

NORTH YORKSHIRE COUNTY COUNCIL**Care & Independence Overview & Scrutiny Committee****31st May 2012****Progress report on the implementation of 'Fulfilling and rewarding lives': The strategy for adults with autism in England (2010)****1. Purpose of the report**

1.1 To advise on the requirements of 'Fulfilling & Rewarding Lives' The strategy for adults with autism in England, published in March 2010 and related statutory guidance.

1.2 To report on progress made in the implementation of the national strategy

1.3 To report on plans to develop a North Yorkshire Strategy for adults with autism.

2. Background

2.1 In 2010, the Government launched the National Autism Strategy for adults 'Fulfilling & Rewarding Lives' which set out a 3 year vision. The document requires Adult Social Care Departments and Primary Care Trusts (PCTs) to review the level of provision and consider possible future developments.

2.2 The strategy focuses on five key areas:

- increasing awareness and understanding of autism;
- developing a clear and consistent pathway for diagnosis;
- improving access to the services and support people need to live independently within the community;
- employment;
- enabling local partners to develop relevant services to meet identified needs and priorities

2.3 The strategy focuses on delivering tangible changes regarding:

- public attitudes and awareness;
- awareness of autism for health and social care staff delivering support;
- and how people with autism are supported.

There were no additional financial resources attached to the delivery of the strategy. The emphasis has been on making reasonable adjustments for adults with autism and the application of existing policy and legal requirements that relate to adults with autism, such as the Equality Act and Valuing People Now.

2.4 The publication of the strategy has led to an increased profile and publicity around autism. Campaigning by national interest organisations, such as the National Autistic Society, coupled with the public awareness raising (led by the national strategy and associated marketing) continues to be high. This has led to pressure across the country with a keen interest being taken in how Local Authorities are responding to the strategy and developing their local arrangements.

2.5 All local authorities were required to complete a self assessment indicating progress made in implementing the strategy in February 2012.

3. Prevalence

3.1 Prevalence rates for autism in adults in North Yorkshire are not predicted to increase significantly between 2012 and 2030 (PANSI) but this is challenged by data produced by CYPS which indicates an overall increase of 15-30% by 2015 in statements for pupils with autism. The number of statements for children classified in a “high need” autism spectrum has been increasing year on year – from 78 in April 2009, to 142 in April 2011. The Harrogate area accounts for approximately one third of all cases in North Yorkshire.

4. Statutory requirements

4.1 The statutory requirements in the strategy can be broken down into four main areas – these are:

- A. Training of staff that provide services to adults with autism.
- B. Identification and diagnosis of autism in adults, leading to an assessment of needs for relevant services.
- C. Planning in relation to the provision of services to people as they move from being children to adults.
- D. Local planning and leadership in relation to the provision of services for adults with autism.

4.2 The responsibility for implementation of the requirements falls to PCTs and Adult Social Services, although many requirements within C relate to transitions and heavily involve colleagues in CYPS. An analysis of the statutory requirements is set out in Appendix 1.

5. Progress to date

5.1 HAS completed the national self assessment and the national results were published on the Learning Disability Public Health Observatory in March 2012. An early analysis of the responses suggests that the implementation of the national strategy has been patchy across the country and North Yorkshire scores are similar to most other local authorities. Awareness training is our main area of strength.

5.2 HAS recognised the need to make some early progress in implementing the national strategy and has agreed to commission a North Yorkshire Strategy for adults with autism. The strategy will complement the draft Children and Young

People Autism strategy, currently out for consultation. The post of Autism Strategy Development Manager has been created and recruitment is expected to be completed by the end of June 2012. The post-holder will work in close partnership with CYPS and NHS staff.

5.3 A further post of Autism Strategy Development and Implementation Worker has been created. The post-holder has started in March 2012 with the specific role of supporting assessment staff and providing advice on specialist services when those are required.

5.4 Through a successful bid to the Innovation Fund the National Autistic Society has been commissioned to set up three social groups for adults with autism based in Thirsk, Harrogate and Scarborough.

