

Meeting:	Cabinet
Meeting date:	Thursday 18 October 2018
Title of report:	Herefordshire Autism Strategy
Report by:	Cabinet member health and wellbeing

Classification

Open

Decision type

Non-key

Wards affected

(All Wards);

Purpose and summary

To approve the Herefordshire Autism Strategy 2019 - 2022

The autism strategy will:

- a. Set out the actions required to achieve improved life outcomes for people with autism by better access to services. Through strategic improvement the council and the Clinical Commissioning group (CCG) will make and or influence reasonable adjustments and workforce awareness, this will in turn lead to wider participation in the community and more fulfilling lives.
- b. Set out the outcomes required, resources and ownership against each priority. This will be supported by an action plan (appendix 1) which sets out the annual activity and the identified outcomes for children and adults with autism with the appropriate and available resources for groups of all ages.
- c. Act as a medium term framework for future delivery and alignment of universal services to ensure the needs of people with autism are appropriately met.
- d. Ensure that all commissioned activity across the council's directorates and the CCG is aligned to the health and wellbeing blueprint for adult social care and with the NHS long term commitment to ensure reasonable adjustments are made in both primary and acute health settings and services.

Recommendation(s)

That:

- (a) the Herefordshire Autism Strategy 2019 – 2022 be approved; and**
- (b) the executive's response to the recommendations of the children and young people scrutiny committee at appendix 4 be approved.**

Alternative options

- 1 The Herefordshire Autism Strategy is not approved. This is not recommended as there is a statutory duty on each council as outlined in the Autism Act 2009 and the national Adult Autism Strategy 2010, 'Fulfilling and Rewarding Lives' which places a legal duty on all local authorities to develop and implement a local autism plan in partnership with health.
- 2 That the council develops a separate Autism Strategy to the CCG that does not consider the primary health care needs of people with autism. This is not recommended because it would negatively impact on the opportunities to jointly plan and deliver better outcomes to people with autism, nor does it meet the legal duty.
- 3 The council does not consider the needs of children and young people and creates an adult only strategy, as the duty applies to adults only. This is not recommended as this limits the impact for people with autism and would miss opportunities to ensure that services are prioritised and coordinated from child to adulthood. This enables the issues identified by people in adulthood are addressed earlier in the future and the learning from this applied to children's services, resulting in better life outcomes.

Key considerations

- 4 The council, in partnership with the CCG and the Herefordshire Partnership Board, a multi-agency group who come together to influence strategic planning, have co-produced a comprehensive outcome focussed Autism Strategy. Agreement of the strategy will be through Cabinet; if agreed, commissioners will begin immediately in accordance with the implementation plan aligned to the strategy. The CCG will also consider adoption through its governing body.
- 5 The first autism strategy for Herefordshire was developed in 2014, and there is a need to build on this strategy and apply the learning which acted as a test bed for many of the themes in the new strategy, but now requires a more sophisticated and wider approach with stronger performance reporting. This will allow for further development across the system for people of all ages with autism. The strategy is required to ensure activity is targeted against the outcomes set out in the health and wellbeing blueprint and make it clear who is responsible for the delivery of key aspects of the strategy. The aim is to enable people with autism to have greater choice over how and by whom they are supported, how they are educated, where and with whom they live, access to paid work and training, have a social role, improved long-term health and have ordinary expectations about relationships, families and being part of a community.
- 6 As such, the strategy sets out a clear framework for improvements in relation to data, workforce training, awareness, reasonable adjustments, opportunities and improved health and quality of life outcomes for people with autism. The strategy aims to ensure that consideration is given across the system to the way people with autism encounter day to day services including education, college, GP practices, support services, the police and

the criminal justice system and build better support and awareness within the system to enable access to universal opportunities such as housing, employment, public transport.

