### Person-centred outcomes

- Health & wellbeing: Stabilised dependence; physical recovery underway
- Housing/stability: Intermittent placements; supported planning
- Connection/trust: Consistent relationship with team

#### System value / learning

Accessible OAT (methadone) cuts overdoses, infections and crime; scalable harm-reduction.



*"When I moved to the area my probation officer suggested joining with a local GP. When this was a mainstream GP, I refused. Bevan is different. It is a much less judgemental service that understands people in difficult situations."*

— Person Bevan supports



## BEVAN VOICES

### **Reconnected: Digital Inclusion, Human Restoration** *Digital Inclusion Programme*

Ruby was trafficked into the UK and forced into labour. Passed between exploiters, hidden from society and denied her basic rights, she worked long hours without pay—isolated and terrified, cut off from her family, who did not know whether she was alive. Heavily pregnant and completely alone, everything changed when police raided the premises where she was being held. It marked the start of her asylum journey—and the beginning of a long road to recovery.

With no friends or family in the UK and no way to communicate, Ruby couldn't reach the people she loved. As a patient at Bevan, she was referred to our Digital Inclusion Programme. We provided something small but life-changing: a device and mobile data, for the first time in years.

Her first act was to video-call her family overseas. Five years had passed. When the screen connected and her mother's face appeared, Ruby began to cry. Her mother cried out her name; her siblings screamed in disbelief. "I'm here. I'm safe," she told them, tears streaming down her face. It was the first time they had seen her with her baby—the first time in years they knew she was alive.

#### ***"I'm here. I'm safe"***

That call, made possible by digital access, reconnected Ruby with her past and gave her strength for the future. Today, she has refugee status. Her child is thriving—full of energy and laughter.

Together they are building a life with safety, dignity and hope. For Ruby, digital inclusion didn't just connect her to the internet; it restored her voice, her lifeline and her sense of belonging—and reminded us all why access matters.



## Section 8 - Our Contributions to Public Priorities







## OUR CONTRIBUTIONS TO PUBLIC PRIORITIES

Bevan Inclusion Health is a mission-driven organisation dedicated to improving outcomes for society's most marginalised and excluded groups. Working at the intersection of health, housing, social justice, and social care, Bevan delivers person-centred, trauma-informed services that respond to the complex needs of people often left behind by mainstream provision.

Bevan's delivery model has been purpose-built to address public priorities through measurable, high-impact interventions.

By design, our integrated, trauma-informed, and person-centred approach is aligned with:

- **Provider Selection Regime (PSR)**  
*Enabling commissioners to select providers who can deliver high-quality, value-for-money services in a joined-up and collaborative way.*
- **Procurement Policy Note PPN 002**  
*Evidencing tangible social value outcomes across five core themes of the Social Value Model.*
- **National Procurement Policy Statement (NPPS)**  
*Supporting the Government's strategic priorities, particularly reducing health and social inequalities, supporting local supplier delivery and collaborative working.*
- **UN Sustainable Development Goals (SDGs)**  
Contributing to multiple global goals, particularly:
  - ◇ SDG 1: No Poverty
  - ◇ SDG 3: Good Health and Wellbeing
  - ◇ SDG 5: Gender Equality
  - ◇ SDG 10: Reduced Inequalities
  - ◇ SDG 11: Sustainable Cities and Communities
  - ◇ SDG 16: Peace, Justice and Strong Institutions



Our services are not only responsive to need but also structured to deliver fiscally quantifiable outcomes for public services and society at large in line with the Green Book and Value for Money (VfM) frameworks used by HM Treasury.

We also use accredited valuation methodologies to demonstrate the real-world, monetised impact of our work, enabling commissioners to meet their legal duties under PSR and procurement policy, while delivering better lives for those most excluded from mainstream Health and Social Care.



## OUR CONTRIBUTIONS TO PUBLIC PRIORITIES

### Compliance with the Provider Selection Regime (PSR) Criteria

Under the NHS Provider Selection Regime (PSR), contracting authorities assess providers against five criteria: Quality, Value for Money, Integration & Collaboration, Innovation, and Social Value. The table below summarises how Bevan evidences each criterion through an outcomes-led, trauma-informed, and co-produced model.

