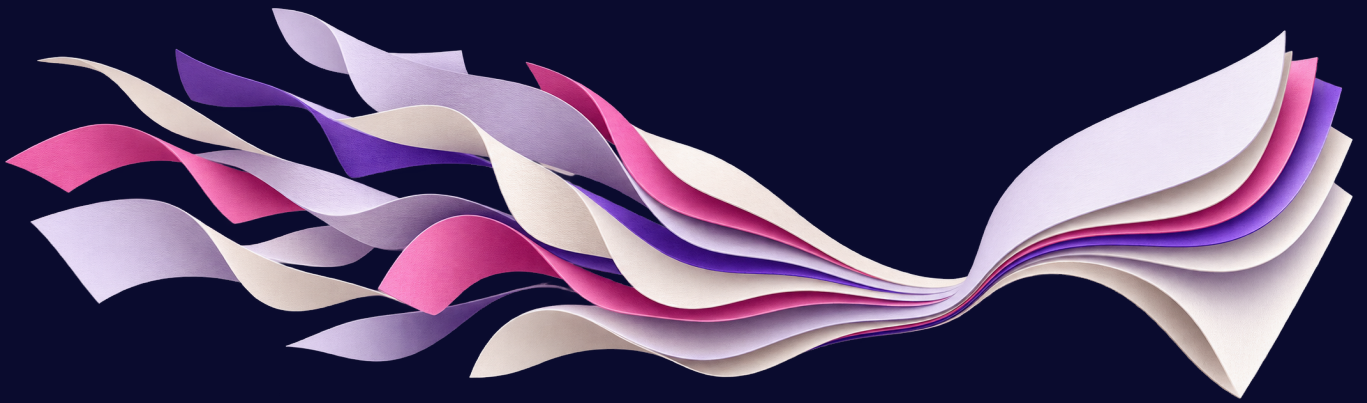


Because **Outcomes Matter.**

AI in local authority
people services

The Statutory Standard 2026



**Sustained use.
The evidence so far.**

AI in local authority people services,
informed by council experience and the
evidence so far.

Evidence that matters

The argument, the evidence and the questions to ask next.

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Evidence cut-off: 18 October 2026.

Recorded use, reported experience, modelled estimates and intended outcomes are distinguished throughout.

Foreword

An Education, Health and Care (EHC) plan shapes a child's education. A Continuing Healthcare (CHC) assessment helps determine how someone's care is funded. A review can reveal that a person's support needs to change. At each of these points, the quality of the evidence matters to the person whose life is being described.

Behind that evidence is demanding professional work. Practitioners read reports, hear different accounts, identify what matters and make judgements. They also spend hours transferring, restructuring and checking information so that it fits the document the service needs. Improving that preparation creates space for the work that depends on their expertise.

We founded Outcomes Matter Consulting to help local government people services improve. Our work spans service reviews, business cases, improvement programmes and the practice, behaviour and culture change needed to make them succeed. Plus Innovations grew from the same purpose: understanding a service problem closely enough to build something useful around it.

We have now built our own Plus Innovations Platform and are ready to onboard authorities. It brings together what we have learnt from statutory practice and implementation, so that teams can help shape useful support around their work.

Ealing now gives us evidence of sustained CHC+ use over 13 consecutive months. Stoke-on-Trent is taking CHC+ into wider rollout and commencing a coordinated AI roadmap across adults, children's services and SEND. Experience in Brent and the priorities set out by North Lincolnshire's SEND leadership have helped define what useful EHCP drafting must deliver.

This report sets out what we have learnt, what the evidence supports and where the opportunity lies. Some benefits have been reported in live use; others are projections to test through rollout. We make that distinction because a strong case for change should remain strong when a director, practitioner or finance colleague examines it closely.

Our focus is work where the stakes are high and the impact matters. Sometimes that means thousands of documents. Sometimes it means a small number of complex cases with substantial consequences for people and public money. The starting point is the importance of the task and the improvement possible.



Emma

Emma Ockelford
Founder and CEO,
Outcomes Matter
Consulting

The report in brief

This is Outcomes Matter’s proposed framework for useful, accountable AI support in statutory people services. It brings ten principles, council evidence and a practical test for review-ready drafts into one approach. It is open to scrutiny, not an official accreditation.

