

# Joint Commissioning Strategy

Adults with Autism  
in Luton

2011-2016

NHS Luton and Luton  
Borough Council



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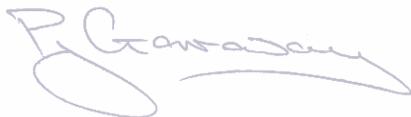
# FOREWORD

*Although some of us will know someone who is on the autistic spectrum, the condition in many cases it remains a hidden disability. Too many people on the autistic spectrum are still experiencing problems in managing their everyday affairs, finding it difficult to access appropriate services and support and are missing out on the change of quality of life that others enjoy.*

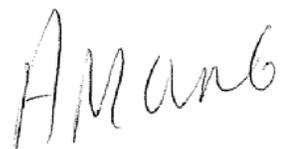
*This strategy demonstrates a commitment across Luton to improve the lives of people with autistic spectrum conditions, their carers and their families. We will do this by ensuring the spread of information and knowledge about autistic spectrum conditions, and by improving access to services for the diagnosis, treatment and support for those on the autistic spectrum. We will ensure that people, families and carers affected by autism know what services and support are available to them and where to go for information and help*

*Delivering the objectives of the National Autism Strategy at a local level will require a high level of commitment by those responsible for commissioning and delivering services in Luton. We are confident that by working effectively with partners in the public and private and voluntary sectors we will be able to meet the challenge of delivering the changes required to improve the lives of those on the autistic spectrum*

Signed:

A handwritten signature in blue ink that reads 'P Garraway'.

Pam Garraway  
Corporate Director  
Housing and Community Living

A handwritten signature in blue ink that reads 'AMcNab'.

Angela Mc Nab  
Chief Executive  
NHS Luton

# INTRODUCTION

The national autism strategy sets out a vision that all adults with autism will be able to live fulfilling and rewarding lives within a society that understands and accepts them. It looks forward to a time when people on the autistic spectrum have access to the treatment, care and support they need, health and social care staff, amongst others in the public sector, are well informed and confident in their response and mainstream public services treat them fairly as individuals.

This joint commissioning strategy establishes the local vision for the development and commissioning of services and support for adults with autistic spectrum conditions and their carers over the next five years. We will move forward to provide a more responsive, integrated and person-centred approach. This change will ensure that our future commissioning is in line both with the national agenda and NHS policy directive to “shift care closer to home”, delivering increased choice and flexibility in how health and social care needs are met

# WHAT IS AUTISM?

The national strategy defines autism in the following way:

“A lifelong condition that affects how a person communicates with, and relates to, other people. It also affects how a person makes sense of the world around them. The three main areas of difficulty, which all people with autism share are known as the “triad of impairments”. They are difficulties with:

- Social communication (e.g. problem solving and understanding verbal and non-verbal language such as gestures, facial expressions and tone of voice)
- Social interaction (e.g. problems in recognising and understanding other people’s feelings and managing their own)

- Social Imagination (e.g. problems in understanding and predicting other people's intentions and behaviour and imagining situations outside their own routine")

(Fulfilling and Rewarding Lives, 2010, p10)

Many people with autism experience sensory sensitivity or under activity, for example sounds, touch, taste, smells, light or colour. Often individuals may engage in repetitive behaviour, have intense special interests, like to have a fixed routine and can find change very difficult to cope with.

The word "spectrum" is often applied to the condition because its characteristics can vary widely from person to person and affect people to different extents. In this strategy the term Autistic Spectrum Conditions (ASC's) will be used to describe this range.

"Classic autism" (sometimes known as Kanner's syndrome) is the most common and severe condition in the group. Individuals with classic autism have the greatest difficulties in communicating and making sense of the world. The individual will often have limited or no verbal communication and associated learning disabilities, with a below average Intelligence Quotient (IQ).

Aspergers Syndrome (AS) describes individuals at the highest- functioning end of the spectrum. Individuals with AS have fewer problems with speech and are often of average or above average intelligence. Many do not have the accompanying learning disabilities often associated with autism but may have specific learning difficulties e.g. dyslexia, dyspraxia and Attention Deficit Hyperactivity disorder (ADHD) (NAS website) Most people with AS will experience significant difficulties in reading signals, communication and social interaction with others.

