

East Lothian Council Scrutiny Report

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1 Introduction

East Lothian Council's social work services are delivered by Education and Children's Services and Community Services, which contains Adult Social Care. Criminal Justice Services are contained within Adult Social Care.

The Care Inspectorate decides how much scrutiny a local authority's social work services will need by carrying out an initial scrutiny level assessment (ISLA). This considers potential areas of risk at strategic and service levels. The Care Inspectorate carried out an initial assessment of East Lothian Council's delivery of social work services between August 2011 and November 2011. We did so by:

- Scrutiny of 76 case records, supported by local file readers, and an additional 20 case records read as part of supported self-evaluation of services for high-risk offenders, again local file readers assisted us.
- Analysis of 250 documents provided by East Lothian Council.
- Reference to SWIA's performance inspection report (published 2009) and follow-up report (published 2010).
- Analysis of key published performance statistics.
- Reference to the findings of the HMIE inspection of services to protect children (report published April 2011) and former Care Commission findings.
- Participation in shared risk assessment activity led by Audit Scotland, which included a number of scrutiny bodies. This activity culminated in the publication of an (updated) shared risk assessment, assurance and improvement plan and scrutiny plan for East Lothian Council.

The ISLA focuses on answering nine risk questions:

1. Is there evidence of effective governance including financial management?
2. Is there effective management and support of staff?
3. Is there evidence of positive outcomes for people who use services and carers across the care groups?
4. Is there evidence of good quality assessment and care management?

5. Is there evidence of effective risk assessment and risk management for individual service users, both in terms of risk to self and public protection?
6. Does the social work service undertake effective self-evaluation resulting in improvement planning and delivery?
7. Is there effective partnership working?
8. Do policies, procedures and practices comply with equality and human rights legislation and are there services that seek to remove obstacles in society that exclude people?
9. Are there any areas that require urgent attention and improvement?

2 ISLA findings

Based on the evidence available, five areas for evaluation evidenced no significant concerns – these were (*see section five for a summary of our analysis that led us to the conclusion of no significant concerns*):

- The effective management and support of staff.
- Assessment and care management.
- Risk assessment and risk management practice.
- Self-evaluation and improvement activity.
- Compliance with equality and human rights legislation.

In addition, we considered there were no suspected or actual areas of unsatisfactory/weak performance that required urgent attention and improvement.

In three areas we were uncertain about the level of risk (*see section five for our analysis that led us to the conclusion that we were uncertain about the level of risk*):

- governance and finance
- outcomes for people who use services and carers
- partnership working – particularly the strategic partnership between East Lothian Council and NHS Lothian.

The Care Inspectorate summarised its initial findings in a report that it sent to the local authority in November 2011.

The Care Inspectorate assessed East Lothian Council's delivery of social work services as level one – low risk, good performance and good improvement work.

3 Timing of scrutiny

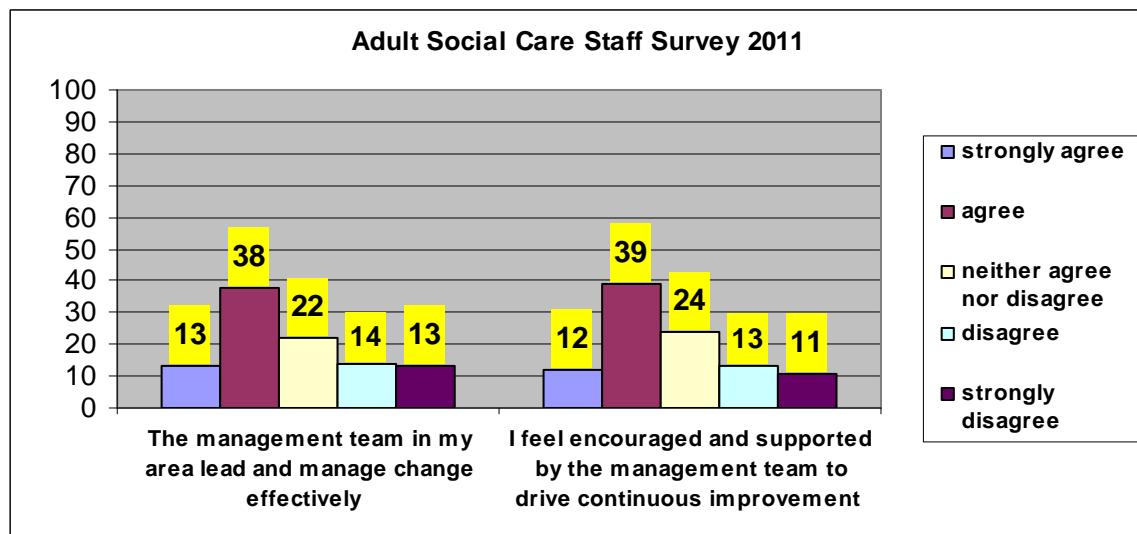
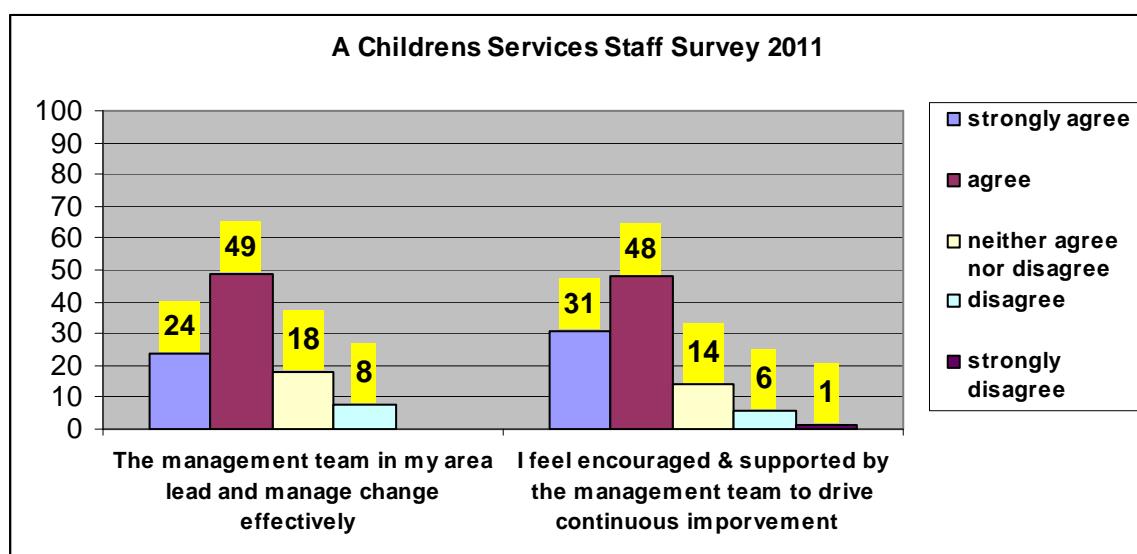
Both the assessed level of risk and the size of the local authority determine the amount of scrutiny the Care Inspectorate carries out in a local authority. The Care Inspectorate assigned a level one risk assessment to East Lothian Council's delivery of social work services and as a result, the Care Inspectorate carried out a proportionate inspection comprising 15 scrutiny sessions in January 2012.