What the evidence supports

Ealing: sustained use. CHC+ supported 81 adult cases over 13 consecutive months; 151 of 155 submitted draft-domain ratings were positive. The original two-month pilot, involving six social workers, reported drafting falling from more than four hours to around 30 minutes.^[12]

Stoke-on-Trent: a wider programme. Encouraging practitioner reports from a small CHC+ pilot have led into rollout and a coordinated programme across adults, children’s services and SEND. Wider service benefits are being modelled and tested.^[13]

Brent and North Lincolnshire: practical learning. Repeated use and team feedback are shaping EHCP+ around clearer evidence, local templates, manageable review effort and a shared quality threshold.^[11, 14, 21]

What the next evidence needs to show

Sustained use and positive feedback are a useful start. The next test is whether that experience produces measurable improvements across the whole task and the service.

Priorities for the next reporting cycle are:

- Quality of reviewed drafts and completed plans, including material omissions and corrections.
- Time spent preparing, checking and completing comparable cases.
- Checklist acceptance and rework beyond the pilot period.
- Timeliness, practitioner capacity and how released time is used.

The measurement framework later in this report sets out how to judge those results together. Modelled benefits remain estimates until measured in practice.

How the three standards fit together

01	The Statutory Standard	ten proposed principles for any statutory AI use.
02	The Review-Ready Standard	the shared test for accepting a local drafting setup.
03	The EHCP+ Drafting Standard	the detailed product specification that puts the test into practice. ^[11]

Start with the statutory task that matters

NATIONAL CONTEXT / ENGLAND

12.5%

Increase in active EHC plans in the year to January 2026.^[1]

46.1%

New plans within 20 weeks in 2025, excluding permitted exceptions.^[1]

61%

Registered SEN appeals concerning plan content, 2024/25.^[2]

99%

Tribunal-decided cases in favour of the appellant, 2024/25.^[2]

£715m

Estimated adult social care overspend for 2025/26.^[3]

81,770

Looked-after children in England at 31 March 2025.^[4]

Sound evidence and clear plans matter, but those figures also cover substantive disagreements about need, provision and placement. They cannot tell us how many appeals better drafting would prevent.

Where preparation can improve

Start with the part of the task that needs to improve

SEND, adult social care and children's services face different pressures, but each relies on professionals turning complex information into an account that supports action. An important need can be lost between documents. A recommendation can lose its frequency or duration when transferred into a plan. Conflicting accounts can be flattened into a narrative that sounds more certain than the evidence allows.

These preparation tasks have real consequences. Getting them right helps a practitioner understand and explain the case. Getting them wrong creates checking, correction and potentially avoidable challenge, alongside the risk that a person's needs are misrepresented.

In SEND, the number of active EHC plans rose by 12.5% in the year to January 2026. During 2025, 46.1% of new plans were issued within 20 weeks, excluding permitted exceptions.^[1] The work extends beyond new assessments to maintaining and amending a growing stock of plans.

In the 2024/25 academic year, 61% of registered SEN appeals concerned plan content. Among cases decided by the tribunal, 99% were decided in favour of the appellant.^[2] Sound evidence and clear plans matter, but those figures also cover substantive disagreements about need, provision and placement. They cannot tell us how many appeals better drafting would prevent.

In adult social care, substantial waiting lists coexist with financial pressure. ADASS reported an estimated £715 million overspend for 2025/26.^[3] Continuing Healthcare adds a demanding interface between health and social care: practitioners must assemble evidence of need within a national process, and funding responsibility can have significant consequences for individuals and public bodies.

Children's services also depend on careful evidence assembly, continuity and review. England had 81,770 looked-after children at 31 March 2025.^[4] Across complex lives and changing professional networks, an accurate account of what has happened, what people have said and what still needs attention is essential.

Improve the preparation around professional judgement

BASW's 2018 80:20 campaign drew attention to the imbalance between administrative activity and direct work with children and families.^[5] The practical concern remains recognisable: professional time is consumed by constructing the record as well as understanding the person.

Our focus is the part of that work AI can assist: finding relevant material in supplied records, bringing it into the required structure, preserving attribution and making gaps visible. Reading and understanding evidence, speaking with people, resolving disagreement and deciding what should happen remain professional tasks.

The statutory task that matters

A faster draft has value when it helps the practitioner reach a useful, checked document with less effort. A service also needs to understand what happens next. If missing advice or an approval queue is the main delay, drafting support needs to sit alongside action on that part of the pathway.

