

PE1704/X

Inverclyde Health & Social Care Partnership submission of 18 June 2019

Inverclyde HSCP and its Key Partners launched its local Strategy for Autism in 2014 and are presently developing its strategy around an Autism friendly Inverclyde with cognisance to the coordination work of Autism Network Scotland. Areas highlighted from service users and carers of importance to them is the transition from children to family services and training for employment.

- ***That every person in Scotland going through an autism diagnostic procedure will be assessed within a calendar year and receive a statutory services assessment from a qualified social worker as an integral part of this process, within twelve months from the date of their initial referral.***

Our current arrangement in Children and families social work is to carry out an assessment of children and young people post diagnosis, however at times this is undertaken by a social work assistant and not a qualified social worker. The assessments used are our Wellbeing assessments, used across the teams for all children and fitting with the GIRFEC pathway. The outcome of the assessment depends on the level of need but can range from signposting to advice and guidance or professional social work input and allocation of resources.

Diagnosis is a period of immense stress for families with a child who is suspected to have autism. Diagnosis locally within Inverclyde is 10-12 months so we already fall within the proposed time limit. Services need to ensure that the diagnostic process is as smooth and efficient as possible which involves multiple agencies (education, health, SLT, psychology, etc.) so making sure those agencies work in a multidisciplinary way will hopefully cut down on time waiting for individual steps to be completed.

There is a requirement to examine pre-diagnostic support. Services are often looking at young children who are in key developmental stages. Going a year without support could be very detrimental and perhaps impact on their long term outcomes. Add to this the stress and feeling of helplessness felt by some parents and carers and you have a situation that creates real disadvantage that could have a significant impact. Within Inverclyde we are encouraging the formation of peer support groups with no requirement for formal diagnosis. This helps give parents and carers some support and reassurance.

Ultimately, if the challenges faced by the people referred to the diagnostic process are found not to be the result of an ASD, they will still require some form of behavioral/communication/social support. Understanding the underlying cause will help in the long term, but in the short term, there needs to be some form of intervention(s) as a "first aid" to limit the impact of those challenges. This could be additional support for parents/carers rather than

direct intervention, to stabilise the home environment and put parents/carers in the best place to focus on the challenges presented by their children. Again, this would go hand in hand with holistic support that should be put in place post diagnosis.

Within Inverclyde we have integrated services, but there is still clarity required on the referral pathway for a person for the autism diagnosis, who they are referred to, who commissions the diagnosis (a health assessment, arranged by the GP) and at what point social work becomes involved. Best practice in Autism diagnosis is for a multi-disciplinary team to be involved, but this requires further defining adult services. An assessment by a “qualified social worker” does not fit with the way Assessment and Care Management services are developed, with some care managers being social work assistants or having other qualifications or specialism. The appropriate care manager to carry out the assessment would depend on presenting need, for example an Occupational Therapist might carry out the initial assessment if the presenting need was around a housing assessment or some other functional need like a kitchen/cooking assessment. It is reasonable to have time frames, and once someone is referred to the HSCP we have an expectation that an assessment could be carried out within a month unless there are reasons for delay (such as information not being provided), but that is once the case is allocated, and if there is no presenting need (having an Autism diagnosis does not always indicate a social care need) someone could be on the waiting list for allocation and assessment as they are not a high priority or urgent referral.

That children with autism in mainstream schools will have their assessed needs for classroom support met by an ASN assistant with a recognised autism qualification as part of a mandatory registration process for ASN professionals.

- The needs of children and young people with autism are met through a variety of methods within early year’s provision and schools. How these needs are met is dependent upon the appropriate assessment of the individual. This includes adaptations to the learning environment and may include focused input from an ASN Assistant directed by the teacher. To assume that the support from an ASN Assistant is essential for all children is counter to the evidence that the individual needs of children require careful assessment and planning. Not all children with autism benefit from ASN Assistant support, hence the requirement for individualised solutions.
- In terms of training for ASN Assistants ASN Assistants support a wide range of children and young people with additional support needs, many of whom do not have autism. The training needs for ASN assistants must by necessity be much more generic as well as including specific training regarding how to support particular needs; such as autism, visual impairment, social emotional needs etc.
- Regarding the specific training for autism all ASN Assistants are given the opportunity to participate in any of the training that is offered to staff in educational establishments of Inverclyde. The training delivered is relevant to the age and stage of the children in their establishment. All training programs

start with ASD Awareness, looking at the different theories and culminate with staff contributing to a plan to create a Communication Friendly Establishment. Within the training, at the different stages, we concentrate on Communication; The Sensory World of Autism; Understanding Behavior; Autism and Mental Health, Skills Group Training and Play Skills for Autistic pupils. A powerful and integral part of our training is hearing the voice of the Autism Community, as part of every training delivered in Inverclyde is the input from a group of young people on the Autism Spectrum, who give an insight in to their world. In addition, Educational Psychologists, the Autism Outreach Service and Speech & Language Therapists provide bespoke training for individual schools and early year's establishments. Education staff including ASN Assistants are also encouraged to access the Level 2 and 3 Certificate in Understanding Autism run by The Skills Network, if they want to formalise and further develop their learning. Education Scotland have also developed an online module to support school staff in their understanding of inclusive practice, including Autism staff are also encouraged to make use of the Autism Toolbox resource as part of their CLPL.

- ***Those young adults with autism will have a statutory right to specialist support from their local authority up to the age of 25.***

Often which team would provide the support is an issue, as the young person may not have a Learning Disability but may have Mental Health needs or may be able to access mainstream services. The young adult with Autism could be attending college and have access to the Disability services provided by Further Education, including grants and direct support through the University or college's support and advice services. The phrase "specialist" support suggests we need an Autism team, or at least dedicated Autism workers within other teams within the local authority, and if this only applies up to age 25 then there is a case for the development Autism transition workers.

- ***That an Autism Act will be in place within the next 5 years to enshrine specific rights and services for autistic people in our legal system.***

In terms of the requirement or otherwise for legislation specific to autism there is already in place legislation which makes provision for children and young people with autism – the Additional Support for Learning (Scotland) Act, 2004, revised 2009. Having autism specific legislation may be discriminate against children and young people who do not have this assessed need or have other diagnostic labels.

Solicitors have an obligation to complete further training which could be fulfilled by autism awareness training, Strathclyde Police have been working with local autism agencies for Change already to improve their understanding of ASDs and how to interact with people with autism. Communication support, emotional support, etc.would be necessary for many people on the spectrum, whether that be via trained solicitors.