4 Scope of scrutiny

Our scrutiny was targeted and proportionate and did not constitute a full assessment of all social work services. Based on the ISLA we did not scrutinise the following areas.

Effective Management and support of staff

The evidence on effective management and support of staff was generally very positive. Previous scrutiny activity in 2009 and 2010 evaluated social work services highly in respect of management and support of staff. Almost all social work services staff we met when carrying out the scrutiny phase, spoke very positively about how they were led, managed and supported. Staff also felt that, in general, the communication systems within social work services were effective. The two charts below show the positive results of the recent East Lothian Council survey of staff from Children's Services and Adult Social Care.



Our analysis of the documentary evidence submitted by social work services was that performance in the following areas was very good:

- comprehensive provision of staff training
- continuing education for staff
- staff development
- flexible working opportunities for staff - including home working and flexible shift patterns.

We considered there were no significant concerns in respect of management and support of staff.

Effective assessment and care management

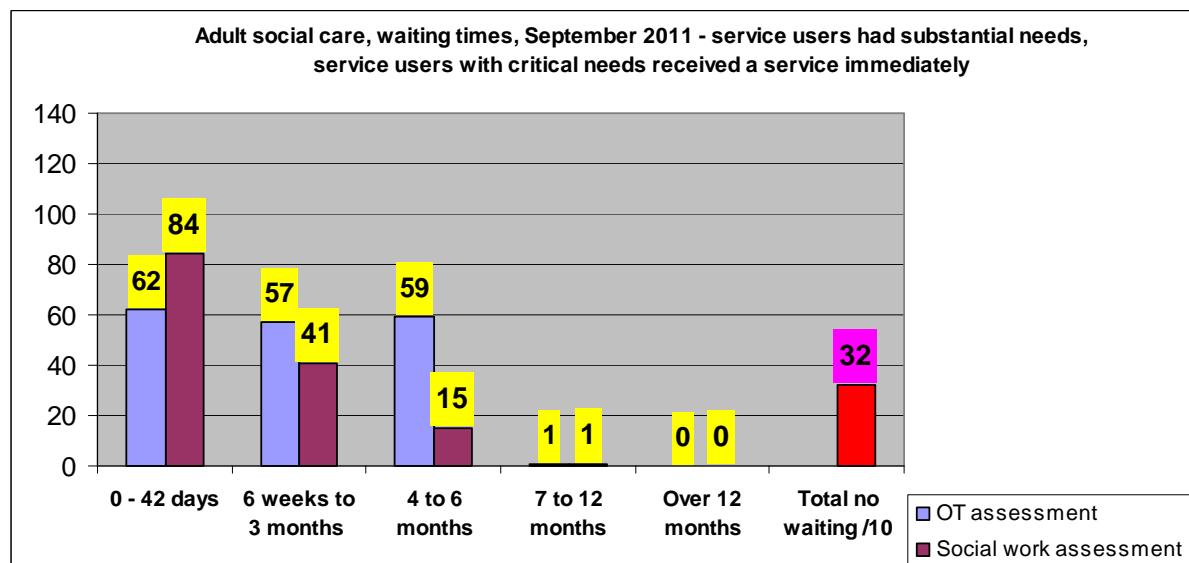
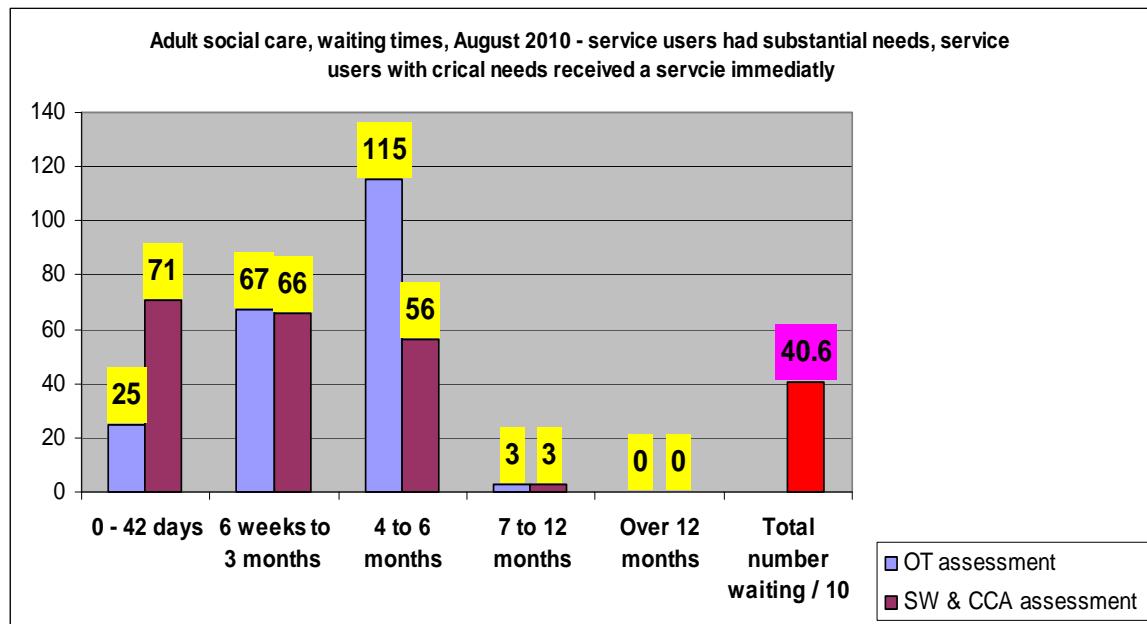
Our file reading results indicated that overall assessment and care management practice was good. The results were good in respect of:

- quality of assessments
- timely assessments and timely service deployment
- care plans that met the assessed needs of the service user.

Evidence from our three focus groups with adults who have physical disabilities, carers and young people (*who are looked after and accommodated*) was broadly consistent with the evidence from our file reading. Some of the carers and service users did express a few negative views about their experience of the assessment and care management process.

Adult Social Care had had a longstanding issue with its capacity to meet the demand from service users and carers for assessments and service deployment to meet their needs. This resulted in significant numbers of people who had to wait for a protracted period for an assessment and or service deployment. From the evidence submitted, Adult Social Care had made considerable improvements to the number of people waiting for an assessment or waiting for service deployment. The charts below summarise the improvement.

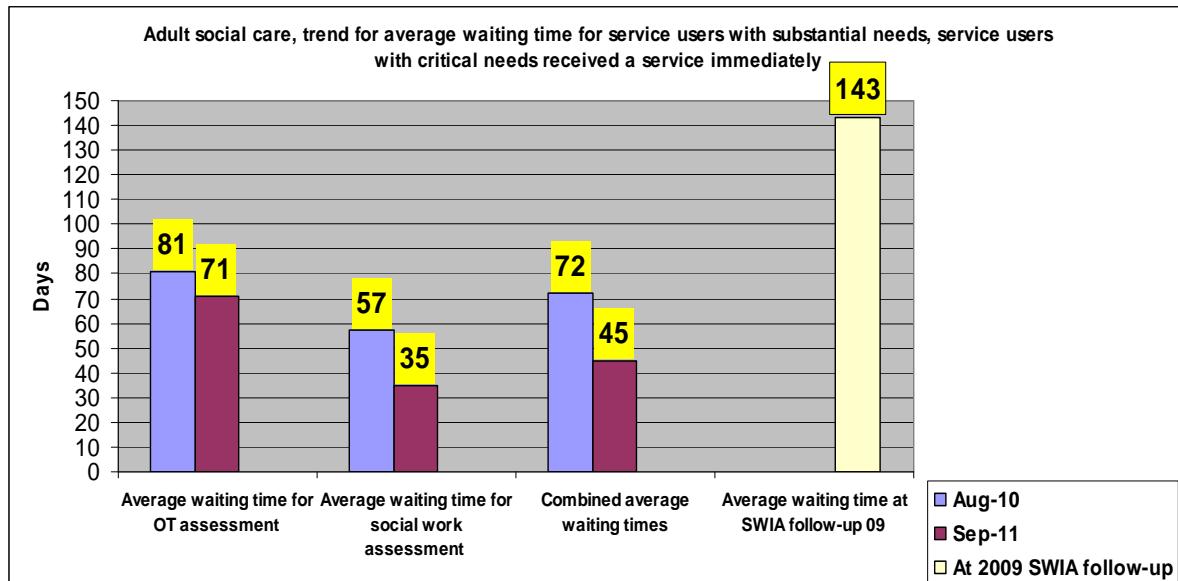
- A reduction (86) from 2010 to 2011 in the total numbers of people waiting for assessment by an occupational therapist or a worker from adult social care.
- A significant reduction from 2010 to 2011 in the numbers of people waiting between 4 to 6 months.
- A reduction in the numbers of people waiting between 6 weeks to 3 months.



Improvement in average waiting times 2009 - 2011

The chart immediately below shows:

- Improvements in the average waiting time for an occupational therapy assessment – 2010 to 2011.
- Improvement in the average waiting time for a social work assessment – 2010 to 2011.
- A significant improvement trend in average waiting time since 2009. **There was a 68% improvement in average waiting times between 2009 and 2011.**



We did not carry out any scrutiny of Adult Social Care waiting lists and waiting times because of the comprehensiveness of the data on waiting lists and waiting times, submitted by Adult Social Care. And the fact that the number of people having to wait for an assessment was falling and the length of time people had to wait was also falling. Adult Social Care requires to sustain the momentum to continue to reduce its waiting lists and waiting times – particularly the waiting list for occupational therapy assessments.