- 7 Improvements are needed in relation to performance metrics across services, which will enable us to ensure that people with autism have access to the same opportunities as everyone else. National data is telling us that it is estimated that 1.1% of the national adult population have autism (the 2007 adult psychiatric morbidity survey) and the incidence of autism in children was estimated at 1% (Baron-Cohen et al 2018). For Herefordshire, this would mean that approximately 2,000 people would fall within the autism spectrum. However GP coding is demonstrating that currently only 0.4% of the adult population has autism, which is indicating that there is much room for improvement in how we collectively record instances of autism. The improvement plan considers baseline data and data collection throughout each of the priorities and will use this as a tool to measure improvements across the system.
- 8 Good practice, as defined by national National Institute for Health and Care Excellence (NICE) guidelines requires that local areas define the process of diagnosing autism by means of a multi-professional diagnostic pathway. For children up to the age of 10 (national curriculum year 5), a multi-disciplinary assessment is co-ordinated through the child development centre in Hereford. For children over the age of 10 (national curriculum year 6), the multi-disciplinary assessment is co-ordinated by the child and adolescent mental health service (CAMHS) in Hereford. The adult diagnostic pathway is co-ordinated through a regional centre in Bristol. The descriptions of these pathways have been drafted but now require multi-agency agreement.
- 9 The council and the CCG currently individually commission a number of different services for children and young people with autism as well as adults with learning disabilities and autism. These include specialist schools and resource bases attached to a school, outreach to mainstream schools, speech and language and occupational therapy, independent travel training and other specialised help. Services commissioned by adults include residential care homes, supported living, day opportunities as well as out-of-area special beds; nursing care and domiciliary care.
- 10 These services are commissioned from specialist providers across the education sector, the NHS and from the voluntary, independent and not-for-profit sectors as well as directly provided by the council. Services for adults primarily focus on those adults with a learning disability who may also have autism. Herefordshire has not historically commissioned specialist services for adults with autism. Services have focussed on those who have the greatest difficulty in living independently. Although people with autism may have significant impairments that require support in certain aspects of living, most do not require the same level or type of support as those with significant a learning disability.
- 11 The council has a duty to provide 'sufficient and suitable' educational provision to meet the needs of the population and to keep this under review. This includes provision to meet the needs of children and young people with autism.
- 12 The DH in April 2018 delivered the Think Autism refresh, which is an updated autism strategy, which is focussed on adults only, and sets out the national priority areas as:
 - Measuring, understanding and reporting the needs of people with autism
 - Workforce development
 - Health, care and wellbeing
 - Specific support
 - Participation in the local community
- 13 The proposed Herefordshire Autism Strategy has set out 5 local priorities:

- Priority 1 - Health and Wellbeing.
Key areas for development under the strategy include timely access to adult autism diagnosis, timely and appropriate mental health support and widespread use of tailored communication methods and recognition of sensory, communication and environmental needs as well as preventative support in line with Care Act 2014.
- Priority 2 – Education
The following aspirations will be achieved through the delivery plan to ensure improved awareness of autism amongst all education professionals, that Autism is considered within all Health, CCG and Council plans for children and young people and that young people aged 14 – 25, with a diagnosis of autism, and parent/ carers, have easier access to appropriate information, advice and support.
- Priority 3 - Training, Further Education, Employment and Housing
The aspirations of the strategy will be achieved through the delivery of improved awareness of autism amongst all professionals and partner organisations providing services to people. In addition, we need to ensure greater involvement of the autistic community in the planning and execution of decisions that directly affect them. A set of best practice standards will be shared with partner organisations to promote better ways of working which will benefit people with autism (as well as other vulnerable groups). Autism will be considered within the plans and strategies of partner organisations. Reasonable adjustments need to be standard practice to ensure housing, transport and employment are accessible to people with autism.
- Priority 4 - Keeping safe
The strategy will set out the vision to improve awareness within the autism community of community safety, both through supporting organisations to be autism friendly and via supporting people through self-help and building resilience. To seek improved awareness of autism amongst all professionals and partner organisations, with a key focus on the police service and the criminal justice system.
- Priority 5 - Support for families and unpaid carers
The strategy identifies the following outcomes. Clearer access and signposting to relevant information and advice so that the right support can be identified and provided effectively. Identifying technology and tools that can assist in providing the right type of support to make the right reasonable adjustments, as well as improving quality and consistency of information. Improved experiences of universal services through better understanding of what reasonable adjustments can be made through a wider awareness of the requirements of people with autism.