This is why we start with the service and its work. A tabletop review of the current process, supported by case examples, operational data and conversations with practitioners, can reveal where time is lost and what kind of intervention would help. Sometimes that is technology. Sometimes it is a clearer standard, a different handover or a change in management practice. Often these need to work together.

High impact does not require high volume

Volume multiplies a per-case benefit. Consequence determines why the task matters in the first place.

In a large SEND service, a modest reduction in work on each plan can accumulate into substantial capacity. In a specialist CHC team, a smaller number of cases may each involve hours of preparation and significant funding responsibility. In quality assurance, a better account of one serious concern can matter more than the number of documents processed.

Leaders should consider three things together: the consequence for people, the professional effort involved and the frequency with which the opportunity occurs. That produces a more useful set of priorities than a search for the busiest process alone.

Financial appraisal needs the same clarity. Released capacity, avoided expenditure and cashable savings are different results. Correctly placing funding with the responsible body may benefit a council's budget without reducing total public expenditure. Time returned to a practitioner becomes a service benefit when the team can use it for something that matters.

SEND funding arrangements are also changing. Government guidance provides for support towards 90% of eligible accumulated DSG deficits at 31 March 2026, subject to conditions, and government has set out its intended treatment of future SEND pressures from 2028/29.^{16, 71} Clearer plans, timely work and sustainable professional capacity remain important whatever the funding route.

Ten principles for useful, accountable support

The Statutory Standard is Outcomes Matter's proposed framework for evaluating AI in statutory people services. It is open to scrutiny and can be used to assess our products or another approach. It is not an official accreditation. Its purpose is to make the expectations clear enough to test.

01 Start with a defined statutory task.

Specify the output, relevant framework, evidence sources and intended users. Assess performance on the work the service actually needs to do.

02 Keep decisions with accountable professionals.

Evidence assembly and drafting must have clear boundaries. Our tools do not assign CHC domain levels, determine eligibility or funding, decide safeguarding risk or replace the professional or panel. They are not designed to monitor individual staff performance.

03 Make review meaningful.

Reviewers need familiarity with the person and evidence, the skills to recognise errors, time to examine the output and authority to correct or reject it.

04 Preserve evidence and make it checkable.

Keep sources clear, preserve important detail and show uncertainty or disagreement. Check that the draft reflects the evidence and that a reviewer can trace important statements to their source.

05 Govern the actual data flow.

Establish purpose, lawful arrangements, access, retention, deletion and supplier responsibilities before live use. UK hosting and restrictions on model training must be evidenced for the proposed service.^[9, 10]

06 Keep people visible and involved.

Explain AI's role understandably, preserve the person's and family's views, and provide a route to challenge inaccuracies. Include their experience in evaluation.

07 Keep records that support accountability.

Retain sources, generated outputs, material amendments, approvals and relevant versions to investigate a concern. Records should explain what informed the final document, who reviewed it and how significant changes were resolved. Keep this record proportionate.

08 Accept the local setup before routine use.

Test representative cases against agreed criteria, with a named organisational owner and support for practitioners after launch.

09 Measure benefit alongside quality.

Include input preparation, generation, checking, regeneration, correction and completion where the intervention changes them. Separate observed results, practitioner estimates and projections.

10 Maintain assurance as the service develops.

Record recurring problems, provide an immediate route for serious concerns, test material changes and agree when use should pause. Make exit and record retrieval workable.

AI supports preparation and analysis; the responsible people make the decisions.

Testing the standard in practice

These accounts test the principles against everyday practice, drawing on programme records, meeting notes, practitioner feedback and current delivery plans. Ealing shows sustained use; Stoke shows how a successful start can lead into wider service change; Brent brings practitioner experience; North Lincolnshire sets out leadership priorities for plan quality, consistency and assurance. Sources are listed in the references.

01

Observed usage

Recorded activity in programme data.

02

Reported outcome

Programme or practitioner accounts of what happened.

03

Modelled benefit

An estimate using stated assumptions, not a measured result.

04

Qualitative learning

Experience, requirements and lessons from implementation.

05

Intended outcomes

What a proposed programme aims to achieve.

Ealing

A year of use changes the conversation

OBSERVED USAGE / SEPTEMBER 2025-SEPTEMBER 2026

81

Adults' CHC cases supported

13

Consecutive months of use since launch

PRACTITIONER FEEDBACK

97%

of practitioner ratings on CHC+ draft domains were positive.