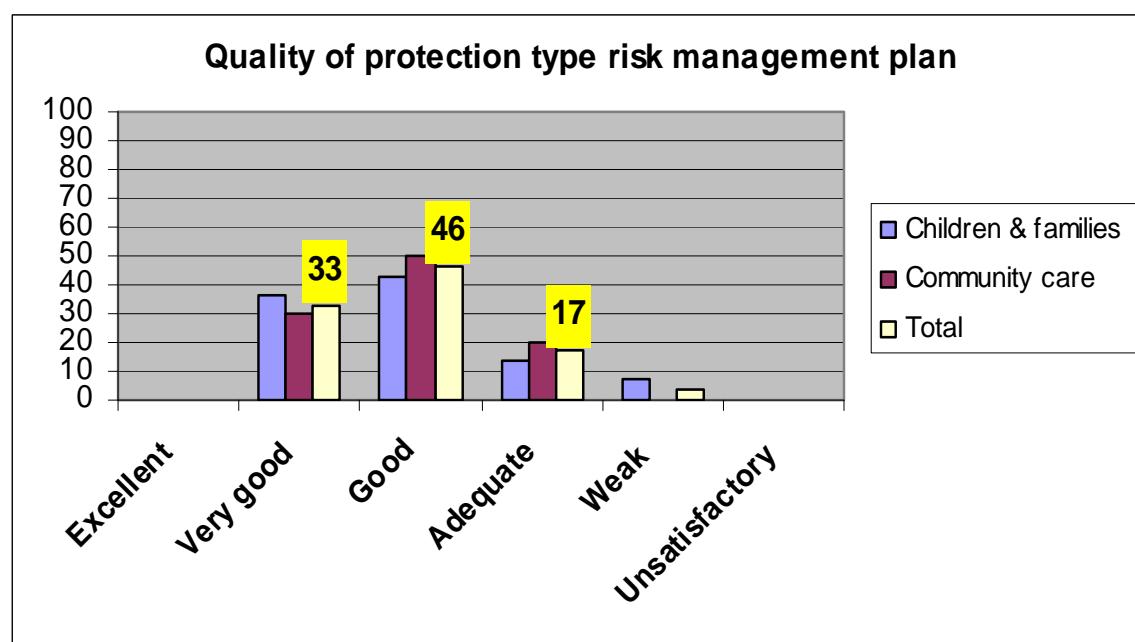
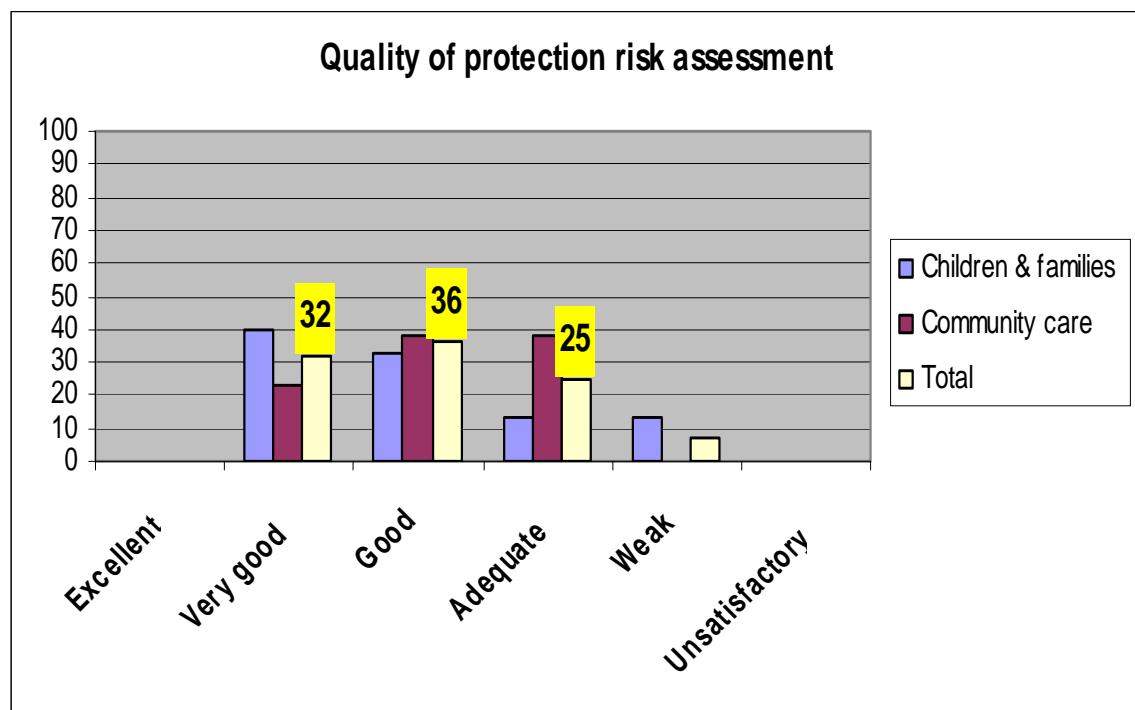
We had no concerns about the complaints data submitted by social work services. We considered there were no significant concerns in respect of assessment and care management.

Effective risk assessment and risk management

The results of our file reading are critical evidence for the evaluation of risk assessment and risk management practice. The file reading results were good for all aspects of risk assessment and risk management (for both protection and non-protection risks):

- risk assessments and risk management plans (protection and non-protection) were carried out for almost all service users, where a risk assessment and risk management plan was appropriate.
- overall, the quality of both protection and non-protection risk assessments and risk management plans was good.

The charts below illustrate our findings on the quality of protection-type risk assessments and protection-type risk management plans – we rated 68% of protection-type risk assessments as very good or good and we rated 79% of protection-type risk management plans as very good or good.



The service users and carers we spoke to (in the ISLA phase) were broadly positive about how the risks for them or the people they cared for were assessed and managed. We considered there were no significant concerns in respect of risk assessment and risk management.

Self-evaluation and improvement activity

Adult Social Care and Children's Services had carried out a number of service-level self-evaluations and self-evaluations, which involved case file audits. There were examples of the results of a self-evaluation used to drive improvement activity – e.g.

the improvements emanating from the self-evaluation of the adoption service. Some of the self-evaluation work was at an early stage, but the signs were that this was an area which would grow and develop. We considered there were no significant concerns in respect of self-evaluation and improvement activity.

