



Partnered delivery in  
children's social services:  
Moving from outputs  
to outcomes

# Introduction

Third-party service providers often play an impactful role in delivering services for children and families – including parenting support, caregiver recruitment and support, specialist care and youth justice responses and mental health and behavioural support. Providers bring deep knowledge and a different lens on relationships: as a result, they are often able to engage families and provide the services and support that children need, closer to home and community. These organizations can be particularly well-placed to deliver family-centred, holistic support that crosses some public service organization boundaries – meeting health, social, education, employment and housing needs that are important to individual families and often most effective when addressed holistically.

How government works with providers is foundational to a thriving sector that delivers effective services and supports that improve the outcomes of children and families. This article explores how children's social services organizations can work with the provider sector in their role as a commissioner, and practical steps to get started for both sides of the partnership.

## The case for moving from outputs to outcomes

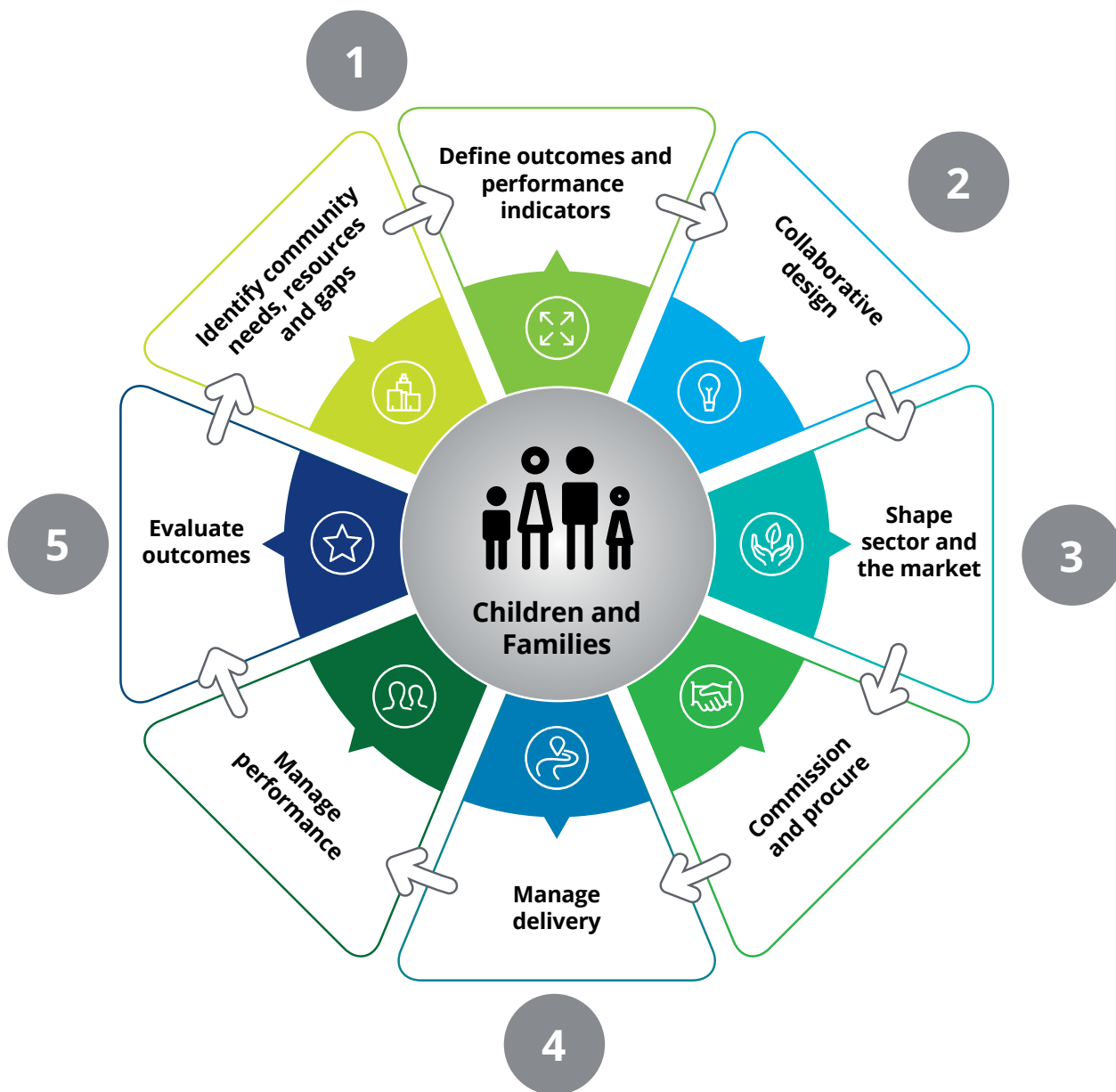
Traditionally contracting for services in children's social services has often focused on pre-determined outputs (such as the number of counselling sessions delivered, caregivers recruited, or “bed nights” as a measure of occupancy) rather than desired outcomes. This isn't surprising. Outcomes are hard to measure. They may take a long time to evidence (for example, improved wellbeing). Or a positive outcome achieved is described as a negative outcome avoided (for example, successfully preventing escalation into offending or harmful behaviours), and the challenge is measuring and attributing something that didn't happen.