151 positive ratings out of 155 submitted.

“The difference now is like night and day.”

Shirley Ellis, Social Worker, Ealing Council.

REPORTED OUTCOMES / ORIGINAL TWO-MONTH PILOT

>4 hours → ~30 minutes

Reported checklist drafting time.
No ICB rejections during that pilot.

£130,000+

Correctly placed NHS funding reported for two people's cases during the pilot.

Programme-reported pilot outcomes, not an independently audited cash saving. Usage and feedback are not measures of clinical accuracy. Delivery used HGS UK CaseAssist. Full analysis follows.^[12]

What sustained use teaches us

Ealing helped co-develop CHC+ with Outcomes Matter and HGS UK. The initial two-month pilot involved six social workers, supported by managers, and reported checklist drafting falling from more than four hours to around 30 minutes. No checklists were rejected by the Integrated Care Board during that pilot. The programme also reported over £130,000 in correctly placed NHS funding associated with two people's cases.^[12]

The October 2026 year-one review adds a different kind of evidence. Between September 2025 and September 2026, CHC+ supported **81 live adult cases**, with cases created in every one of the 13 months. Practitioners uploaded **393 documents**. Continued use through winter, summer and ordinary service pressures shows that this has become part of the team's work beyond its supported start.

Practitioner feedback is encouraging. **151 of 155 recorded domain ratings were positive**, approximately 97%. At whole-case level, **14 of 17 final ratings were four or five out of five**. These ratings describe the feedback submitted; they are not an audit of every case or a measure of clinical accuracy.

Applying the pilot's 3.5-hour saving to all 81 supported cases gives an illustrative estimate of **about 284 hours of practitioner capacity** across the reporting period. This assumes the same saving for every case; it is a projection, not a measured total.

The human account is equally relevant. Ealing's CHC lead described social workers becoming more positive about completing checklists and bringing questions about practice, rather than the mechanics of writing the document. That is the change we want to support: more professional attention available for the case and the person.

The year-one review also helps us understand adoption. In a specialist task, use naturally varies with the cases each practitioner handles. Login frequency alone tells us little about value. A more useful question is how much of the team's suitable CHC work is supported, and whether colleagues can use the tool confidently when they need it.

Feedback is also shaping the next improvements: making it easier to add evidence as a case develops, supporting occasional users with refreshers and peer learning, and following what happens after a checklist is completed. These are practical ways to make the benefit easier to realise in everyday work.

The leadership lesson: sustained value comes from fitting the real pattern of work. The next stage at Ealing is to connect usage and draft feedback with checklist outcomes, full assessments and funding decisions. Checklist acceptance is a step in that pathway, not itself an eligibility decision.^[16]

Stoke-on-Trent

From easier preparation to better service delivery

REPORTED PILOT EXPERIENCE

Stoke's CHC+ pilot involved six social workers, ten checklists and two months of supported use. Practitioners reported approximately 80–90% less drafting time and described the content as at least as good as what they would produce themselves. "It has made life a lot easier for us," said Kayleigh Fletcher of Stoke's CHC team. CHC+ is now live and moving through wider rollout.^[13]

The significance is practical. Preparing a checklist becomes less burdensome, while the practitioner remains responsible for understanding the person, reviewing the evidence and completing the assessment. The pilot gives an encouraging account of that change in the working day. The next step is to establish how it affects routine delivery and the experience of people receiving support.

Stoke's wider people services roadmap connects this starting point with three ambitions:

Stoke is now commencing a programme to implement an AI roadmap across people services, including adults, children's services and SEND. It brings CHC+, DST+, EHCP+, Quality+, a workforce assistant for local practice and policy questions, and CCC+ discovery into one coordinated approach. Outcomes Matter combines service improvement with engagement, training and practical implementation support, helping each team build the tools into everyday work.

INTENDED SERVICE OUTCOMES

01 More time for people

reduce repetitive preparation so practitioners can concentrate on assessment, conversations and progressing work that needs their attention.

02 Clearer, more consistent evidence

support CHC assessments and EHC plan drafting with better organised material, retaining professional responsibility for the finished work.

03 Stronger assurance and learning

help teams examine case records against local standards, identify patterns and use the findings to improve practice.