Equality and human rights

The policy documentation we read on equality was comprehensive and fit for purpose. We verified that the Council's website contained many published equality impact assessments (EIAs) and a number of those related to social work services. The EIAs we read had been competently carried out. We considered there were no significant concerns in respect of the Council's response to the important equality agenda.

5 Scrutiny findings

Governance and financial management

Reason for scrutiny

We were uncertain about a number of matters pertaining to finance and for that reason we considered that effective governance including financial management was an area of uncertainty.

The areas of uncertainty in respect of finance were:

- financial planning
- budget monitoring
- asset management
- risk management.

We were also uncertain, at the ISLA stage, about what progress the Council had made in developing shared services with the neighbouring Midlothian Council. And we wanted to interview key members of the Council's senior management team and the Leader of the Council to explore this matter further.

Scrutiny findings

Financial Planning

The Head of Finance assumed that service managers considered resource implications when preparing action plans. Expectations about showing links to the financial plans depend on the scale or significance of the actions and their consequences. Where there were significant financial implications, we verified that these were made explicit in appropriate reports.

Officers advised us that the Adult Social Care charging policy, which was agreed in August 2007, required updating and that this had been under discussion.

Budget Monitoring

We established that the Adult Social Care budget meetings were attended by senior management including the Service Manager, finance support, social work services.

We also found that quarterly budget reports were now lodged in the members' library and were available externally on the Council website. Since these reports were no longer formally submitted to Council and the Cabinet, there were no minutes available of members' discussions and decisions.

We have still seen very little documentation about partnership financial matters. The joint equipment store was one of the few jointly provided services and, as it was hosted by Edinburgh City Council, East Lothian Council simply contributed its share of the costs. Pooled budgets were operated for a limited number of small-scale projects.

Officers advised us that the final partnership agreement was now finalised and was operational. They also confirmed that the joint financial framework with the NHS for the Older People's Strategy (includes a commissioning strategy) had not yet been agreed. Senior managers (from the Council and the NHS) assured us that not reaching an agreement on the financial framework (the budget for primary care services appeared to be the contentious area) for the strategy would not delay implementation of the strategy.

Asset Management

We ascertained that the corporate asset strategy 2010 – 14 (dated June 2011) was placed in the members' library in December 2011 but we were still unclear if it has been finalised and formally approved. The asset management data did not yet inform the capital investment plans.

We have not seen any departmental asset registers for social work services.

Risk Management

We obtained updated copies of the Adult Social Care risk register, which we considered was satisfactory, and the Children's Services risk register, which we considered was, "work in progress".

The scrutiny resolved a large proportion of our uncertainty about financial management. The issues which were not resolved were:

- departmental asset registers for social work services
- asset management data did not yet inform capital investment plans.

Shared services

East Lothian Council and its partner Midlothian Council planned to appoint a joint director of education services¹ by the end of February 2012.

¹ We understand this is a temporary appointment until December 2012

We wanted to determine East Lothian Council's level of progress with developing shared services with Midlothian Council and potentially other councils (or other partners). We interviewed the Leader of the Council and he said that the Council wanted to develop shared services with Midlothian Council to realise the following benefits:

- improved outcomes for service users and carers in East Lothian and Midlothian
- more efficient use of resources, linked to economy of scale benefits
- potential efficiency savings.

All of the senior managers we spoke to, stressed that potential efficiency savings was not the primary motivation for sharing services with other councils or other partners – the motivation was better outcomes for service users and carers and more efficient use of resources.

The Chief Executive of East Lothian Council expressed a strong commitment to driving forward the shared services agenda. The Council was considering other partners with whom they could share services. The Chief Executive said that they will evaluate the shared services developments in education services and the outcome of the evaluation will inform how the Council takes forward shared services. The Chief Executive, and other senior managers we spoke to, recognised the anxieties that some members of staff had about shared services. All of the senior managers emphasised the requirement to communicate, consult and involve staff in the planning and implementation of shared services.

We met with a group of senior practitioners and team leaders from Adult Social Care and Children's Services. The team leaders from Children's Services had been involved in discussions about the development of shared children's services with Midlothian Council. All of the Children's Services team leaders considered that Children's Services were further ahead with shared services than Adult Social Care. The Children's Services team leaders all thought that East Lothian Council delivered very good and very well resourced children's services. They were concerned that the development of shared children's services with Midlothian Council might result in a diminution of the quality and quantity of services delivered to children and their families in East Lothian. All of the team leaders expressed understandable concerns about future job security and the protection of their terms and conditions of employment.

The senior practitioners we spoke to from Adult Social Care, all considered that Adult Social Care was not as far forward as Children's Services in respect of shared services developments with Midlothian Council.

A business case was written for a shared Criminal Justice service between East Lothian Council and Midlothian Council. The creation of a shared Criminal Justice service will depend on the outcome of the evaluation of the post of joint head of education support and ongoing negotiations between the two councils.

The scrutiny resolved our uncertainty about progress with East Lothian Council developing shared services with Midlothian Council and possibly other partners. The Leader of East Lothian Council and senior managers all expressed a strong

commitment to the shared services agenda and the potential benefits of improved outcomes for people who use social work services in East Lothian.

Outcomes for people using services and carers

Reason for scrutiny

Social work services performed reasonably well against nationally reported indicators. There were a number of instances where East Lothian performance was around the Scottish mean, but respite provision for older people and for adults was significantly below the Scottish mean for four out of six respite indicators.

We were uncertain about the reasons why looked after children in East Lothian Council were more likely (than the average looked after child in Scotland) to be excluded from school and have poor educational attainment.

We were uncertain about the operation of East Lothian Council and its partner's adult protection procedure, as a report to committee submitted to us, suggested there had been only seven full adult protection case conferences in a period of just under a year (2010).

