Business Concept: Social Impact Bonds for Improved Mental Health

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1. Vision

A social enterprise/business that benefits from the innovation, agility and financial markets of the private sector as it works to transform the lives of those with mental health issues. The business will revolutionise the provision of mental health services by allowing a private company to be paid by governments/national health services on a performance/success basis.

The Anthony Robbins companies are well placed to launch this business based on a track record of helping over 4 million people to achieve transformational change in their lives. This document is specifically focused on a hypothetical new Anthony Robbins business that I have referred to as Tony Robbins Mental Health ("TRMH").

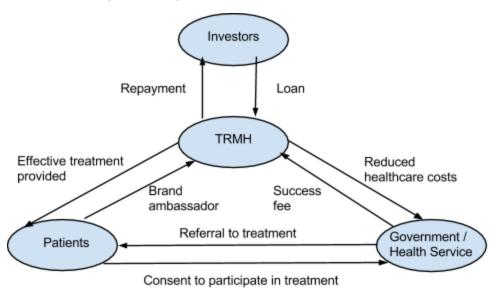
Mental health in the context of this document referring to stress, anxiety, and depression. It does not refer to personality or schizophrenic disorders.

2. Values

- Mental health issues cause significant unnecessary and preventable pain
 - Society has a 'duty of care' to help these people
- Mental health issues reduce the ability of people to make useful economic contributions to society
 - o Investment in mental health treatment has a positive return on investment
- Mental health issues can propagate through social networks and across generations, meaning the damaging effects multiply exponentially
 - We need to use scalable business models to tackle this issue
- Mental health is poorly understood by Western medicine meaning that resources can be wasted on treatment approaches that are not effective
 - Treatment needs to be both measurably effective and resource efficient
- Mental health is frequently managed in the short term rather than treated
 - Treatment needs to have demonstrable long-term lasting impacts
- Mental health services in countries such as the UK are often overstretched and often have long patient waiting lists. This can result in additional suffering in the interim period and in extreme cases, self harm or suicide
 - Patient contact needs to occur as soon as possible after referral and treatment needs to begin rapidly in order to minimise patient suffering

3. Methodology

3.1 Business model diagram: map of value flows



3.2 Steps to implementation

- 1. TRMH designs a curriculum to rapidly treat people with mental health issues based on decades of experience achieving personal transformation for over 4 million people
- TRMH agrees deal with government/national health service to treat a fixed number of registered patients with mental health issues in return for a reward payment or 'success fee' on completion
 - a. Contract will require sign off on the ethics and approach of the treatment in addition to the Measurement, Reporting and Verification (MRV) structure that will be used to confirm treatment success
- 3. Investors lend money to TRMH at a fixed percentage interest rate with the intention that TRMH uses it to treat patients with mental health issues (i.e. TRMH issues a 'social impact bond')
- 4. TRMH uses investment funds to build company and prepare to treat patients
- 5. TRMH takes a cohort of patients that are referred by the existing health service and begins the treatment period
- 6. At end of treatment period, the government/health service evaluates the performance of TRMH using the pre-agreed transparent MRV procedure
 - a. If the number of patients successfully treated is equal to or greater than the number in the contract, the government/health service pays the agreed success fee to TRMH
 - i. TRMH is then able to honour its debt and repay the investors

- ii. Successful patients could then be recruited as brand ambassadors to spread the good news about the TRMH treatment process, meaning that other patients would begin to ask to be referred to TRMH
- b. If the number of patients successfully treated is **less** than the number in the contract, the government/health service does not pay any fee to TRMH and the company makes a loss.
 - Depending on the terms of contract, TRMH may either have another opportunity to restart treatment with a new cohort of patients or it will have to cease treatment of patients.
- 7. If successfully treated, patients will reap the rewards of improved mental health and governments will reap the rewards of lower healthcare costs and more productive, happy citizens.

3.3 Resources required

- Digital resources
 - Video tutorials
 - o Forums
 - Audiobooks
- Books
- Coaches
- Mentors
- Dietitians/nutritionists
- Personal trainers
- Lecturers/presenters/facilitators

3.4 Modalities

- Physical events
 - Weekend length
 - Week length
 - Fortnight length
- Digital 'events'
 - Webinars
- Continuous homework assignments
- Mentoring/coaching
 - Remote (web or phone based)
 - o In-person
- Care manager
 - Coordinates all activities for the patient and acts as a central point of contact to answer questions at any time

3.5 Intervention points

- 1. Focus
 - a. Meditation
 - b. CBT
 - c. Goal setting
 - d. Mentoring and coaching
 - e. Human Needs Psychology

2. Physiology

- a. Physical exercise
- b. Breathing techniques
- c. Posture correction
- d. Medication review
- e. Diet and nutrition review

3. Language patterns

- a. Vocabulary building
- b. Speaking and listening skills
- c. Neuro-Linguistic Programming (NLP) techniques

3.6 Clients

- UK National Health Service (NHS)
- UK government
 - Social Outcomes Fund
 - Commissioning Better Outcomes Fund (EOI support)

3.7 Potential Collaborators

- Goldman Sachs (Investment partners see this link)
- Bridges Ventures: Social Impact Bond Fund (Investment partners see link)
- Third Sector Capital Partners (Advisors see link)
- Finance for Good (Advisors see link)
- Social Finance (Advisors see <u>link</u>)

3.8 Competitors

• None - social impact bonds are an untested funding model in the mental health sector

4. Obstacles/Threats

• Government slow to recognise the viability of the approach



- Entrance of competitors in the marketplace
- Investors don't recognise the opportunity
- Patients don't opt for treatment
- Patients don't respond to treatment
- Government doesn't honour its payments
- Government doesn't approve methodology
- Legal/regulatory uncertainty about integration of TRMH with existing services
- Can't get right team together
- Can't gather startup capital
- Can't get government to sign contract

5. Measurement

- Longitudinal study of patient improvement (continual external assessment)
- Longitudinal study of patient improvement (continual self assessment)
- Post treatment consultation by existing health service professionals
- Number of patients treated successfully
- Percentage of patients treated successfully
- Speed of response to treatment request
- Speed of successful treatment completion

6. Further information and resources

- 1. UK Government resources on Social Impact Bonds
- 2. Center for Social Impact Bonds Knowledge Box
- 3. Wikipedia Social Impact Bonds
- 4. TED talk on Social Impact Bonds by Toby Eccles of Social Impact