The assurance model assumes **60% less time per audit**, reducing three hours to 1.2 hours. That would allow **2.5 times as many cases to be reviewed in the same time**. This is a planning estimate to test with completed audits. Timelier EHCPs remain an aim for the whole pathway, where drafting is one part of the work.^[13]

The leadership lesson: build the change around what the service wants to achieve. Shared ownership, realistic sequencing and support for staff connect an improvement in one task with a more purposeful programme across people services.

Brent

The value is in the whole job

69

Distinct draft exports / 3 July–30 September 2026

8 of 9

Exporting accounts used the tool in more than one month

Brent's October 2026 review records **69 draft plans exported** between 3 July and 30 September. Eight of nine exporting accounts used EHCP+ in more than one month, and exports occurred every week through the period.^[21]

That repeated use sits alongside a clear account of value from the SEND team manager: help with getting started and bringing information together. Caseworkers also identified what makes that head start worthwhile. A draft must carry through the child's story, preserve significant professional advice and fit the way the team completes its plans.

That learning has informed the rebuild of EHCP+ on the Plus Innovations Platform. The focus is on bringing advice together, making sources easy to trace and fitting the local plan template. Caseworkers should be able to spend their time understanding the child and applying professional judgement, with less time assembling information or reworking the structure of a draft.

Development and iteration are continuing. Working with caseworkers helps refine the draft's structure, evidence and links between needs, outcomes and provision. The Review-Ready Standard sets the threshold to work towards; acceptance of the local setup follows testing and refinement with the service.

As use develops, impact needs to be understood across the whole task: the quality of completed plans, practitioners' experience and time available for work with children and families. The aim is a more useful starting point and a smoother route to a plan that represents the child well.

The leadership lesson: evaluate the work a caseworker actually has to finish. A credible improvement programme connects usage, quality, total effort and workforce experience, then follows through to what changes for children and families.

North Lincolnshire

Start with the quality of the plan

LEADERSHIP PRIORITIES AT THE START OF THE WORK

When we started working with North Lincolnshire's SEND service, its leadership was clear about what mattered: better-quality plans, greater consistency and confidence in the evidence behind decisions. Assurance and defensibility were central, alongside plans that families could understand and recognise as a clear account of their child's needs.^[14]

01

Quality

connect the child's needs, outcomes and provision, giving families and professionals a coherent account of the support needed.

02

Consistency

bring a clear approach to new plans and annual reviews, shaped by local expectations and professional advice from partners.

03

Assurance

make the evidence behind the plan clear enough to check, supporting professional review and confidence in the decisions that follow.

BRINGING THE PRIORITIES INTO PRACTICE

Huddles with the team brought those priorities into everyday use. In July, one caseworker described using EHCP+ for every plan, including support with individual sections. The discussion highlighted the value of direct feedback from managers on generated drafts and a shared understanding of the quality expected.^[14]

The feedback also underlined the importance of making the process as simple and efficient as possible. A clear route from source advice to a useful draft helps caseworkers realise the immediate benefit and focus on the child, family and professional judgements the plan requires.

The leadership lesson: begin with what a good plan must do for the child, family and service, and build the approach around those priorities.

A draft that is ready for professional review

We have learned that producing a draft is only the beginning. The real question is whether it gives a caseworker a useful starting point and reduces the work needed to prepare a good plan. We developed the Review-Ready Standard to make that expectation clear and give the service a shared way to test it.^[11]

What a review-ready draft should do

For EHCP+, we check seven things: whether the draft reflects the source advice accurately; includes the important information; follows the plan's structure; connects needs, outcomes and provision; makes gaps or disagreements visible; uses clear wording; and takes a reasonable amount of effort to review.

The aim is a draft the caseworker can check and develop without having to rebuild it from the source files. Review-ready does not mean finished or error-free. A small correction may be reasonable; missing significant evidence or introducing unsupported detail needs attention.

How we reach that point together

The first weeks, and sometimes months, involve testing, feedback and refinement with the team. The EHCP+ framework starts with at least five representative cases, with more testing where needed. Caseworkers review generated sections and, where useful, try a revised draft before editing manually. This helps us see what needs to improve in the tool or local setup.

The service accepts the local setup when testing shows that it meets the agreed standard. This is a milestone to reach through development and iteration; it does not mean every current deployment has already reached it. Serious concerns should always be raised promptly.

