

Decision Maker: Adult and Community Portfolio Holder

Date: For Pre-Decision Scrutiny at the Adult and Community PDS Committee on 26th July 2011

Decision Type: Non-Urgent Non-Executive Non-Key

Title: **IMPLEMENTING "FULFILLING AND REWARDING LIVES" - A COMMISSIONING PLAN FOR ADULTS WITH AUTISM IN BROMLEY**

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Chief Officer: Terry Rich, Director of Adult and Community Services

Ward: All

1. Reason for report

- 1.1 In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Autism Act 2009.
 - 1.2 Local authorities are required to develop local commissioning plans for services for adults with autism, and review them annually. This plan should reflect the output of the Joint Strategic Needs Assessment (JSNA) and all other relevant data around prevalence.
 - 1.3 This report updates the Adult and Community Portfolio Holder on the requirements and implications of the statutory guidance and proposes that a draft commissioning plan be released for consultation.
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2. **RECOMMENDATION(S)**

PDS members are requested to:

- 2.1 Note and comment on the draft strategy

The Portfolio Holder is requested to:

- 2.2 Consider comments of PDS and agree to the release of the draft commissioning plan for consultation.
- 2.2 refer the draft commissioning plan to the Children and Young People (CYP) Policy Development and Scrutiny Committee for their consideration in light of the links with transitional arrangements for young people.

2.3 agree that following consultation the final commissioning plan be prepared for agreement by both the Adult and Community Portfolio Holder and Children and Young People Portfolio Holder in November 2011.

Corporate Policy

1. Policy Status: New policy.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: No cost
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: No Budget
 4. Total current budget for this head: £No Budget
 5. Source of funding: N/A
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Staff

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is not applicable.
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected):
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? N/A.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Autism is a lifelong developmental disability, sometimes referred to as Autistic Spectrum Disorder (ASD) or Autistic Spectrum Condition (ASC).

The main areas of difficulty experienced by all people with autism are:

- communicating socially, particularly using and understanding facial expressions, tone of voice and abstract language;
- recognising or understanding other people's emotions and feelings, and expressing their own, making it more difficult to fit in socially; and
- difficulty in assimilating information and contextualising it as needed in daily life
- understanding and predicting other people's behaviour, making sense of abstract ideas, and imagining situations outside their immediate daily routine.

Other related features can include: love of routines and rules, aversion to change, and sensory sensitivity (for example a dislike of loud noises).

3.2 Around half of people with autism also have a learning disability (sometimes known as 'low-functioning' autism), while the rest do not (so-called 'high-functioning' autism, which includes Asperger's Syndrome).

3.3 In Bromley, there are an estimated 1062 people with moderate/severe learning disabilities, and 6250 with mild/moderate learning disabilities. The number of people with moderate or severe learning disabilities are expected to rise by around 80 by 2025, with the largest increases in the 25-34 and 55-64 age groups

3.4 There are no local sources of information that record incidence and prevalence of autism in adults in Bromley. Estimates based on those used in the national autism strategy indicate that prevalence is higher among men (1.8%) than among women (0.2%). A recent Health study across Bromley & Lewisham on 4-8 year olds confirmed a 2% prevalence rate. Recent referral rates through Bromley NHS for diagnosis of autism in adults were as follows:

2008/2009 - 7 referrals/ assessments
2009/2010 - 5 referrals / assessments
2010/2011 - 17 referrals / assessments

In order to better understand the overall numbers of people with autism in Bromley it is proposed that further work be carried out as part of the joint Strategic Needs assessment during 2012.

3.5 In 2009 the government published the Autism Act which was the first piece of legislation specifically dealing with the needs of adults with autism. The ultimate outcome sought for adults with autism is the vision set out in the government's strategy for adults with autism "*Fulfilling and Rewarding Lives*":

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

3.6 In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Act.

3.7 The Autism Act required that the guidance should cover the following:

1. The provision of relevant services for the purpose of diagnosing autistic spectrum conditions in adults
2. The identification of adults with autism
3. The assessment of the needs of adults with autism for relevant services
4. Planning in relation to the provision of relevant services to people with autism as they move from being children to adults
5. Other planning in relation to the provision of relevant services to adults with autism
6. The training of staff who provide relevant services to adults with autism
7. Local arrangements for leadership in relation to the provision of relevant services to adults with autism.