5.5 An approved e-learning training package to improve autism awareness has been made available to staff at all levels in the Directorate. At the end of April 2012 approximately 1200 members of staff within HAS have completed the training.

5.6 A refreshed Joint Strategic Needs Assessment (JSNA) is due to be published jointly by NYCC and North Yorkshire and York PCT setting out a comprehensive assessment of needs in the county. For the first time the document will include a chapter on adults and young people with autism.

5.7 A Transition and Autism Board comprising of officers from HAS, CYPS and North Yorkshire and York PCT has been recently set up to co-ordinate the work in the two areas.

6. Recommendations

6.1 The Committee is asked to note the content of this report and to receive a further report setting out the process for developing the North Yorkshire Strategy for adults with autism, including the involvement of this committee.

Helen Taylor
Executive Director
Health and Adult Social Care
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Author of the report
Larry Hollando
Performance & Change Manager
X 5510

APPENDIX 1

OUTLINE OF STATUTORY RESPONSIBILITIES UNDER REWARDING AND FULFILLING LIVES

Statutory Requirements to be met	Responsible agency (lead)	Progress to date	Further action required:
A. Training of staff who provide services to adults with autism			
<p>Autism awareness training should be available to all staff working in health and social care.</p> <p>Specialist training should be provided for those in key roles that have a direct impact on access to services for adults with autism – such as community care assessors.</p> <p>When planning and commissioning training, adults with autism, their families and carers and autism representative groups should be involved where possible.</p>	<p><i>HAS & Health</i></p> <p><i>HAS & Health</i></p>	<p>AMBER</p> <p>E-learning is being delivered to all social care staff (Autism awareness).</p> <p>E-learning does not facilitate this.</p>	<p>Specialist training to be scoped and delivered (funding identified).</p> <p>Consider including this as an element of the more specialised training which will follow.</p>
B. Identification and diagnosis of autism in adults, leading to assessment of needs for relevant services			
<p>Each area should put in place a clear pathway for diagnosis of autism, from initial referral through to assessment of needs.</p> <p>Social care teams are required to understand the local pathway to diagnosis and to be able to signpost adults to it.</p> <p>Prompt sharing of information between diagnostic services and adult services so that Social Services can contact individuals who have been diagnosed with autism to offer community care needs assessments and carers' assessments.</p>	<p><i>HAS & Health</i></p>	<p>AMBER</p> <p>Progress in this area is very limited as it requires joint work across HAS and Health. To date, this has not developed beyond a named lead and some associated work around connected project streams e.g. related to complex needs.</p> <p>The PCT have recently reviewed the pathway for young people and have a pathway for adults but this is not widely known</p>	<p>Develop proactive working relationship with NHS to develop shared protocols and deliver the statutory requirements.</p>
<p>Each local authority should appoint a lead professional to develop diagnostic and assessment services via the LSP.</p> <p>The focus of the 1990 Community Care Act is care services, but there may be a need for autism-specific health services following diagnosis and these should not be overlooked.</p> <p>Staff undertaking assessments should as far as possible be carried out by a professional who has a good knowledge of autism and reasonable adjustments should be made to the</p>	<p><i>HAS & Health</i></p>	<p>RED</p> <p>No lead professional</p> <p>HAS staff do not currently have specific information about autism-specific health services or how to refer or signpost individuals</p>	<p>Develop proactive working relationship with NHS to develop shared protocols and deliver the statutory requirements.</p> <p>Review assessment arrangements.</p>