What still needs professional judgement

If a parent's account and professional advice describe a child's communication differently, the draft should keep both accounts clear. The caseworker needs to understand the difference. If advice is missing, that gap should remain visible for resolution, rather than being filled with an invented detail.

Accepting the local setup is different from approving an individual plan. Every plan still needs professional review and completion, with the responsible people making the final decisions.^[18]

What makes improvement last

Confidence grows through practical ownership

The LGA's 2025 survey found that 83% of responding councils were using or exploring generative AI. Staff capability, capacity and funding were prominent barriers.^[8] Adoption also depends on the everyday conditions in which people change their work.

Practitioners need to understand the purpose, see useful results on familiar cases and retain control over the output. Some will be enthusiastic immediately; others need time to compare drafts with their evidence and understand where the tool helps. Both responses should be supported.

Managers make time for familiarisation, clarify what good review looks like and help colleagues address problems. A tool that misses evidence or makes checking difficult needs improvement; an occasional user may need a refresher. The response should follow the cause.

Discussions with councils highlight the value of early access for managers, accessible champions, huddles that lead to action and supervision that reinforces professional ownership. Outcomes Matter brings these routines together with setup and technical support.^[2]

Measure adoption against the opportunity to use the tool

Our learning with councils shows why logins alone are a weak measure of success. A practitioner with two relevant cases in a year will use a specialist tool differently from someone working on them every week. The questions are whether eligible work is supported, whether the result is useful and whether colleagues can use it confidently when needed.

Activity records show whether use is recurring; practitioner feedback explains what would make that use more valuable. Together, they give a better picture than either measure alone.

Treat review effort as part of quality

The first weeks, and sometimes months, involve testing, feedback and refinement. This exchange is expected while the local setup is developed towards the Review-Ready Standard. The service accepts that setup when representative cases meet the agreed criteria.

Once accepted, routine review effort becomes a key measure of quality. Check what the system supplied and the effort needed to complete it: sources should be easy to trace, significant evidence preserved and the local template followed. Professional review remains essential. The test is whether the accepted setup provides a useful starting point that reduces the total work involved.

Decide what the released time is for

Time savings do not automatically become more direct work or shorter waiting lists. Leaders need a plan for the capacity: progressing overdue reviews, improving conversations, reducing overtime, increasing assurance coverage or addressing another service priority.

That plan should be agreed with practitioners. It should also distinguish what the intervention can influence from dependencies elsewhere in the system. The benefit is strongest when changes in preparation, practice and workflow reinforce one another.

From a service priority to routine use

Putting the standard into practice is a joint piece of work. Outcomes Matter brings technology, service improvement expertise and practical support; the authority brings local knowledge, professional judgement and responsibility for the service. The pace depends on the use case, local readiness and what testing shows.

01 Start with the problem to solve

Agree the task, where time is spent and what matters to the people using the service. A service review, tabletop review or business case can help clarify the opportunity.

Where an existing product fits, we can show how it works and agree onboarding. New use cases begin with discovery involving a group of authorities, to understand the shared need before deciding what to develop.

02 Set it up and test it together

Bring service, digital and information governance colleagues together. Agree the source material, local templates, review arrangements, measures of success and the evidence needed for acceptance. Complete procurement and data protection arrangements before live use.

Practitioners test representative cases, including difficult or incomplete evidence. Training, feedback and refinement help the service decide when the setup meets the agreed standard. Shared governance evidence can reduce repeated work across a programme; each use still needs its own assessment.

03 Help the team make it part of practice

Regular huddles give people somewhere to ask questions and raise problems. Each discussion should lead to a practical response: a change to the tool, clearer guidance or help with a real case.

Local champions and refresher training help keep use consistent. Agree who handles questions, checks progress and provides specialist support. Clear ownership and continuing access to help allow the authority to sustain the approach.

Judge success across the service

Success means a better service for the people it supports. A quicker draft is one part of the picture: we also need to know whether quality improves, the tool is useful and any time released is put to good use. For example, if drafting gets faster but checking takes longer, the total effort may not improve.

Agree a small set of measures before starting and record how the task works today. Compare similar cases as use develops. The five areas below help leaders choose what to track and judge the results together.