Looked after children – exclusions from school and educational attainment

The national published figures for exclusions of looked after children from school and educational attainment of looked after children, showed that East Lothian council performed below the Scottish mean in both of these important areas.

- **Exclusions.** In 2009 – 10 there were 631 exclusions per 1000 pupils looked after compared to the Scottish mean of 365.
- **Educational attainment.** The average tariff score for attainment of looked after children in East Lothian in 2009 – 10 was 57 compared to a Scottish mean of 67.

All of the senior managers and other staff we spoke to acknowledged that the Council's performance (shown by the latest published statistics) on exclusions of looked after children and educational attainment of looked after children needed to improve.

Exclusions

Senior managers informed us that they had commissioned an action research project² to find out the reasons why looked after children are excluded from school and to make recommendations for improvement. Senior managers also informed us of an action plan recently approved by the Education Committee – the aim of this plan was to reduce exclusions, improve attendance and increase attainment of looked after children. We considered this was commendable. Senior managers

² The action research on exclusions is being done by the senior research & statistics officer in children's services and educational psychologists, the researchers will report their findings at the end of 2012

informed us of a number of (longer term) initiatives, which aimed to improve the educational experience of looked after children:

- **Ready to learn.** Children's services was working with its partners to help a group of parents, from vulnerable families, to prepare their children for primary school.
- **Tranent primary pilot.** Children's services was working with its partners to support a cohort of "vulnerable" children in order that they could gain the maximum benefit from their education.

We held a discussion about exclusions (and education attainment) with a group of staff from education services (including schools). All of the staff we spoke to were acutely aware there were too many exclusions of looked after children from school – exclusions generally (for all children) were falling, but exclusions of looked after children remained unacceptably high. This group of staff told us what Education Services and Children's Services were doing now to drive down the number of exclusions of looked after children:

- Education services was identifying good practice in respect of the prevention of exclusions of looked after children and promulgating this good practice to all schools in East Lothian.
- For any secondary school, which excludes a looked after child, staff are invited to participate in a joint discussion with the parents of the looked after child (if appropriate) to ascertain what could have been done to prevent the exclusion and prevent further exclusions in the future.
- They were considering changes that could be made to improve the experience of looked after children – who had been excluded – when they returned to school. One such change was the looked after child and the school entering into a written agreement about the child's future behaviour at school and what the school do to support the child.
- They had set up a multi-disciplinary exclusion scrutiny group and the overall aim of this group was to improve the educational experience of looked after children and drive down the number of exclusions of looked after children.

Focus group with young people who were looked after at home

We held a focus group of young people who were looked after at home. Overall, the young people gave us very encouraging feedback on exclusion and exclusion prevention. They were all aware of exclusion and expulsions, though did not talk about their own experience. They were all positive about the support they received in school and they said staff knew they were looked after and did make allowances for this. There were people they could turn to at school if they had a problem. Their teachers and social workers communicated with each other and that meant their teachers knew what was happening at home. They all talked of being able to take 'time out' when things were getting difficult.

The team leaders from Children's Services we spoke with, were confident that by working in partnership with colleagues from Education Services, exclusions of looked after children could be driven down. Some of the team leaders said that some schools were more likely to exclude looked after children than others and they considered that the criteria for excluding a looked after child differed from school to school. Some of the team leaders said that some school staff did not appear to appreciate that just getting some looked after children to attend school was a considerable achievement.

From all of the scrutiny that we carried out in respect of the exclusions of looked after children, we considered that Children's Services and education staff were working hard to address the range of issues pertaining to the exclusions of looked after children and to drive down the number of exclusions of looked after children. The Care Inspectorate link inspector and Education Scotland's district inspector will work collaboratively to monitor progress driving down the number of exclusions of looked after children.

Recommendation 1

East Lothian Council should drive down the number of exclusions of looked after children. Senior managers in Education Services and in Children's Services should regularly monitor progress, reducing exclusions of looked after children and should take timely remedial action if progress is not satisfactory.

Educational attainment of looked after children

East Lothian Council, in general, delivers very good educational attainment for all of its children and young people. The relatively poor average tariff (published by the Scottish Government) figure for looked after children relates to a small number of young people, whose educational attainment was included in the data set ($n = 10$). The next cohort of young people who are included in the data set may well achieve an average educational attainment tariff, which is above or well above the Scottish mean – large “data swings” are not uncommon when dealing with relatively small samples.

The young people we spoke to, who were looked after at home, all said that they received help and support with their school studies from their teachers.

All of the staff we spoke to – at all levels – in Children's Services and Education Services said that they were working to improve the educational attainment of looked after children in East Lothian.

The Care Inspectorate's link inspector and Education Scotland's district inspector will work collaboratively to monitor progress improving the educational attainment of looked after children.

Recommendation 2

East Lothian Council should strive to improve the educational attainment of looked after children. In the event of progress that is not satisfactory, senior managers in Education Services and in Children's Services should take timely remedial action.

Respite for older people and for adults

Senior managers we spoke to were aware East Lothian's nationally reported figures on respite were poor compared to other councils. They agreed there was only one nursing home respite bed, though they were in the process of procuring another. They also had respite beds in their own care homes. They suggested people also purchased respite with their direct payments and this would not appear in the published figures. They were looking closely at respite and had employed someone from Carers of East Lothian to develop a respite strategy. The proposal was that they develop a respite bureau. Some of the change fund monies had been designated for respite.