- 14 The model used to develop the Autism Strategy is outcome focused, meaning it looks at the aspirations for people with autism to ascertain the activity, timescales and resources required to meet the outcomes.
- 15 In recognition of the quick pace of change in the area of autism, the strategy has been written to span a three year cycle only. The strategy is supported by an implementation plan which describes the actions required, by whom and when to achieve the required outcomes. A second implementation plan will be developed the Autism Partnership Board

in partnership with the council and the CCG, which will set out the ambitions under the strategy and required actions to make these happen, which will be signed off by formal governance in both the council and the CCG.

- 16 The Autism Partnership Board will take the lead in reviewing the outcomes achieved as the Autism Strategy is implemented. Its membership is made up of people with autism, their families and carers, the CCG, the police, 2Gether mental health trust, service providers as well as council representation from both adults and children's directorates. Future consideration will be given to the autism partnership board developing an approved terms of reference to enable them to become a strategic partnership. This will also incorporate the autism champion role which will be a role supported by a delegated cabinet member, and allow representation from the council and CCG at quarterly partnership board meetings. The implementation plan identifies actions through information gained from joint strategic needs assessment, National strategy refresh and the children's integrated needs assessment and engagement with a range of service users, their families and practitioners.
- 17 Currently performance data is very limited across the whole system. This is a national challenge. The strategy will put in place local targets to improve data across all the five priorities. The implementation plan will establish clear baselines and metric targets across organisations to measure performance and also the impact in terms of outcomes to people with autism. The role of the autism partnership board will be key in ensuring engagement with people with autism to test how the strategy impacts upon them, and target initiatives for future implementation plans.
- 18 Whilst the strategy timescale spans 2019-2022, the implementation plan also captures and reflects the continual developments and progress across the system within its outcomes and targets.

Community impact

- 19 The recommendations in this report will enable the council and the CCG to ensure that services provided which include both specialist and universal services across the county are fit for purpose and able to develop their offer and expertise over time. Furthermore, the health and wellbeing outcomes will link to the wider strategic aims for the council and the CCG. The strategy will meet the ambitions of the health and wellbeing strategy to seek unified services for everyone through consistently good quality shared care and managed networks.
- 20 Successful delivery of the Autism Strategy will support the council's corporate plan (2017-2020) ensuring people with autism are "able to live safe, healthy and independent lives' and that commissioning organisations secure better services, quality of life and value for money across the sector. This will be possible by achieving a wide range of outcomes at an individual level around increased opportunities and inclusion in education, training, work, improved access to health care and healthy living and wider access to opportunities for social inclusion and social value for all."
- 21 The Autism Strategy sets the aspirations for positive impact on the wellbeing of people with autism in Herefordshire and their experience of universal commissioned services in line with the corporate plan priorities, the health and wellbeing strategy and the children and young people plan.
- 22 The recommendations in this report will ensure that all commissioned activity is aligned to the health and wellbeing blueprint (Adult Wellbeing Plan 2017-20) supporting the intention that Herefordshire citizens are resilient, lead fulfilling lives, are emotionally and physically happy and feel safe and secure.

- 23 The recommendations will support the NHS's long term commitment to service improvement in both primary health care and acute services in order to reduce health inequalities and patient experience for people with autism. Further to this, it will support the post-Winterbourne commitment in line with the national Transforming Care Programme and create better life outcomes. These are also evidenced by the council and the CCG working together across the sustainable transformation partnership (STP) which is a national directive.
- 24 There are inter-relationships with a number of Herefordshire's key strategies including Herefordshire Learning Disability Strategy (2018-28) for people with a learning disability who have autism as well, also Herefordshire Children and Young Peoples Plan (2015-18) and the CCG's Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan (2015 -20).

Equality duty

- 25 Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to;

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 26 The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. Our providers will be made aware of their contractual requirements in regards to equality legislation. In order to meet the requirements a-c the strategy will focus on raising awareness and understanding of autism, this will help to support people into employment, and accessing mainstream services.

