

LGA case study template

Date: March 2019

Local authority: Warrington Borough Council

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Case study title: Using behavioural insights to manage demand for Education and Health Care (EHC) Assessments and Plans – Special Educational Needs and Disabilities (SEND) Panel Interventions

Case study synopsis (100 words):

Warrington's SEND behavioural insights project focused on improving the effectiveness of its decision making arrangements around undertaking statutory assessments; issuing new Education, Health and Care (EHC) Plans; and allocating resources to meet the needs of children and young people.

The two main aims of the project were to ensure that requests for new EHC Plans and additional resources received appropriate scrutiny and challenge and that statutory partners engaged in the process.

The project involved trialing new processes around how the information for Panel was gathered and prepared and how the meetings were staged and proceeded.

The challenge:

Like many other local authorities Warrington faces significant pressures in the High Needs Budget as a result of the increase in demand for EHC Plans. Since the introduction of the Children and Families Act the number of EHC Plans maintained by Warrington Borough Council increased 66% from a relatively stable position of 969 in 2014 to 1,610 in 2018.

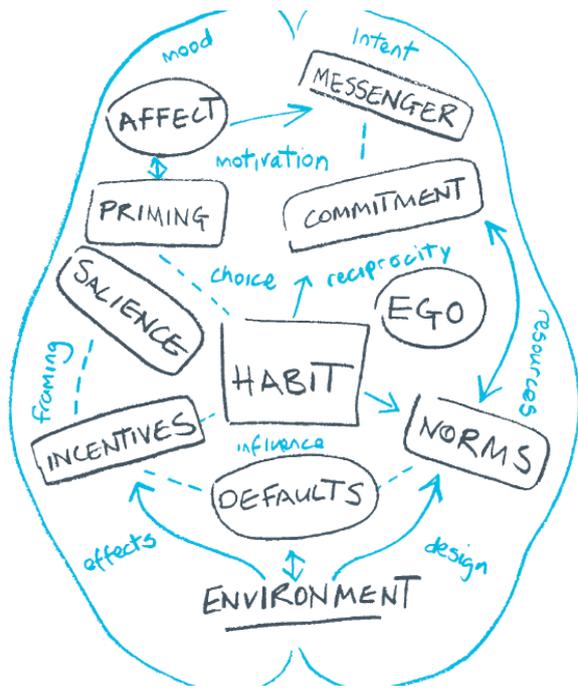
The increase in EHC Plans was exacerbated further by Warrington's decision-making arrangements which historically resulted in a smaller proportion of requests for assessments being refused – 0.5% in 2016 and 4.3% in 2017, one of the lowest refusal rates in its statistical neighbour group.

Observations of the Panel revealed a wide range of issues including inconsistent paperwork and evidence being presented for consideration; a lack of engagement and input from partners about how to meet the needs of the child and their family; and an inconsistent approach to applying thresholds for support which was worsened by parental threats for tribunal and provider threats about not being able to support the child without additional resources.

The solution:

As a result of the observations Panel, meetings with key strategic partners and the evaluation of outcomes, it was agreed to adopt the MINDSPACE Framework¹ to help influence people's behaviour and reduce demand in the system.

¹ MINDSPACE is a checklist of influences on behaviour to aid the application of behavioural science to service change. It was developed by some of the members of the current Behavioural Insights Team when they were working at the Institute for Government, where they were commissioned by the Cabinet Office to author a report on influencing behaviour with academics from the London School of Economics and Imperial College. Further information about MINDSPACE can be found at <https://www.bi.team/publications/mindspace/>



The following MINDSPACE informed interventions were implemented:

- Awareness raising sessions around the thresholds for assessments, plans and resources.
- Commitment from key partners to attend the Panel and personal email invites and text reminders prior to meetings to remind them of the date, time and location.

- Terms of Reference which all members were required to sign-up to.
- A new form to standardise the information presented at meetings.
- A triage system to identify inappropriate submissions to Panel with incomplete and/or poor quality information submitted by applicants. As part of this process, feedback was given to applicants about how to improve the quality of their submission and drop-in sessions were available for all professionals and parents about what evidence is needed for the case to be considered by Panel.
- Cases were presented in set order with Band B cases first, followed by requests to change education settings.
- The environment was primed using the white board to track decisions.

The impact (including cost savings/income generated if applicable):

Awareness raising with the Special Educational Needs Coordinators and school leaders about the thresholds for support had an impact on referrals. In the trial period between June and December 2018, there were 62 fewer requests for statutory assessment in comparison to the same period in 2017 - a 51% reduction. The number of deferred cases also reduced to nil since the introduction of the triage system. Based on an average cost per case of £349, it is estimated that the Panel's operating costs reduced by **£24,779 in the trial period.**

A higher proportion of requests for statutory assessment were declined

since the interventions were introduced - 36% in 2018 compared to 21% in 2017. This was 20 fewer assessments completed in the trial period **avoiding £50,000 of additional assessment costs.**

In terms of requests for financial support and placements:

- 13% of requests for new resources were declined and 43% were agreed at a lower level than initially requested. This has **prevented the council spending an additional £57,503** on new demand into the system.
- 45% of requests to maintain existing support packages were declined **saving the council £29,178** between June and December 2018.
- 44% of requests to increase financial support were declined and 16% were agreed at a lower level. **This has prevented the council spending an additional £47,430.**
- 33% of placement change requests were also declined and 17% were agreed at a lower cost than the existing placement. This has resulted in **£17,078 of actual savings** and **prevented additional spending of £115,510.**

Overall in the trial period, the interventions **prevented £295,220 of additional spend** and **saved the council £46,256.** Over a 12 month period it is expected that these interventions will in total prevent **£585,390 of additional spend** and **£145,000 in actual savings.**

How is the new approach being sustained?

It has been agreed that the interventions should continue as 'business as usual', including regular awareness raising at SEND related meetings about thresholds for support and dedicated drop in sessions for people submitting requests to Panel.

It has been agreed to invest £24,708 in dedicated business support to ensure that the Panel continues to operate effectively and that the impact of these approaches are monitored in the future.

Lessons learned:

1. Good business support is critical for preparing Panel members and tracking decision making.
2. Development of strong criteria for statutory assessment / resource

allocation so that all decisions are anchored.

3. Paperwork needs to be consistent, easy to read and include analysis of needs and rationale for changes to provision for Panel members.
4. Deputies work well to ensure Panel meetings are always quorate and do not have to be deferred.
5. Good multi-agency decision-makers in the room is important – especially from Health colleagues.
6. Panel members need to be reminded of where and when Panel meetings are taking place to secure continued engagement.
7. Focus on the needs of the child and what partners are providing to support the family as a whole, not just the child in the classroom.

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Links to relevant documents:

[Appendix 1 – Handy Hints for EHC Panel](#)

[Appendix 2 – List of key partners](#)

[Appendix 3 – Personal email invites](#)

[Appendix 4 – Text reminders](#)

[Appendix 5 – Terms of reference](#)

[Appendix 6 – Standardised form](#)

[Appendix 7 – Triage checklist](#)

[Appendix 8 – Tracking and anchoring decision making](#)