3.8 In particular, the guidance sets out how health and social care services can:

- improve the way they identify the needs of adults with autism, and
- incorporate those identified needs more effectively into local service planning and commissioning, so that adults with autism and their carers are better able to make relevant choices about their care.

3.9 The statutory guidance is to be treated as if it were guidance issued under section 7 of the Local Authority Social Services Act 1970. This means that local authorities and NHS bodies must follow the relevant sections or provide a good reason why they are not (one example might be because they can prove they are providing an equivalent or better alternative). If they do not follow the guidance and cannot provide a good reason, they may be liable to judicial review. Lack of sufficient resource would not necessarily constitute a good reason.

3.10 One of the underlying principles of the guidance is to avoid new burdens or extra requirements that health and social care professionals must meet. Instead, the emphasis is on making sure existing policies are followed. It is important to note that the guidance reinforces that diagnosis of autism is **not** a guarantee of support or services but that it is a reason for assessment of needs. Access to publicly funded care services is still based on meeting the Council's eligibility criteria (which in Bromley are substantial and critical need).

3.11 Though the guidance provides direction, the ultimate aim is that local areas apply it to reflect local needs, existing strengths in service provision and the landscape they work in. To support local authorities with meeting the requirements of the statutory guidance, the Department of Health has published an 'Essential Quality Outcomes for Local Self-assessment Framework' which has been used to prepare the draft commissioning plan for Bromley.

3.12 The draft commissioning plan (attached) sets out the current position in Bromley with regard to support and services for people with autism and suggests a number of proposed actions which address any identified gaps in provision. Through consultation the effectiveness of current services and the information advice and guidance offering available to people with autism in the Borough will be tested.

3.13 The draft commissioning plan is specifically aimed at adults as required by the legislation. However officers in ACS are working in partnership with children's services in order to address the requirements young people moving from childhood to adulthood.

3.14 There is no additional funding available to local authorities to implement the requirements of the Autism Act and additional resources would not be required to deliver the proposals in the draft commissioning plan.

4. POLICY IMPLICATIONS

This report is presented to PDS as part of its scrutiny overview role in relation to policy development within ACS.

5. FINANCIAL IMPLICATIONS

There are no additional resource implications arising from the Autism Act. The actions proposed in the draft commissioning plan can be met within existing resources.

6. LEGAL IMPLICATIONS

TBA

Non-Applicable Sections:	Personnel implications
Background Documents: (Access via Contact Officer)	Fulfilling and rewarding lives: the strategy for adults with autism in England. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance Implementing Fulfilling and Rewarding lives: Statutory Guidance. http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance

REWARDING AND FULFILLING LIVES

A DRAFT COMMISSIONING PLAN FOR ADULTS WITH AUTISM IN BROMLEY

JULY 2011

Introduction

In 2009 the government published the Autism Act which was the first piece of legislation specifically dealing with the needs of adults with autism. The ultimate outcome sought for adults with autism is the vision set out in the government's strategy for adults with autism "*Fulfilling and Rewarding Lives*":

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

In December 2010, the Secretary of State issued statutory guidance to local authorities, NHS bodies and NHS foundation trusts with regard to meeting the requirements of the Act. Though the guidance provides direction, the ultimate aim is that local areas apply it to reflect local needs, existing strengths in service provision and the landscape they work in. To support local authorities with meeting the requirements of the statutory guidance, the Department of Health has published an 'Essential Quality Outcomes for Local Self-assessment Framework' which has been used during the preparation of the draft plan for Bromley.