Resource implications

- 27 There are no direct resource implications arising from this report. The strategy aims to align current resources and where appropriate ensuring reasonable adjustments are made across the system. The resource implications are across the system and detailed in both the outcomes table and the implementation plan, and will sit across existing roles and functions.

Legal implications

- 28 The council is under a legal duty to produce an autism strategy for adults. This requirement is detailed in the Adult Autism Strategy: Statutory Guidance (2015). With regard to children and young people the Children and Families Act 2014 provides that councils are under a duty to make educational provision for young people with special educational needs and disabilities up to age 25. The work of the council and the CCG in relation to adults is directed by a range of legislation such as the National Autism Plan for Children (2003), The Autism Act (2009), the National Autism Strategy 'Fulfilling and Rewarding Lives' (2010), the Equality Act 2010, National Autism Strategy (2010) and the Adult Autism

Strategy: Statutory Guidance (2015). The Special Education Needs and Disability Code of Practice (2014) provides statutory guidance in relation to Children and Young People aged 0-25 years).

- 29 The report recommends approval of the Autism Strategy. The strategy enables the council to meet its legal obligations under the Childrens and Families Act (2014), and the Autism Act (2009).
- 30 Section 2 Health act imposes a duty on councils to have regard to the NHS Constitution in performing their health service functions. The NHS establishes the principles and values of the NHS England, which is set within the context of the data protection act 2018.

Risk management

- 31 This strategy meets the council's requirement to fulfil its statutory duty under the Autism Act 2009 ensuring that the needs of people with autism are raised across areas including employment, welfare, criminal justice, transport and education services.

Risk / opportunity	Mitigation
Performance management could be focused on process measures that are not reflective of the wellbeing and experience of the person.	The committee seeks to focus its attention on matters of direct relevance to people with autism living in Herefordshire and ensure performance measures reflect these within the action plan.
There could be no shared planning or joined up thinking in place for commissioning of health and social care services, and missed opportunities to impact on wider universal services, leading to poorer life outcomes for people with autism in Herefordshire.	The council will seek to minimise the impact of the differing approaches by adopting the implementation strategy which embeds autism awareness, builds opportunity for cross department strategic approaches and sets data performance targets through and outcomes based approach.
Progress towards the delivery of the health and wellbeing blueprint and the Childrens and families plan could be compromised due to the absence of an autism strategy.	The council can show significant amount of work in progress to improve outcomes through the implementation of the Autism strategy.
The strategy is not implemented	The strategy will be co-owned by the council, CCG and the autism partnership board, who will meet quarterly to review the progress of the implementation plan hold partners to account.

Consultees

- 32 A wide range of partner organisations have been consulted on the development of the draft strategy:
 - Herefordshire CCG
 - West Mercia Police
 - Herefordshire Carers

- Hereford Disability United
- National Autistic Society – Hereford Branch
- Herefordshire Autism Partnership Board
- Herefordshire Health watch
- Herefordshire Council Childrens Wellbeing
- Herefordshire Council Adults Wellbeing

- 33 A public facing engagement exercise was conducted during the summer of 2017 and May 2018 to seek people's views on the services and supports they would wish to see in Herefordshire. This was aimed at people with autism and their families and carers, although it was open for anyone to respond to. It was available as a hard copy paper version or on line through the Herefordshire NAS website. In 2017 the engagement asked people a series of specific questions dealing with the priority areas to help the Autism Board identify which were the key areas of development needed to be addressed by the strategy and action plan. In total 60 responses were received. 49 were through the website, 11 were hard copy responses, further information can be found in appendix 3 of the strategy. In the 2018 survey 56 people responded and the key findings are as reported in the strategy and influence the implementation plan.
- 34 The Children and young people scrutiny committee reviewed the draft Autism Strategy in April 2018 and made a series of recommendations which have been incorporated into the revised strategy. The recommendations from scrutiny and the responses can be found in appendix 4.

Appendices

Appendix 1: Draft implementation plan.

Appendix 2: Draft Herefordshire Autism Strategy 2019-2022.

Appendix 3: Equality Impact Assessment.

Appendix 4: Childrens and Young Peoples Scrutiny Committee Recommendations, April 2018 and subsequent responses.

Background papers

None identified.