However, focusing on outcomes rather than outputs can bring several advantages, including:

- Greater focus on results by incentivising providers through payment structures aligned to outcomes
- Helping to enable providers to innovate at the service or intervention level and to tailor and adapt responses to meet individual children's needs
- Fostering collaboration across the system, better supporting providers to work together as well as with funders and commissioners
- Improving cost effectiveness by encouraging prevention and early intervention support that can improve long-term outcomes and reduce future (often costly) crisis interventions
- Improving learning through robust data and measurement, building understanding of what works for who, supporting more effective commissioning and delivery today and in the future

## Outcome-based commissioning

Outcome-based commissioning describes a strategic approach to working with and through providers to deliver outcomes for people, where funding is tied to the achievement of specific, measurable outcomes rather than delivering specific services or outputs. The commissioning wheel below sets this out as a cycle of activity from identifying population needs and gaps and defining outcomes, through to designing, commissioning, delivering, and evaluating services and interventions. Traditional procurement and contracting activity is a sub-set of this approach.<sup>1</sup>



[1] The outcomes based commissioning approach starts with a comprehensive needs assessment to understand what people need and where to focus, then sets clear goals for what should change because of the services.

[2] Next, it works with others in the system – including service users and those providing the services to – collaboratively design outcomes, performance indicators and the kinds of responses and interventions that will address the needs.

[3] With this view, commissioners play an active role in shaping the “market” by building capability and capacity, including incentivizing and attracting new providers where there are gaps.

[4] Throughout the commissioning, procurement and performance management, the commissioner works with providers to make any necessary adjustments to improve services and achieve outcomes.

[5] Evaluation assesses success against the outcomes set out through the process, asking how well the services that have been commissioned have achieved meaningful and lasting impact for children and families. The learning from the outcomes evaluation, coupled with the performance management process, feeds into and improves the next round of commissioning.



## RCC: Regional Care Cooperative (RCC) Programme: Transforming Regional Commissioning and Children's Care

Initiated by the UK Department for Education, the RCC Programme aims to reform how children's care services are commissioned across England. It addresses problems like fragmented commissioning, escalating costs, and inadequate placements for children with specific needs and seeks to ensure local authorities receive value for money while improving care quality.

As part of the RCC programme the Department of Education commissioned a national support program to strengthen local authorities' commissioning, forecasting and use of data, and market-shaping in fostering and residential placements with the objective of improving their ability to anticipate demand, plan effectively and allocate resources to meet the needs of children in care.<sup>2</sup>

### How it works

Through partnership with up to 50 local authorities and specialists nationally the programme is building a comprehensive and shared understanding of the supply and demand landscape for children's care placements. This analysis identifies how commissioners are solving challenges and creates support and learning around key themes to build capability and embed sustainable practices in local authorities.<sup>3</sup>



## UK New Economics Foundation & the Lambeth Outcomes Framework for Children and Young People<sup>4</sup>

For over twenty years, the New Economics Foundation (NEF) in the UK has worked with local governments to redesign public service commissioning. NEF has developed a practical handbook and toolkit to support commissioners in implementing this approach. These tools help replace traditional procurement methods with flexible, outcomes-led frameworks that aim to prioritize user insight, reflection, and social value.

### How it works

NEF's commissioning approach sets out a cycle of insights, planning and delivery to realize value for money, promote wellbeing and shift towards greater prevention through designing collaborative solutions. This structure shifts the focus from service volume to impact and builds accountability around real outcomes, not just activity metrics. NEF's model embeds co-production, partnership, and continuous evaluation across three phases:<sup>5</sup>

- **Insight Phase:** Commissioners assess services, identify gaps, and engage communities using tools like ethnographic research.
- **Planning Phase:** A shared outcomes framework is developed with social, economic, and environmental goals. Procurement and provider capacity are adapted accordingly
- **Delivery Phase:** Adaptive contract management, performance monitoring, and continuous improvement are emphasized. Alliance contracting and tools like NEF's Self-Reflection Tool support this—aligning with step (8): evaluating outcomes.

### Impact of tools on service delivery

The NEF's framework supports commissioners to co-produce outcome frameworks, align procurement processes with strategic goals, and build provider capacity. Evaluation becomes an embedded practice, using participatory methods such as peer review and coaching to ensure services remain responsive and effective.