Autism

Autism is a lifelong developmental disability, sometimes referred to as Autistic Spectrum Disorder (ASD) or Autistic Spectrum Condition (ASC).

The main areas of difficulty experienced by all people with autism are:

- communicating socially, particularly using and understanding facial expressions, tone of voice and abstract language;
- recognising or understanding other people's emotions and feelings, and expressing their own, making it more difficult to fit in socially; and
- difficulty in assimilating information and contextualising it as needed in daily life
- understanding and predicting other people's behaviour, making sense of abstract ideas, and imagining situations outside their immediate daily routine.

Other related features can include: love of routines and rules, aversion to change, and sensory sensitivity (for example a dislike of loud noises).

Around half of people with autism also have a learning disability (sometimes known as 'low-functioning' autism), while the rest do not (so-called 'high-functioning' autism, which includes Asperger's Syndrome).

In Bromley, there are an estimated 1062 people with moderate/severe learning disabilities, and 6250 with mild/moderate learning disabilities. The number of people with moderate or severe learning disabilities are expected to rise by around 80 by 2025, with the largest increases in the 25-34 and 55-64 age groups

There are no local sources of information that record incidence and prevalence of autism in adults in Bromley. For this reason, estimates based on those used in the national autism strategy have been used. These estimates indicate that prevalence is higher among men (1.8%) than among women (0.2%). A recent Health study across Bromley & Lewisham on 4-8 year olds confirmed a 2% prevalence rate.

As noted in Objective 1, commissioning plans should be informed by robust local needs assessments. In Bromley it is proposed that a needs assessment will be carried out in conjunction with the director of public health during 2012.

Commissioning Plan:

This draft commissioning plan for adults with autism in Bromley is our response to the guidance and we are seeking the views of people in Bromley about how the needs of people with autism in Bromley are being met. It is structured around the seven key objectives identified in the statutory guidance:

- 1. Autism services should be commissioned as part of a well planned system. The autism needs assessment should inform the commissioning plan. All organisations should have a responsibility to collect information on needs (as required) and to feed this into the needs assessment.**

- 2. People with autism and their carers will be engaged in the development of the commissioning plan.**

- 3. Autism should be recognised by the decision making bodies in the Borough as an important matter. There should be a clear pathway for reporting and decision making.**

- 4. An accessible pathway for diagnosis and assessment for people with autism should be in place.**

- 5. People with autism should have access to trained and skilled assessment to help find out what they need. If eligible they should have access to personalised support. If not they should have access to preventative support, signposting and information.**

- 6. Where possible people with autism and their families should be able to have their needs met in services that everybody uses.**

- 7. Transitions from childhood to adulthood should be smooth and well co-ordinated.**

OBJECTIVE 1

Autism services should be commissioned as part of a well planned system. The autism needs assessment should inform the commissioning plan. All organisations should have a responsibility to collect information on needs (as required) and to feed this into the needs assessment.

A commissioning plan looks at how many people with autism there are, what they need and what they say about what they want. Then it looks at how much money there is and decides what are the most important things to do first. A commissioning plan should be produced every year. This commissioning plan should fit with other plans and strategies for Learning Disabilities, Mental Health, and Housing etc.

There is not enough accurate information about the numbers of people with autism. We need to collect better quality information locally and to use national information.

What we propose to do –

This draft strategy will ensure that our other plans and strategies integrate and support the delivery against the statutory guidance. For example our learning disability design specification for supported living services is being reviewed in order to ensure that commissioned properties will be accessible to people with autism.

To have a better understanding of the overall numbers of people with autism in Bromley, it is proposed that data should be gathered as part of the Joint Strategic Needs Assessment in 2012.

OBJECTIVE 2

People with autism and their carers will be engaged in the development of the commissioning plan.

What we propose to do -

The views of people with autism and carers will be sought in the development of this plan and its implementation.

We will use the Autism Standing Forum; Mental Health Partnership Group; Transition Operational and Strategy Groups as well as the Learning Disability Partnership Board, Experts by Experience and the LINK in the stakeholder consultation and ongoing engagement.