Individuals with AS are particularly vulnerable to mental health problems. One prominent study (Ghaaziuddin et al 1988) found that 65% of their sample patients with AS presented with symptoms of a psychiatric disorder. Due to the communication problems associated with AS it is often not until a mental illness is well developed that it becomes recognised with serious consequences such as total withdrawal, increased obsession behaviour, aggression, paranoia and suicidal ideation (NAS website)

Other ASCs include Rett Syndrome, childhood disintegrative disorder and pervasive development disorder not otherwise specified (usually referred to as PDD-NOS) (National Institutes of Health)

## NATIONAL POLICY CONTEXT

The key policies and drivers which have influenced and shaped the development of this joint commissioning strategy are listed below:

- **“ I Exist: The Message From Adults with Autism in England” 2008 (National Autistic Society)**

This report highlighted the problems experienced by adults with autism and examined the changes needed to transform their lives

- **“Valuing People Now: A New Three Year Strategy for People With Learning Disabilities ” 2009 (Department Of Health)**

Valuing People Now recognised that adults with autism are some of the most excluded and least heard people in society and that service providers, commissioners and policy makers were not specifically addressing their needs

- **Autism Act 2009**

A landmark piece of legislation which specifically addresses the needs of adults with autism. The Act set the requirement of the publication of the national autism strategy and the provision of accompanying guidance to NHS and Local Authorities. Specific action is required both nationally and locally in a number of key areas over the next 3 years The Act was created in response to growing amount of evidence that a significant proportion of adults with autism are excluded both socially and economically

- **“Fulfilling and Rewarding Lives: The Strategy For Adults within Autism in England ” 2010 (Department of Health)**

The national strategy has set out the direction for long term change for those on autistic spectrum. The central vision of the strategy can be summarised as follows:

“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 to support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them to make the most of their talents”

For individuals on the autistic spectrum this means:

- Having a right to receive an assessment of need from social services
- Getting the same opportunities for education and further education as everyone else
- Being supported to get a job and stay in work
- Being able to choose where to live just like anyone else
- Having relationships and social networks
- Having their health care needs properly met in a way which is appropriate for someone with autism
- Being safe from hate crime and discrimination
- Living in a society where people understand, respect and accommodate difference, and
- Receiving support to live independently as appropriate

(Fulfilling and Rewarding Lives, p13)

## LOCAL CONTEXT

This strategy should be linked to other Local Strategies including the following:

- The Local Area Agreement

- NHS Luton and Luton Borough Council (LBC) Joint Strategic Needs Assessment
- Luton Carers Strategy
- Supporting People Commissioning Plan 2006-2011
  
- Strategy for the Commissioning of Services for People with a Learning Disability 2008-2013
- NHS Luton's Transforming Primary and Community Services Strategy 2010-2015
- NHS Luton Mental Health Strategy 2009-2014

## DEMOGRAPHIC INFORMATION

It is estimated that approximately one in every hundred adults and one in every hundred children have an autistic spectrum condition (Autistic Spectrum Disorders in adults living in households throughout England, Adult Psychiatry Morbidity Study 2007). The Office of National Statistics (ONS) latest figures indicate that 194,300 people live in Luton (ONS Mid Year Report 2009). Research undertaken by the Local Authority suggests that this is an underestimate of the town's population and that a figure of 204, 700 is more realistic.

**It can therefore be estimated that around 2000 people in the town are likely have an ASC.**

Luton Borough Council (LBC's) Children's Service know of approximately 500 children and young people under the age of 18 who have an ASC. At present there are no reliable statistics from Adult Social Care or public health.

It is generally recognised that there are more males than females with ASCs. Within the National Autistic Society's (NAS) adult services the ratio of males to female clients is 3:1 (NAS website). A number of theories have been put forward for these gender differences, however until we have a fuller understanding of the causes of autism it is unlikely that a proper explanation can be made. Luton has a diverse population; approximately 35% of people are from Black and Minority Ethnic (BME) communities with significant Pakistani, Bangladeshi, Indian and African Caribbean communities. There is limited research around ethnicity and autism which has given an inconsistent picture as to whether autism is more prevalent or frequently diagnosed in particular ethnic groups.