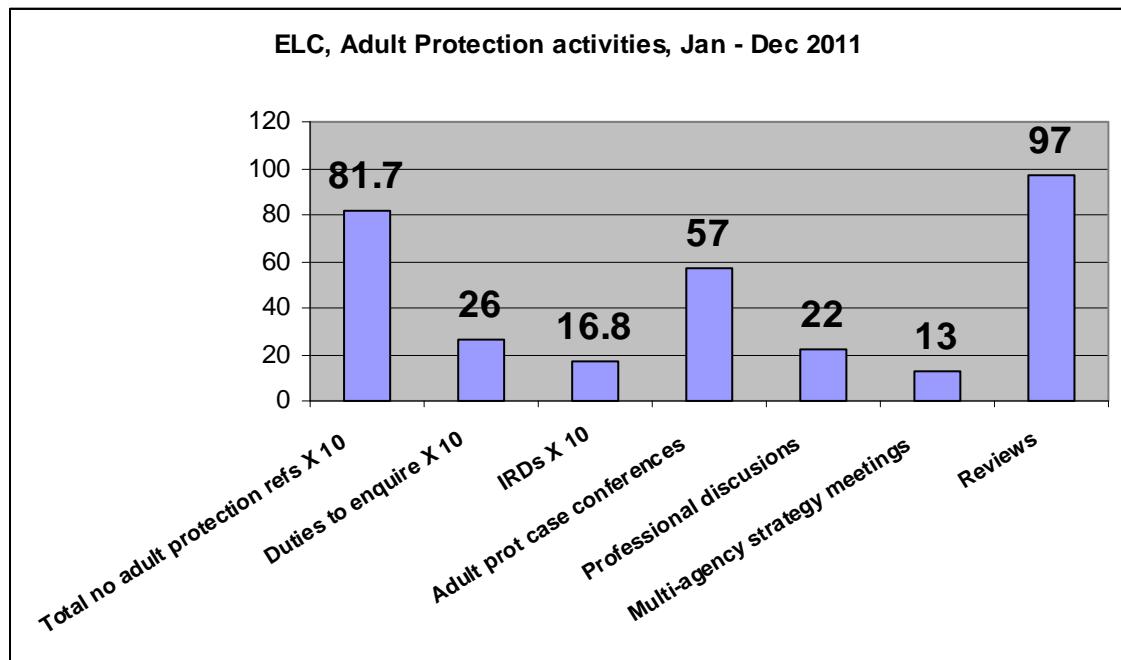
Front-line staff from Adult Social Care we spoke to said it could be difficult to secure respite for adults with learning disabilities, in particular. The Adult Social Care staff we spoke to considered that, overall, adults with learning disabilities and other adults were well provided for in respect of the level of service they received and that good outcomes were delivered as a result.

Recommendation 3

Adult Social Care should implement its plans to increase the amount of respite provision for older people – this includes overnight respite and daytime respite. Adult Social Care should increase the amount of daytime respite for adults.

Adult protection

We interviewed East Lothian Council staff responsible for adult protection. They stated very clearly that the original figure submitted of seven adult protection case conferences convened from April to December 2010 was incorrect and the correct figure was forty-nine adult protection case conferences convened.



The chart³ above shows the level of adult protection activity carried out by East Lothian Council and its partners in 2011. Overall, the figures show that the Council and its partners had relatively high activity levels in respect of their implementation and application of the Adult Support and Protection (S) Act 2007. In the ISLA phase, we considered that the information submitted on the number of adult protection case conferences, suggested this was an area of uncertainty. The updated information shown in both charts above leads us to consider that the number of adult protection case conferences convened is no longer an area of uncertainty.

We met with a group of front line staff from Adult Social Care who told us that the operational arrangements for dealing with adult protection referrals had significantly improved, following recent changes to the system. There was now always a manager available for consultation and support for staff dealing with adult protection referrals. Front-line staff said that this change had made a big difference – they said that previously there had been some confusion in relation to which manager they should go to for advice and support when dealing with adult protection referrals. The front-line staff considered that the Council and its partners' adult protection system worked well and that full adult protection case conferences were always convened, when appropriate.

We met with a group of service users who had been subject to the adult protection procedures. All of them had come through some very challenging experiences. And Adult Social Care staff and staff from their partner agencies had worked well to protect and support the service users, thereby keeping them safe and improving their quality of life. From the service users' accounts, we were very impressed with the work Adult Social Care staff carried out to help the service users deal with some very difficult issues and emerge stronger as a result.

Partnership working

³ The bars for referrals, duties to enquire and IRDs show a figure divided by 10.

Reason for scrutiny

It is difficult to determine the quality of strategic partnership working from documentary evidence. The evidence from our file reading was that partnership working – particularly operational joint working by social work services and the NHS – was good and contributed to delivering good outcomes for service users. The local area network (LAN) was notified about issues pertaining to the strategic partnership between the Council and NHS Lothian. For example, there was a longstanding dispute about resource transfer – the Council considered that it should have received money, which was saved as a result of closure of NHS hospital beds and the Council did not receive this money. Strategic partnership working between the Council and NHS Lothian was therefore an area of uncertainty.

Scrutiny findings

All of the senior staff we spoke to from the Council and NHS Lothian expressed the strong, consistent view that the quality of strategic partnership working between East Lothian Council and NHS Lothian was much improved and the difficulties, which had caused tensions in the past, had been resolved. None of the staff we spoke to, either from the Council or NHS Lothian, dissented from the foregoing view. Senior managers gave us the following reasons for the improvement in Council, NHS strategic partnership working:

- Changes in the senior management teams of the Council and NHS Lothian.
- Resolution of contentious issues such as resource transfer payments.
- Commitment to shared objectives by the Council and NHS Lothian, a shared understanding of the issues and a shared commitment to drive improvements to benefit the population of East Lothian.

Senior managers from the Council and from NHS Lothian cited the following as evidence of improved partnership working, at a strategic level, between East Lothian Council and NHS Lothian:

- A sustained significant improvement in the delayed discharge figures – this had been an area of contention in the past. Senior NHS managers did not think that the Council considered that delayed discharge was sufficiently important, but they did now and this was reflected in the improved figures.
- They were now looking at how they could reduce the number of discharges that were delayed for four weeks and two weeks⁴.
- The Older People Strategy was now agreed – this includes detailed joint commissioning plans and plans for the closure of some of the smaller hospitals in East Lothian.
- The Change Fund submission to the Scottish Government and the subsequent partnership working to utilise the Change Fund monies to deliver improved outcomes for older people in East Lothian.