OBJECTIVE 3

Autism should be recognised by the decision making bodies in the Borough as an important matter. There should be a clear pathway for reporting and decision making.

What we are doing now –

As required under the Statutory Guidance we have identified the Council's Strategic Commissioner for Learning Disabilities as having responsibility for lead commissioning of community care services for adults with autism in the borough.

NHS Bromley has identified their Commissioner, Mental Health and Learning Disabilities as their lead for autism.

What we propose to do -

The Learning Disability Partnership Board (see objective 1) will report to the to the Health and Well Being Board on how we are delivering the support for people with autism.

Lead officers for autism will report to their respective governance bodies within their organisations on a joint basis to ensure that actions and outcomes between health and social care are coordinated and complementary.

OBJECTIVE 4

An accessible pathway for diagnosis for people with autism should be in place.

A pathway means that people in Bromley will know where to go to get a diagnosis of autism.

The National Institute for Health and Clinical Excellence (NICE) clinical guideline for adults with autism is scheduled to be published in June 2012. In order to be ready for the guidance, NHS bodies and NHS Foundation Trusts that commission or provide diagnostic and assessment services should be reviewing existing best practice with a view to establishing how it can be adopted. This is not yet under way in Bromley. It is proposed that this work should be led by the Transition Strategy Group which includes representatives from Children and Young People Services (CYP) and health and social care professionals in order to assess the potential impact of this on services in Bromley.

Once the NICE clinical guideline is published, NHS bodies and NHS Foundation Trusts that commission or provide diagnostic and assessment services will be expected to review their diagnostic processes and services against NICE's best practice guidance. The aim of this is to make the diagnostic process more accessible and consistent.

What we are doing now –

We are reviewing existing best practice with a view to establishing how the NICE guidelines will impact locally. This work is led by the Transition Strategy Group which includes representatives from CYP and health and social care professionals.

Currently Bromley PCT Commission's Autism Diagnostic Services for adults from the South London and Maudsley (SLAM) NHS Foundation Trust. Referrals to this service are tertiary, and have therefore been screened by local secondary services (Oxleas) prior to referral. The service at SLAM offers a diagnostic assessment. In some cases further support through outpatient / day-care / inpatient can be accessed or recommendations are made back to the local referring team.

What we propose to do –

We are currently discussing further development of the care pathway locally, including skills development, in order that some diagnostic assessment can take place locally within secondary care. These plans will continue to be developed over the coming year.

NHS Bromley will develop a diagnostic pathway in line with the statutory guidance. Health and social care staff will help to develop this. This will help local people to get a diagnosis if they want one.

This will be measured against the NICE guidance due to be published in 2012.

OBJECTIVE 5

People with autism should have access to trained and skilled assessment to help find out what they need. If eligible they should have access to personalised support. If not they should have access to preventative support, signposting and information.

If people with autism have FACS eligible needs (i.e. they are eligible for social care support) they should be able to have:

- skilled and knowledgeable social work assessment,
- a personalised support plan
- trained personal assistants (if necessary),
- support to manage personal budgets.

Other supports might also be useful to people with autism:

- befriending and mentoring,
- group support,
- brokerage, and
- advocacy.

Carers of people with autism should be able to have support and information to meet their own needs.

What we are doing now –

We are developing a support planning process that will support eligible people with autism in being able to access the services they require to meet their needs.

For people who do not meet our eligibility criteria there are a number of organisations who we signpost people to in order that they may be supported in living full lives within the community:

Bromley Mencap have been commissioned to provide a brokerage service that aims to provide information, signposting and direct assistance to ensure that adults with learning disabilities who live in the borough have easy access to information and advice to enable them to make informed choices and assist them to maintain independence and community involvement.