AREA	EXAMPLES TO TRACK	THE QUESTION FOR LEADERS
Quality	Material omissions, attribution, source fidelity, useful drafts and final review findings	Is the professional starting point improving?
Effort	Preparation, checking, correction and completion time	Does equivalent work take less total effort?
Service	Eligible cases supported, rework, completed reviews and elapsed time	Does the improvement reach routine delivery?
Value	Full costs, capacity used, avoided spending and funding outcomes	What benefit has actually been realised?
Experience	Practitioner confidence, usability, and people's understanding of their records	Is the approach useful and trusted?

Review these results with practitioners at agreed points. Use them to decide what to improve, whether support needs to change and when there is enough evidence to extend use.

Who we are, and why we built Plus Innovations

Service improvement is the starting point

Outcomes Matter Consulting works with local government people services across SEND, adult social care, children's services and public health. Our team brings experience of social work, SEND delivery, service leadership, programme delivery, policy and technology. Councils work directly with experienced people who understand both the practical work and the organisational conditions needed to change it.^[22]

Our consultancy helps authorities review services, understand demand and practice, develop costed business cases and deliver improvement. Our work also includes AI roadmaps: deciding where technology could help, what to do first and how to introduce it coherently. Practice development runs through that offer, including conversation frameworks, team guidance, champions and the management routines that sustain change.

Ealing illustrates this breadth. Alongside CHC+, our separate reablement and supported living work, commissioned through Partners in Care and Health, produced two service reviews and four costed business cases. The common approach is to bring evidence, practitioner experience and practical options together so leaders have a basis for action.^[22] We are now also exploring innovation in supported employment with Ealing.

We also co-founded LGAI, the independent, member-led local government AI community. Its discussions give us a valuable way to listen to councils and test ideas with the people facing these decisions.^[15, 22] Recognition for CHC+ with Ealing in 2026 includes a win at Business Awards UK's Technology Awards (Lone Wolf Tech Business); a win at the APSE Service Awards (Best Collaborative Working Initiative); Highly Commended at the MJ Awards (Workforce Optimisation); and Bronze at the LGC Awards (Public/Private Partnership).^[23]

Each product brings four elements together

Every product links a clear specification, targeted AI support, governance and practical implementation. We work with practitioners and managers to fit local evidence and templates, test the output, build confidence and see whether the benefit lasts.



The team

Service expertise, practical improvement and technology.

What the platform supports

01

Specification

Task and boundaries

02

Technology

Preparation and analysis

03

Governance

Use and accountability

04

Implementation

Local fit and support

Useful, accountable practice

Owning the Plus Innovations Platform gives us a direct route from practitioner feedback to product priorities, bringing drafting standards and local setup into the same development process.

The suite's immediate focus is:

EHCP+:

preparing first-draft Education, Health and Care plans from multi-agency advice, for caseworker review and completion. Development draws on Brent's experience and the priorities identified with North Lincolnshire's SEND leadership.

CHC+:

preparing evidence narratives for NHS Continuing Healthcare checklists. It is live in Ealing and Stoke-on-Trent, delivered with HGS UK on CaseAssist to our specification. Practitioners determine domain levels and retain responsibility for the assessment.

DST+:

exploring evidence preparation for the NHS Continuing Healthcare Decision Support Tool. In discovery, with pilots planned for 2027.

Quality+:

supporting analysis of case records against agreed standards, helping assurance teams identify evidence and patterns for professional review. It is ready for initial council onboarding; its impact needs to be established in each deployment.

ASSURANCE IN PRACTICE

Outcomes Matter holds Cyber Essentials. Our platform assurance materials set out UK hosting and a prohibition on using council data to train AI models. The onboarding pack includes a pre-completed data protection impact assessment for the council to review and own, an AI assurance statement and a data processing agreement. Local technical and information governance teams agree the documented arrangements before live use.^[22]

CCC+ and SEN+ extend the work across children's lives

CCC+

Discovery / children's continuing care

CCC+: stronger evidence for children's continuing care. CCC+ is in discovery, exploring how to help practitioners assemble existing health, education, social care and family evidence into a clear, cited account for a children's continuing care assessment. The intended approach supports preparation of the application and evidence narratives; practitioners assess levels of need, make recommendations and retain responsibility for their work.^[26]

This is a direct example of why high impact matters alongside volume. A small number of children with complex needs can require substantial coordination across services and agency partners. Discovery will test where preparation is difficult and what would be useful to assessors, panels and families. It will establish the case for the product before claims about time savings or outcomes are made.