Statutory Requirements to be met	Responsible agency (lead)	Progress to date	Further action required:
assessment process to enable the adult to take part fully.		Potentially in conflict to the more generic approach adopted by Operations restructuring.	
Requirements around assessment, reassessment and signposting – together with identifying unmet needs and providing information about autism and sources of support.	HAS & Health	AMBER Some mapping has been done between CYPS & HAS – this work needs to be completed and published.	Assessment practice and requirements need to be widely disseminated to assessment staff and CSC. Joint Health/HAS information about autism support and signposting needs to be developed and promoted in HAS and to the public.
C. Planning in relation to the provision of services to people as they move from being children to adults			
Ensure HAS follows its statutory duties and meets at least minimum standards in transition planning. Transition plans should be individual and reviewed and updated each year.	HAS & CYPS	AMBER 4 new posts were created to support earlier transition planning with young people.	Joint work continues across HAS & CYPS.
Arrange assessments of need and provision to meet the needs for all young people with SEN going on to education/training. Section 139A assessments should be arranged for other young people with SEN.	CYPS	AMBER In place but requires review and improvement.	CYPS draft Autism Strategy confirms that transition planning will be used for all young people with autism.
Transition planning should include career preparation to age 16 and plans for education, employment, training, transport. Housing and leisure from 16-19 and beyond.	HAS & CYPS	AMBER A draft “Good Practice Transition Pathway” was drafted in Summer 2011 and put to CYPS & HAS. Good practice in Individualised Learning Pilot	SEND Post 16 meeting to address.
Connexions/LA is responsible for the delivery of the transition plan. Connexions advisors can support young people providing consistency across 13- 25 years of age.	HAS & CYPS	AMBER This is in place although more usually to the age of 19 years.	This needs to be clarified and strengthened.
Professionals (inc. SENCO & CAMHS) should inform parents & young people approaching transition of their right to community care and carer assessments – and these professionals should also inform Social Services of young people, so this right can be met.	HAS & CYPS & Health	GREEN This is happening via SENCO's – there may be a need to improve this in CAMHS. Earlier intervention by HAS has improved this.	This needs to be clarified and strengthened.

Statutory Requirements to be met	Responsible agency (lead)	Progress to date	Further action required:
<p>Information must be shared between children and adult services about individuals and about needs and numbers locally to support L/T planning - Adults and Children's services need to work together with schools, families and young people to identify support needs and enable positive outcomes. Young people and families should always be involved in transition planning.</p>	HAS & CYPS	<p>GREEN Local joint meeting set up to improve sharing of information and this continues to develop.</p>	This work will continue and positive outcomes need to extend beyond purely education and training.
D. Local planning and leadership in relation to the provision of services for adults with autism			
<p>DASS to appoint joint commissioner/ senior manager with a clear commissioning responsibility for adults with autism who should participate in local and regional strategic planning groups and partnership boards. A local board to bring together different organisations, services and stakeholders locally may support setting a clear direction for improved services. All LA's and health bodies and the organisations they have contracted to provide services are expected to take into account the views of adults with autism and their carers in developing and commissioning services.</p>	HAS	<p>RED Operational AD & Performance Change Manager nominally identified.</p>	Review current arrangements/portfolio. To date we have had limited involvement in autism strategic planning groups – this needs to be developed.
Develop a commissioning plan around services for adults with autism that reflects the JSNA and all other relevant data around prevalence. Commissioning plans need to identify how adults with autism will access personal budgets/ personalisation.	HAS & Health	<p>RED The JSNA will include autism this year.</p>	We need to develop data collection and prevalence information.
LA's need to consider the practical challenges around granting more choice to adults with autism and the principles of the Mental Capacity Act 2005.	HAS	<p>AMBER No evidence that this is problematic but this has been acknowledged and is being actively considered.</p>	HAS may need to develop enhanced guidance to support staff working with people who have autism.
The needs of carers of people with autism also have to be considered by health bodies and local authorities.	HAS & Health	<p>AMBER The HAS Carer's Forum is available to represent the views of all carers no specific forum has been set up.</p>	To be considered in current joint review of Carers Strategy.
All LA's and health bodies providing mental health and learning disability services are recommended to review DH guidance about adjustments to service delivery to include adults with autism.	HAS & Health	<p>RED HAS needs to consider this guidance.</p>	Mental Health and Learning Disability leads to review and consider the DH guidance.
Consider national best practice and the role of specialist autism teams. This is not a requirement.	HAS & Health	<p>RED Not yet considered</p>	Explore further with other partners.