This approach enables local authorities to address root causes, not just symptoms, while supporting providers to innovate and evolve. It creates a more accountable and transparent commissioning environment.

### Outcomes and impacts

The Lambeth Outcomes Framework for Children and Young People, developed with NEF, exemplifies the long-term value of this model. Co-designed with young people, the framework centers on outcomes that matter to them—like emotional growth and access to opportunity—rather than predefined service activities.<sup>6</sup>

This led to more relevant services, higher engagement, and reduced reliance on council funding.<sup>7</sup> A reimagined youth offender service, co-produced with young people, saw improved participation, stronger development outcomes, and increased trust.

By shifting from provider-led to co-produced models, Lambeth improved impact, accountability, and sustainability. The result: measurable social returns, stronger communities, and more efficient use of public funds.



### Impact Genome Registry

The Impact Genome Registry (IGR) establishes science-based standards for measuring impact, creating a universal framework that helps transform social outcomes into measurable, verifiable assets. As the world's largest repository of standardized impact data, it includes over 2.2 million registered programs and 5,700+ verified programs, accounting for more than US\$6.6 billion in validated social spending.<sup>8</sup> This illustrates the importance of step (8): evaluating outcomes, by defining program effectiveness through 132 standardized outcomes—measurable changes in a beneficiary's status, behaviour, or condition over a 12-month period.<sup>9</sup> This helps enable funders and stakeholders to assess a program's true impact with confidence, using evidence rather than assumptions.



## How it works

The Impact Genome Registry uses universal taxonomies for outcomes, program components, and beneficiary types, helping to ensure that social impact data is consistent, comparable, and actionable. Its publicly accessible evidence base helps organizations and funders identify “what works” across programs. This supports step (7): managing performance, by enabling organizations to benchmark against industry standards, while also aiding step (6): managing delivery through data-informed decision-making.

The Benchmarking Tool provides a free, online self-assessment platform that aims to enable organizations to discover their “Impact DNA” (i.e., common design features) and compare their performance with peer organizations. This means non-profits can adopt best practices, enhance their strategies, and strengthen their impact reporting.<sup>10</sup>

A key innovation is the [Verified Impact Report™](#), which allows funders to invest with certainty, using transparent, peer-reviewed, and benchmarked data on program effectiveness. This shift from anecdotal reporting to evidence-based measurement ensures that funding decisions are data-driven and equitable.<sup>11</sup>

## Impact of digital tools on service delivery

One example of how this standardized approach can improve impact measurement is the Youth Development Standard within the Impact Genome Registry. The Youth Development Standard organizes data across universal impact taxonomies, to analyze the program features, the context of the program, outcomes, beneficiaries and how implementation is executed.<sup>12</sup>

This can lead to specific evidence-based outcomes, including:

- Improved social-emotional skills (e.g., self-regulation, communication, leadership)
- Positive identity development (e.g., self-agency, confidence)
- Increased knowledge of civics and social responsibility
- Responsible decision-making (e.g., making informed judgments, anticipating consequences)

## Outcomes and impacts

Deloitte Canada collaborated with Impact Genome to develop a performance framework to evaluate a social services provider network. This project aimed to assist in understanding past program performance and in creating new contracts, reviewing current providers, and making the contracting process more efficient, including integrating new programs or providers.

The standardized metrics offered by Impact Genome allowed funders to better manage contracts by using reliable data for benchmarking. Deloitte used the Impact Genome to assess the operational network of providers, generating a scorecard and dashboard to measure its effectiveness.

## Deloitte x Impact Genome Example

Impact Genome simplifies impact reporting and benchmarking for funders and social services providers by using universal impact standards. Deloitte worked with Impact Genome to establish a performance framework across a large network of social services providers. This project aimed to assist in creating new contracts, reviewing current providers, and making the contracting process more efficient, including integrating new programs or providers. The standardized metrics offered by Impact Genome allowed funders to better manage its series of third-party contracts by using reliable data, that is consistent across providers, for benchmarking estimated costs per outcome and populations served for its an ecosystem of providers. These insights are one way to help enable funders to better calibrate vendor performance with fees, enhance efficiency and outcomes, and reduce management complications. Moreover, the assessment gave a detailed view of provider performance and cost per outcome, enabling smarter decision-making regarding where providers have strengths and opportunity areas for improvement.

The potential of outcomes-based commissioning to deliver better outcomes for children is significant, but moving from the prominent practices of procurement and contracting today requires a change in culture and carries risks that should be managed. There is financial uncertainty on both sides. Challenges in measuring and comparing outcomes creates risk to accountability for public funds for commissioners. The incentive for providers to achieve outcomes may perversely encourage them to “cherry-pick” children and families with specific needs and fewer barriers to outcomes. Most importantly, of course, the real risk is that children and families are impacted if the optimal outcome is not delivered.

