

Social Care

From Insight to Foresight: Data-Driven Decisions Across Health and Social Care

NHS Lothian and West Lothian Health and Social Care Partnership

Background

West Lothian Health and Social Care Partnership has developed a structured, data-led approach to transition planning for young people with a learning disability who are moving from children's services into adult services. This work sits within a wider commitment to using analytics to support decision-making across health and social care, with Mosaic and Power BI used to improve oversight, support earlier action and strengthen planning. Within transitions, the aim has been to create a clearer shared view of future demand, current activity and operational pressures.

The transition pathway is supported through regular collaboration between the Transitions Team, Child Disability Service, Children's Services and health colleagues in the Community Learning Disability Team. Co-location helps day-to-day communication, while school leaver information, Mosaic records and service intelligence are brought together to improve assurance that young people likely to need adult support are identified early. Referrals can come from schools, parents, the Child Disability Service or other professionals, and transition planning usually begins around two years before the expected school leaving date. Across NHS Lothian and West Lothian HSCP, this reflects a broader intention to use shared information to support timely, coordinated care.

Key Activities

1. Early identification and planning

Young people who may require adult service involvement are identified well before they leave school. Information from additional support needs schools is cross-referenced with Child Disability Service data and Mosaic records to support early identification and reduce the risk of anyone being missed. Referrals are usually made around two years before the school leaving date, and transition plans are developed and reviewed approximately one year before the young person leaves school.

2. Cohort tracking and future demand

Transition data is used to understand the volume of young people likely to require support in future years. This includes tracking cohorts across school years and identifying where activity is likely to be concentrated. Current cohort data has identified over 150 young people across the 2026 to 2029 cohorts, helping the service anticipate future assessment activity and likely demand for adult support.

3. Adult service entry and waiting list oversight

Once a young person is identified for transition, they enter the adult services pathway through the Integrated Access Point. Referrals are screened for eligibility and priority before being added to the

appropriate waiting list. Power BI dashboards linked to Mosaic are then used to monitor referrals, wait times, assessments and throughput, allowing management teams to review priority, identify delays and make timely decisions about caseload allocation.

4. Service matching and budget monitoring

Following assessment, a personal budget is generated and submitted for authorisation. Requests and approvals are tracked in Mosaic and monitored through reporting so that budget holders can keep sight of overall spend and identify packages that may have a significant budget impact. Once approved, support can be arranged through direct payments or through council-arranged care, with an unmet needs process in place when sourcing suitable support is more challenging.

Benefits and impact

Earlier visibility of need

A major benefit of the approach is the earlier visibility it provides of likely future demand. By combining school leaver information, service intelligence and Mosaic data, West Lothian HSCP is able to identify young people who may require adult support well in advance of transition. This gives teams more time to plan assessments, consider likely resource requirements and prepare for periods of increased demand. The identification of larger cohorts in 2027 and 2028, and concentrations within particular schools, shows how this information can support practical planning rather than only retrospective reporting.

This earlier visibility also supports a more assured transition process. Rather than relying on late referrals or fragmented information, services can work from a shared picture of future demand. This creates greater confidence that planning is taking place in a timely way and that young people likely to need adult support are being identified appropriately.

Stronger oversight across the pathway

The use of Power BI dashboards linked directly to Mosaic has strengthened oversight across several stages of the transition pathway. Referrals, waiting lists, assessments, authorisations and unmet needs can all be monitored in a way that is live and accessible to management teams. The dashboards are updated daily, which means information can support operational decision-making rather than being used only for periodic review.

This has changed how data is used in practice. Across the wider analytics approach within West Lothian HSCP, there has been a shift towards greater curiosity about the data and a stronger focus on understanding why issues are arising and what action should follow. Within transitions, this translates into closer monitoring of waiting times, better visibility of priority and quicker identification of where additional attention may be required.

Improved continuity of support

The approach has also supported continuity for young people moving into adult care at home services. Over 30 young people aged 20 or under were receiving care at home through adult services, and only a few of those individuals had required time on the unmet needs list. Of those, two had care packages in place within a week of turning 18, helping to keep disruption to a minimum.

This is a useful indication of the practical value of early planning and active oversight. The transition to adulthood can be a significant point of change for young people and families, so maintaining

continuity wherever possible is important. The option of direct payments can also support continuity where a young person is able to maintain established care arrangements into adulthood. Where that is not the preferred option, the service's ability to actively source support and escalate cases through the unmet needs process helps reduce the likelihood of prolonged gaps in provision.

Better connection between care and finance

Another benefit is the improved connection between care planning and financial oversight. Personal budgets, authorisations and approvals are tracked in the same system used to monitor the pathway, which helps budget holders identify emerging pressures and understand the likely impact of individual packages. This creates earlier sight of financial commitments and supports a more informed approach to resource planning.

The planned expansion of the Mosaic finance module across children's services is intended to build on this by giving a more unified view of the transition journey from a budgetary perspective. Bringing this information together should support longer-term forecasting and help ensure that financial planning is aligned with the needs of children and young people who are likely to require support in adulthood.

Learning and reflections

Shared working remains central

A clear learning point is that the digital and analytical aspects of the work are most effective when grounded in strong relationships across services. Regular engagement between children's services, adult services and health colleagues, supported by co-location, has helped strengthen communication and shared oversight. This demonstrates that the value of the data-led approach lies not only in the dashboards or systems themselves, but in how the information is used collectively by teams working towards a common purpose.

Good data depends on good recording

Another important reflection is the role of consistent recording practice. The effectiveness of this approach depends on information being entered in ways that are structured, comparable and usable for reporting. The HSCP identified the formalisation of transition plans within Mosaic as a priority for further development, recognising that structured digital information will make it easier to run queries, strengthen reporting and support more sophisticated decision-making.

Live information supports timely action

The move away from static reporting towards live, interactive reporting is another important area of learning. The use of Power BI allows large amounts of information to be viewed in a way that is easier to interrogate and more useful for day-to-day decisions. In transitions, this means that waiting lists, assessments and unmet need can be reviewed as active processes rather than as snapshots in time.

This responsiveness appears to support a more proactive style of management. Instead of waiting for issues to become established, teams are better placed to identify pressure points early and respond quickly. This does not remove the challenges involved in transitions, but it helps create the conditions for earlier intervention and better oversight.

Continued development is part of the approach

A final reflection is that this work continues to develop, and this ongoing progress is a positive part of the process. West Lothian HSCP is continuing to strengthen its use of Power BI and related systems while further developing its digital infrastructure. This measured approach is important because it reflects progress in a balanced way and shows a service that is building steadily on a strong foundation.

Taken together, the work across NHS Lothian and West Lothian HSCP shows how shared data, consistent recording and close collaboration can support a more planned and transparent transition process for young people moving into adult services. It demonstrates how a structured, data-led approach can strengthen oversight, support timely decision-making and help services prepare earlier for future need. This provides a positive basis for continuing to strengthen support for young people and their families as they move through transition.

Contact for enquiries

John Beattie
john.beattie2@nhs.scot

Struan Hope
struan.hope@westlothian.gov.uk