⁴ At the time of writing, the key national target is to have no delayed discharges over six weeks. We understand the revised target will be no delayed discharges over four weeks.

- They were taking an incremental approach to implementation of the Older People Strategy and senior managers from the Council and NHS Lothian concurred that was the right approach.
- They had not been able to agree the financial framework for the Older People Strategy but they were proceeding with implementation nonetheless. In the past, the Council wanted the NHS acute services spend to be included in negotiations and this was a serious roadblock to progress.
- The success of the Emergency Care Service – we considered this service to demonstrate good practice – which helped people who had suffered an acute injury (e.g. a fracture) to remobilise, resume all of their normal activities and return to work in many instances.
- The historical tension around resource transfer had been resolved and this was confirmed during our interview with the Chief Executive of East Lothian Council.
- The ongoing development of integrated service for children – for example developments in jointly delivered early years services and support to vulnerable children and families.

Our scrutiny resolved our uncertainty about partnership working at a strategic level between East Lothian Council and NHS Lothian. All of the evidence we received from various scrutiny sessions consistently confirmed that the problems which beset the strategic Council / NHS partnership in the past had been resolved and East Lothian Council and NHS Lothian were working well together at a strategic level.

6 Summary of recommendations

Recommendation 1. East Lothian Council should drive down the number of exclusions of looked after children from school. Senior managers in Education Services and in Children's Services should regularly monitor progress, reducing exclusions of looked after children and should take timely remedial action if progress is not satisfactory.

Recommendation 2. East Lothian Council should strive to improve the educational attainment of looked after children. In the event that progress is not satisfactory, senior managers in Education Services and in Children's Services will take timely remedial action.

Recommendation 3

Adult Social Care should implement its plans to increase the amount of respite provision for older people – this includes overnight respite and daytime respite. Adult Social Care should increase the amount of daytime respite for adults, if this is feasible within the available budget.

7 Next steps

We request the Council considers the contents of this report and provides a short action plan to address the recommendations. The link senior inspector will liaise with the Council on the action plan and maintain regular contact to monitor progress implementing the action plan. The link senior inspector will also continue to offer support for self-evaluation activity.

Information from the scrutiny report will feed into the annual review of the local authority's assurance and improvement plan as part of the shared risk assessment process.

*Ian Kerr,
Senior Inspector,
24 February, 2012*

Annex 1

Number and type of scrutiny sessions	
Scrutiny Activity	Number of sessions
Focus groups with people who use services *	2
Meetings with front line staff, first line managers & middle managers	5
Meetings with senior social work managers	2
Meetings with senior managers from NHS Lothian	2
Meetings with finance managers	2
Meetings with Chief Executive of East Lothian Council	1
Meeting with Elected Members	1
Total number of scrutiny sessions	15

Annex 2

Good practice examples

The Futures Fair

We considered the Futures Fair was an example of good practice, which informed young people with disabilities and their families about the many options available to the young people as they moved into adult life. The Futures Fair was an annual information event run in partnership between Capability Scotland and East Lothian Council children's services and adult social care. Its aim was to help young people with disabilities and their families to access information to plan for life after school. It was established following a consultation with families who had been through the transition process. Families said they did not have enough information, early enough, about what options were available for their sons and daughters when they left school.

There had been three Futures Fairs and it was established as an annual event. Evaluation questionnaires after each one had led to improvements. For example, parents who had already been through the transition process were available at the second fair to talk through their experience and offer advice and help to others. And young people who had been through transition ran a 'Been there, done that' stall in 2010. A graffiti wall also captured a range of comments. The fair brought together around 60 organisations including:

- employment and training
- day opportunities
- advocacy and mediation
- health and social care
- person centred planning
- housing
- money
- leisure
- further education.

Participating organisations also completed evaluation forms after the event.

The event was publicly advertised and young people known to services were personally invited. Staff from children's and adult's services were encouraged to come along both to meet the families and to gain information themselves.

The emphasis of the Futures Fair was on empowering young people and families and building their capacity. Armed with the right information, at the right time, the participating young people and families were better prepared to make the right choices about their future.

The Response and Reablement Teams

The East Lothian Council occupational therapy service had recently been reorganised as part of a wider service review for adult social care. The frontline Response and Reablement Teams ensured a faster response to those people most in need and ensured people were supported to remain in the community and prevented from admission to hospital or residential care.

The Response and Reablement Teams delivered a timely and outcome focused service to people with an acute health problem, such as fractures, falls and other acute injuries or illnesses.

The Response Team had the following staffing complement:

- two occupational therapists,
- one physiotherapist
- two community care workers
- two social workers.

This Response Team responded to urgent referrals from people living at home who required assessment because of a sudden deterioration in function or breakdown in care arrangements.

The Reablement Team had the following staffing complement:

- three occupational therapists
- three community care workers
- a team of home support staff.

The occupational therapists in the Reablement Team assessed service users requiring a care package at home: they promoted independence by timely assessment of needs and implementing a goal orientated programme. The Reablement Team also helped people who were discharged from hospital, who required a care package. The Reablement Team had home support staff who were deployed for a maximum of six weeks. The outcomes delivered by this service were that a number service users had:

- improved functional mobility
- improved confidence
- a return to their former level of function
- a reduced risk of falls.

We met service users who had benefited greatly from the reablement service. They were extremely complimentary about:

- The timely deployment of the reablement service after they, the service users, were discharged from hospital.
- The care and professionalism of the staff from the reablement team.
- The excellent outcomes for them as service users – improved mobility and return to full function.

Overall, we considered that the East Lothian Council Response and Reablement teams was an example of good practice.