These risks and challenges are real reasons for children's social services to be cautious. Commissioners and providers are looking for ways to get started – and to mature – safely.

### What can children's social services organizations do today?

1. **Get clear on outcomes.** A shared view of outcomes is at the foundation of better commissioning and partnering, supporting a common vision of success, clear investment objectives, and the basis of performance measurement frameworks. To develop an outcomes framework commissioners will need to bring together the experience of children and families with the information that they, their providers and their partners hold.
2. **Review your current commissioning spend.** Look across your portfolio to see how well they are delivering on your outcomes, where variation is and why. Focusing on impact can support better conversations with providers even without outcomes-based contracts, and can help identify both the barriers and the good practice.
3. **Improve your current contracts.** A review of current contracts is likely to find overly complex terms and conditions, high levels of variation between seemingly similar contracts, ambiguity in how “success” is measured, and onerous reporting requirements that does translate into commissioners' decision-making. In the past analyzing contracts has been a mountain to climb, but modern AI tooling can identify patterns, clusters, and areas for improvement across large volumes of contracts. This insight can support commissioners to simplify, standardize and consolidate contracts, reducing contracting risk and the effort for commissioners and providers to manage contracts.
4. **Involve providers early.** Bringing providers to the table throughout the commissioning wheel – including to identify needs and define outcomes. Communicate proactively and early throughout procurement, delivery and performance management. Constructive feedback delivered in a timely way helps providers and commissioners to learn and adjust.
5. **Digitally enable contracting, payments, and reporting.** AI tools can support contract analysis across large volumes of contracts, identifying risks, complexities and non-standard clauses that may present opportunities for improvement.<sup>13</sup> Digital tools can make the business of creating and managing contracts more efficient and transparent. Automated contract creation and invoicing, and electronic payment systems streamline the contract management function. Data integration, coupled with customizable dashboards, significantly reduces reporting effort, and improves the timeliness and quality of the data. These are big wins for providers who today often spend significant time managing the administrative overheads of contracts.
6. **Shift the capability.** On both sides – commissioner and provider – moving from contracting to outcomes-based commissioning working with and through providers is a big cultural and practice shift. New capabilities are likely needed to define and measure outcomes. Greater collaboration and trust between commissioners and providers need different ways of working. These are capabilities that need to be built across the ecosystem, and commissioners should play an active role through market shaping to support a thriving provider sector with the capability and capacity to meet demand, and to work in new ways to innovate and improve service delivery and achieve long-term outcomes. Commissioners are also increasingly considering what tools and resources they can make available to the wider system – for example, building and sharing the evidence base for what works, making the data and tools available as platforms for providers to analyze, report on and manage contracts, and providing common tools such as the Outcomes Star<sup>14</sup> to support providers to measure children's progress towards outcomes in a way that is meaningful to children and to commissioners.

## What can providers do today?

- 1. Tell your story, build your evidence.** Providers are often responsive to funder requirements and so find themselves telling the story of their outcomes and interventions in multiple ways. As providers move towards outcomes, they have the opportunity to set out their theory of change – how their interventions support children and families to create change, and the short- and long-term outcomes that those deliver. At its most simple a theory of change articulates the problems as they are understood, the impact governments and providers are seeking to achieve, and the set of interventions and activities that the organization delivers to achieve that. By layering on the evidence (why do we believe that this works?), the assumptions (what needs to be true for this to work?) and the data (how will we know if this works?) providers can inform the needs assessment and strategy, and prepare for the commissioning and procurement itself.
- 2. Assess your costs and your benefits.** Outcomes-based contracts need more sophisticated cost and benefit models. Outcomes-based budgeting is an approach that aligns costs with outcomes and impacts, enabling providers and commissioners to understand the cost-benefit of an outcome, and to fund and purchase in an effective (greatest outcomes) and sustainable (whole-cost) way. There are different methods that can be applied, including economic cost-benefit analysis and social return on investment approaches. A first step is understanding and costing the full set of resources and activities that support an outcome – some of which may not currently be identified today, either because they are not costed (for example, relationship building activities in communities) or because they are hard to attribute (for example overheads that support multiple delivery program).
- 3. Reflect on your capability.** Outcomes-based contracts mean a shift in how providers monitor, evaluate and report on their contracts. They can put providers at financial risk because they will receive more of their payments based on the results they achieve. To handle this, providers should understand and manage both their internal and external risks. It also creates real opportunity to partner more meaningfully, to innovate and to increase impact. Assessing your readiness across leadership, culture, ways of working and data will support providers to build capability – and to reflect that in cost and delivery models.



# Endnotes

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