The NAS Black and Minority Ethnic Communities Project and other information collated for a recent NAS report entitled "Missing Out, Autism, Education and Ethnicity: The reality for Families today" (2007) has highlighted that some minority ethnic communities have a limited understanding of autism and that the

condition is perceived differently by some communities and sometimes even differently by different members of the same community. This point needs to be born in mind as it is likely to have implications on how families, carers and professionals respond to autism and how likely and easy an individual may find it to access treatment and support.

## DEVELOPING THE LOCAL AUTISM STRATEGY

A series of working group meetings were held between September and December 2010. These were been attended by a range of stakeholders including representatives from statutory health and social care organisations (including LBC and South Essex Partnership Trust- SEPT), providers of services of people with autism, third sector organisations, parent carers and their representatives and representatives from the main advocacy organisation that provides support to individuals with ASCs.

This group has played a major role in mapping out current provision and identifying the local problems and deficits for people with ASCs. The key issues have been reviewed and will be addressed through the joint commissioning intentions and actions listed at the end of the strategy (pages 14 -19).

Full Membership and the terms of reference for the working group can be found in appendix 1.

## THE CURRENT PICTURE IN LUTON

The overall picture for individuals with ASCs is that current service provision in Luton is patchy, uncoordinated and underdeveloped. We currently have very limited management information and are falling short of the requirement of the National Autism Strategy “Fulfilling and Rewarding Lives”

## CHALLENGES FOR CURRENT SERVICE PROVISION

The key messages are :

- Very limited specific autism provision
- No clear pathways into other services
- Adults who have an ASC but do not have a significant learning disability are finding it particularly difficult to access an assessment and appropriate support (from Adult Social Care and Health). This includes individuals who have been well supported by children's services.
- Mental Health services are providing very limited support to people with Autistic Spectrum Conditions
- There is a lack of understanding of autistic spectrum conditions across health and public services
- Limited long term support for ASCs from health and social care and the third sector
- People going out of area for diagnosis
- Significant number of young people and adults require expensive out of area residential placements funded by health and social care
- Individuals with ASCs have reported difficulties to access suitable accommodation in Luton
- Some good examples of a small number of individuals with high and complex needs being supported to live in the community within Luton, however a shortage of suitable accommodation means that the expansion of this service is slow.

- Individuals with ASCs are able to access some support with gaining work through the Council Supported Employment Scheme. This does not include pre employment support or social skills training.

Within Specialist Learning Disability Services SEPT run a service which provides a diagnosis for people with a learning disability and suspected autistic spectrum condition but this clinic does not generally include individual's with a IQ of 70 or above. People generally have to travel approximately 20 miles to access this service which is based at the other end of the county.

NHS Luton currently commissions South London and Maudsley (SLAM) NHS Trust to undertake assessments for people with ASCs including Aspergers syndrome and high functioning autism. This is on spot (individual case by case) basis. Again people have to travel over 30 miles to access this service, waiting times can be an issue and follow up is often limited. Access to treatment for individuals with autistic spectrum conditions such as these has historically been limited. Within the local Mental Health contract the provider has not deemed it to be part of the services that it is contracted to provide.

Autism Bedfordshire currently provides telephone support to people with Autistic Spectrum Conditions. This is not commissioned by NHS Luton or Luton Borough Council. Individuals on the Autistic Spectrum may be able to receive advocacy support from through some of the council's advocacy contracts but this is not guaranteed for individuals who do not meet departmental eligibility criteria

## WHAT SHOULD WE BE AIMING FOR?

Locally we need to embrace the ethos, values and requirements of the national Autism strategy, as well as other key policies to ensure that Commissioners, Providers and other stakeholders are providing a joined up, coordinated response . This needs to be underpinned by better management information.

People with ASCs and their families and carers should be provided with the information and support required to promote the individuals independence and wellbeing to the greatest extent possible. In practice this means :

- Making information, advice and advocacy readily available

- Ensuring that people receive timely and easy access to a community care assessment and diagnostic services
- Making sure that individuals with ASCs receive ongoing support to meet their health and social care needs (including a package of care or personal budget to meet their assessed needs)
- Making sure that people with ASCs have access to appropriate accommodation either in a local residential home, supported accommodation or their own home.
- Providing individuals are with the right support to access and stay in work
- Promoting an environment in which there is a much better understanding of ASCs and how they impact on the lives of people and carers of people with the condition.