Together, these strands connect clearer evidence for important assessments with research into understanding needs sooner. CCC+ remains in discovery and SEN+ is a research programme. Councils and partners interested in shaping SEN+ can contact sen@outcomesmatter.co.uk.

The council accounts in this report show the delivery experience behind the suite. Historical results belong to the workflows and platforms on which they were achieved. They inform the new platform's design and implementation; local acceptance establishes how it performs in the authority adopting it.

SEN+

Research / earlier recognition of need

SEN+: researching earlier and fairer recognition of need. SEN+ is a 12-month feasibility study running from October 2026 to September 2027, funded by UKRI through Innovate UK's Contracts for Innovation competition. It asks whether bringing together observations already recorded about a child's communication, play and participation could help practitioners notice special educational needs earlier.^[25]

Building on the learning from EHCP+, the research moves to an earlier point in a child's life. Practitioners and families will help shape a prototype and test its usefulness, reliability and fairness. The study will examine differences between groups of children and the limits of sparse records: little recorded information must not be mistaken for little need. The prototype will support professional consideration, without diagnosing children or making decisions about their support.

The next step for statutory services

The opportunity for AI in statutory people services is becoming more defined. We are seeing sustained use beyond pilots and learning how useful approaches can be extended across teams and organisations. The experience points to a joined-up approach: service improvement, professional practice, technology, governance and support for change need to work together.

LGAi's AI in Local Government: A State of the Sector 2026 emphasises carefully chosen use cases, shared learning, workforce support and measurable impact.^[15] The next stage of AI use, and the case for investment, should be built around better quality, stronger services and better outcomes for people.

Connecting use cases around a common purpose can build a fuller picture of people's needs and how services respond. Wider analysis of case records may help teams identify patterns and use that learning to improve practice. CQC and Ofsted expectations remain grounded in understanding practice and people's experience; wider AI analysis should complement professional review and appropriate sampling.^[19, 20]

Our contribution to high-quality, effective statutory services across local government is the Plus Innovations approach: bringing service expertise, practical improvement, technology and support for people into one programme of work. We will continue to develop it with authorities and practitioners.

The Plus Innovations Platform is ready for onboarding with existing use cases.

Bring us a statutory stage where the stakes are high and preparation is harder than it should be. We can explore the opportunity with you and your team. New use cases start with discovery involving a group of local authorities, so development is shaped by a shared need.

Emma Ockelford

Founder and CEO

emma@outcomesmatter.co.uk

Because **Outcomes Matter.**

Explore
Plus Innovations



Meet
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Questions to bring to a demonstration

AUTHORITY / SERVICE _____

SUPPLIER / DATE _____

01 What exact task does the product support, and which decisions remain outside its scope?

05 Where is information processed, who can access it, and what happens on exit?

02 Can we see how a reviewer checks a statement, finds missing evidence and handles conflicting advice?

06 What support is included for managers, practitioners and occasional users?

03 How does it perform on our templates and a representative range of cases?

07 Who accepts the local setup, and how are problems and changes handled afterwards?

04 What work remains for practitioners, and how will the complete task be measured?

08 Which benefits have been observed, which are modelled, and what would establish success locally?

The Statutory Standard is Outcomes Matter's proposed framework. It is open to scrutiny and is not an official accreditation.

Comparing time and impact fairly



Editorial workflow: professional review and authorisation remain with the service.

Define the task boundary before comparing results. A reduction in drafting time is different from a reduction in the complete practitioner task or the elapsed statutory pathway. Include additional checking and correction caused by the intervention, and unsuccessful attempts as well as useful drafts.

National figures are used as context. The LGA's AI survey covered approximately one-third of councils and was not designed to be representative of every authority. ADASS changed its extrapolation method in 2026, so its waiting-list estimates require care in comparisons over time. Tribunal outcomes refer to the cases decided, not every appeal registered. LGAi discussions and polling provide community insight, rather than a matched longitudinal study.^[2, 3, 8, 15]

Evidence cut-off: 18 October 2026. Product readiness and programme status reflect Outcomes Matter's current position. Council-specific onboarding, governance and implementation arrangements are agreed locally.

About this report

Published by Outcomes Matter Consulting, an improvement consultancy and the provider of Plus Innovations. We have a commercial interest in this work and welcome scrutiny of the evidence and proposed standard. This first edition brings together current public evidence and our implementation learning; future editions will update both.

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