Burgess Autistic Trust's (BAT) Family Service provides free information and support to families whose child, aged 18 years or younger, has been diagnosed with an Autistic Spectrum Disorder (ASD). Their Outreach Service is a free support service for young people and adults aged 18 and over with ASD running regular social groups and activities, offering young people and adults with ASD the opportunity to meet others and enjoy the benefits of social contact.

BAT provides a range of ASD specific training including a Family Service Workshops for families and carers, bespoke training for partner or public sector organisations who work with people with ASD, and an annual conference on topical, ASD-related subjects

Advocacy for All's Advocacy for Autism project began in 2004 and was initially funded by BILD and since then various charitable trusts. Working across Bromley and Bexley the project was the first autism specific advocacy project in England. They work with people with autism and Aspergers syndrome aged 18+ - (there is no upper age limit). The project is available to all people with autism regardless of whether, or not, they are FACS eligible. Trained volunteer advocates add value to the project.

Young people with Autism and Aspergers syndrome (age 14-18) receive advocacy support from Advocacy for All's Children in Need funded project.

What we propose to do –

We will look at what other Councils are doing and see where we can work together with them or share good practice.

We will ensure that information, advice and guidance provision for those people who do not meet FACS eligibility criteria are clearly accessible for people with ASD.

OBJECTIVE 6

Where possible people with autism and their families should be able to have their needs met in services that everybody uses.

The focus of the statutory guidance is to ensure that people with autism have the same access to mainstream services – housing, education, training, leisure activities – as the rest of the population.

Autism is very different for different people. Some people will always need very specialist supports. Other people will be able to use ordinary services. All services should meet autistic needs within their service rather than send people to a specialist service to do the job for them. All support services should have training and development for their staff to be able to work well with people with autism. They should be providing training and development for their staff.

The guidance assumes that everyone who comes into contact with people with autism have had, as a minimum, awareness training, and, where appropriate, specialist training. There is no set timescale for compliance with this requirement and awareness training can be

incorporated into mainstream equality training. It is not anticipated that this will require additional resources.

What we are doing now –

Via joint teams with health providers, support is provided for people with autism who have an assessed need and are eligible under the Council's criteria for support. This is usually through existing mental health or learning disability teams and services.

We have updated our specification requirements to ensure that providers of commissioned services provide autism training for their staff.

What we propose to do –

We will liaise with providers of mainstream services including Bromley MyTime, Bromley Adult Education College, registered social landlords etc to identify the ways in which they can make their services more accessible to people with autism.

Through support mechanisms like our Training Consortium we will enable providers to access training around autism.

We will evaluate the current equality/ disability awareness training provided by the Council's Learning and Development service to ensure that it is meeting the requirements of the guidance.

We will provide training to non-care staff where appropriate (e.g. receptionists, housing staff).

We will investigate opportunities for joint training with our cluster boroughs and health partners, including GP's.

OBJECTIVE 7

Transition from childhood to adulthood should be smooth and well co-ordinated.

Transition from childhood to adulthood for young people with autism can be difficult. Existing children's to adults' transitions systems should be developed to fully meet the needs of people with autism. Where they are eligible for support from the Council, people with autism should be able to have their needs met in the most suitable service, for example in the mental health, older peoples' or substance misuse services.

What we are doing now –

The Council's new Transition Strategy being jointly developed by Adult & Children Services with health input will help to support young people moving from childhood to adulthood and specifically references young people with autism.

Closer joint working between Adult & Children Services has been developed at all levels in order to best manage the transition between services.

We have commissioned a Transition Family Support Service to work with specific families going through transition with an aim to improving access to high-quality, timely information during transition.

Transition services in Bromley, whose recent performance has been rated as Development Stage 3 are building on established and newly developed practice to ensure a smooth care pathway for young people going through transition. In line with the guidance, an advocacy service has, following review earlier this year, been re-commissioned to deliver family support to identified cohorts of individuals coming through the transition process. This did not require additional resources.

What we propose to do –

We will engage with mental health, older peoples' and substance misuse services in order to identify any specific issues relating to supporting people with autism in those services.