PSR Criteria	How Bevan Meets the Criteria
<b>Quality</b>	Bevan Inclusion Health delivers a measurable improvement in the wellbeing and quality of life for excluded and marginalised populations. Over the next 10 years, its work is expected to generate <b>£323 million</b> in enhanced <b>QALYs</b> (Quality-Adjusted Life Years) and <b>WELLBYs</b> (Wellbeing-adjusted Life Years), highlighting a strong focus on long-term, person-centred outcomes.
<b>Value for Money</b>	Through targeted, preventative support, Bevan reduces pressure on public services, achieving an estimated <b>£23.15 million</b> in savings across the <b>NHS, Police, Social Services, and Housing</b> . This demonstrates Bevan's ability to deliver effective interventions that also represent excellent value for public investment.
<b>Integration &amp; Collaboration</b>	Bevan's model is built on deep collaboration with communities and local systems. Employing people with <b>lived experience</b> , working closely with <b>local partners</b> , and sourcing from <b>local suppliers</b> , Bevan generates <b>£18 million</b> in intrinsic socio-economic impact. This approach enhances trust, cultural competence, and system alignment.
<b>Innovation</b>	Bevan continually pilots and develops new approaches to Inclusion Health. With <b>£223,000</b> invested in <b>community and pilot projects</b> , Bevan has unlocked over <b>£1.062 million</b> in demonstrable impact—proving that bold, evidence-led innovation can transform services and outcomes for excluded groups.
<b>Social Value</b>	Beyond direct service delivery, Bevan contributes an estimated <b>£19.65 million</b> in <b>improved social and community wellbeing</b> , tackling structural inequality and improving resilience in underserved communities. This reflects Bevan's holistic view of health as deeply interconnected with social justice and inclusion.

Bevan Inclusion Health is a leading example of how public service providers can create high-impact, socially valuable outcomes through a holistic and inclusive approach. By improving quality of life, reducing system costs, innovating in service design, and embedding collaboration and equity into its operations, Bevan aligns closely with the full spectrum of PSR criteria, offering a replicable model for transformational healthcare service delivery.

## Section 9 - Reflections & Learning





## REFLECTIONS & LEARNING

Each year offers us the opportunity to reflect on what's working, where we're learning, and how we can strengthen our model to meet people's needs more effectively. In 2024/25, several key insights emerged—shaped by evidence, lived experience, and listening to those most at risk of exclusion:

- **Trust is our greatest asset**

Our ability to reach people who have been repeatedly let down by systems isn't accidental—it's built on years of consistent, compassionate, trauma-informed engagement. Across our outreach services, we've learned that trust isn't a given, it's earned. And when trust is present, it unlocks access to care, continuity of support, and hope.
- **Stories and data must go hand in hand**

Personal stories show us the human impact of our work. But when these stories are underpinned by rigorous evidence and recognised metrics (e.g. QALYs, WELLBYs, SROI), they become powerful tools for advocacy, system learning, and accountability. This year, we've strengthened our commitment to collecting and sharing both—ensuring the voices of those we serve are never lost in the numbers.
- **Co-production drives better outcomes**

Some of the most innovative and effective changes to our services came directly from people with lived experience. Their insights shaped new outreach approaches, wellbeing interventions, and service design tweaks that led to measurably better outcomes. We remain committed to embedding co-production in every stage of our work—from strategy to service delivery.
- **Good data enables better care**

We've taken significant steps to improve how we capture, analyse, and report our impact—investing in digital tools, streamlining internal systems, and aligning our approach to national and international standards. Better data helps us tailor support, improve outcomes, and demonstrate value to partners and commissioners.
- **Equity requires investment**

We've seen how language and cultural barriers can prevent people from accessing care. To address this, we're advocating for flexible, inclusive funding models that enable the use of interpreters and culturally sensitive support. Equity doesn't happen by chance—it requires planning, resource allocation, and system-wide commitment.



## REFLECTIONS & LEARNING

- **Transparent impact reporting brings clarity and confidence**

One of the most valuable lessons this year has been the power of accurate, transparent social impact reporting. By clearly articulating Bevan's measurable effect on individuals, communities, public services, and society at large, we're able to provide confidence and clarity to both internal and external stakeholders. This reporting doesn't just document outcomes—it helps shape them. It informs strategic planning, directs resources to where they're most needed, and provides a shared, evidence-based foundation for partnership, investment, and advocacy. Reliable impact data gives our teams and partners the confidence to act decisively, grounded in what works.

- **Inclusion Health is everyone's business**

Bevan's model continues to show that reaching those most excluded benefits the wider system. Our work has helped reduce A&E attendances, prevented avoidable hospitalisations, and improved long-term engagement with health and housing services. Inclusion isn't just moral: it's smart, sustainable, and system-enabling.

- **Place-based partnerships amplify impact**

Working across Bradford, Calderdale, Leeds, Wakefield, and North Yorkshire, we've seen the power of local collaboration. When statutory, voluntary, community, social enterprise and grassroots services align around shared outcomes, we're better able to meet complex needs and drive whole-system change.

- **Flexibility unlocks innovation**

Innovation often happens at the margins—on the street, in temporary accommodation, or during informal check-ins. Commissioners and funders who allow room for flexible delivery enable frontline teams to adapt in real time, building models that are both scalable and deeply responsive.

- **Prevention starts with presence**

Much of our impact this year came not from reactive care but from being present—in people's spaces, on their terms, long before crisis hits. This kind of early engagement, led by trusted outreach workers and wellbeing mentors, is central to long-term health equity.

## Section 10 - Looking Ahead





## LOOKING AHEAD

### **Bevan's aspirations for greater reach and partnership**

Bevan's long-term strategy is rooted in partnership and purpose. Looking ahead, we aspire to extend our reach — supporting more people, in more places, particularly those most affected by health inequality — through a blended approach to funding and service innovation.

This means working not only as a commissioned provider, but as a co-investment partner: leveraging Bevan's ability to generate private income alongside NHS and other public funding to address the social determinants of health that matter most in people's lives.

This approach would enable Bevan to:

- Sustain and scale place-based services that are currently underfunded
- Tackle the root causes of poor health — including housing insecurity, social exclusion, and trauma
- Operate with greater flexibility, responsiveness, and local accountability
- Strengthen the case for prevention, inclusion, and community-led innovation

While still an emerging ambition, this vision reflects Bevan's ethos: to co-design and deliver support not only for today's needs, but for the longer-term wellbeing of our patients, service users, and communities.

Through this Social Impact Report, we begin to communicate that ambition — by evidencing what works, highlighting where value is created, and showing how partnerships can be deepened to achieve greater social impact.

As Bevan continues to evolve, our future model aspires to go beyond traditional funding structures — toward a more collaborative and outcomes-focused approach. This report marks a step in that direction, laying the groundwork for partnerships that can deliver Inclusion Health to more people, more effectively and more sustainably.



## LOOKING AHEAD

### Vision for co-investment and sustainable growth

As part of our strategic ambitions, we want to embed sustainable growth throughout our work, shifting our reliance on publicly funded contracts to a broader, more diverse range of income streams that generate surplus we can then reinvest into our work.

As a community benefit society with charitable status, we need to ensure that through developing any trading activity, we stay true to our values, our mission and protect the Bevan brand.

Our status as a social enterprise allows us to invest any profits back into services to support the communities we serve. By purchasing any service from us, customers will know that they are contributing to our mission. We will offer all our commercial services in the way we deliver all our services: patient-centred, trauma-informed and holistic.

We will tailor support to the individual's needs, offering flexible, creative solutions.

### Strategic priorities for 2025/26

We are very proud to be launching our new three-year strategy in autumn 2025, the Bevan Blueprint. This is our plan for what we want to achieve and how we plan to do this by 2028. The Blueprint has been co-produced by our colleagues, volunteers, people we support, partners, commissioners and peers. It has three strategic areas of focus, our pillars which are Our People, Delivering Excellence and Good Growth.

Each pillar sets out a number of strategic ambitions to be achieved over the next three years. There are also three cross cutting themes which are fundamental to our work and further enable success which are Equality, Diversity & Inclusion, Technology and Communications. Underpinning the Blueprint are our Bevan values - Compassion, Innovation, Empowerment, Courage, Collaboration – which we aspire to live every day, through all our work, whatever our role at Bevan.

We believe that through the successful delivery of our Blueprint, we move closer to achieving our vision: Health, Hope and Humanity for All. We have achieved amazing things in 2024/25, as this report shows so clearly. We will achieve even more over the next three years for our Inclusion Health communities. We can do this. We are Bevan.



This report was produced by Social Value Consultancy on behalf of:  
**Bevan Community Benefit Society**

Get your Social Value Report at:  
[www.socialvalueconsultancy.co.uk](http://www.socialvalueconsultancy.co.uk)