## COMMISSIONING ISSUES:

- A significant proportion of the town's population are likely to have an ASC , although some will have a diagnosis, others may not have at present and for these individuals it may remain a hidden disability. We need to start collecting better data to provide better recognition of the issue and inform the planning process. to enable us develop appropriate support for people
- The mental health needs for individuals with ASCs are currently not being sufficiently well addressed. More needs to be done to develop services right through from diagnosis to treatment and ongoing support
- We need to look at providing diagnostic and treatment closer to home so that people do not need to travel such long distances for these services
- We need to make sure that there is a robust pathway across health and social care services so that individuals with ASCs do not fall through the net in accessing assessment and appropriate services

- We need to make sure that the workforce across health and social care, as well as other parts of the public sector are better informed of the needs of individuals with ASCs and know how to confidently work with them
- Services for individuals with ASCs in the third sector have huge potential for development and could compliment the provision of statutory service provision, particularly in terms of prevention and keeping people well
- We need to work with public sector housing department and registered social landlords (including housing associations) to improve the housing options for people with ASCs and ensure that equalities duties are met.
- We need to ensure that a range of appropriate good quality services are available to individuals with ASCs and that information and support mechanisms are available for individuals to access these through their personal (individual) budget or other means.
- We need to give more support to individuals with ASCs to prepare for employment and work and to enable them to hold down a job. This includes social skills training and travel training

## FUTURE GOVERNANCE ARRANGEMENTS:

The statutory guidance for Local Authorities and NHS organisations to support the implementation of the National Autism Strategy requires the Director of Adult Social Services in each local authority to ensure that a joint commissioner or senior manager has a clear commissioning responsibility for adults with autism. **In Luton this will be the Head of Vulnerable Adults (joint post across LBC and NHS Luton).**

It is also suggested in the guidance that each area should consider the need to establish an Autism Partnership Board to oversee and direct the development of services.

Luton is a relatively small authority, it has therefore been decided that the implementation of the strategy will be overseen by a steering group. This will include representation from all key stakeholders. The group will link into the

existing structure of the Health and Wellbeing Board, Learning Disability Partnership Board and Mental Health Local Implementation Team

This joint strategy as a draft for consultation is subject to a twelve week period of public consultation and scrutiny beginning in February 2011. An accessible summary will also be produced.

## **ECONOMIC CHALLENGE:**

This strategy will be implemented during a time of financial constraint which means that resources will be limited and stretched. Any investments in new services and support systems will need to very clearly demonstrate that they are meeting key objectives for people on the autistic spectrum and their carers as well as being delivered in a cost effective and efficient way.

## JOINT COMMISSIONING INTENTIONS/ ACTIONS

Core Area of Activity identified in National Strategy/ Objective	Local Commissioning Intention/ Action	Action by (Responsible Body/ Named Lead and Date)	Projected cost / Cost Benefit Analysis
<p>1) Increase awareness and understanding of autistic spectrum conditions across public sector services</p>	<ul style="list-style-type: none"> <li>• Autism awareness training to be included in general diversity and equality training across health and social care (as well as other public sector services including housing, leisure, police, criminal justice system and emergency services)</li> <li>• Map out training needs against job roles and competencies to develop an appropriate tiered training programme for relevant key staff groups (GP's, Social Workers, Community Care Assessors, those in leadership roles etc). Training programmes to focus on how the condition affects people and should draw on personal experiences)</li> <li>• Specialised training to be provided for those in leadership roles and key staff groups (see above)</li> </ul>	<p>NHS Luton LBC- April 2012</p> <p>NHS Luton LBC SEPT April 2012</p> <p>NHS Luton LBC SEPT April 2012</p>	<p>Add on to existing training- no significant direct cost attached</p> <p>Some government funding will be available for training; the rest will come from existing training budget. Will need to cost out. This is a mandatory requirement of national autism strategy and should enable all agencies to provide timely, effective support to people with ASCs</p> <p>See above</p>
<p>2) Develop a clear, consistent pathway for</p>	<ul style="list-style-type: none"> <li>• Develop and publicise a local pathway for diagnosis (to comply with the forthcoming NICE guidance). This</li> </ul>	<p>NHS Luton October</p>	<p>No significant additional cost</p>

<p>diagnosis and assessment of needs</p>	<p>should be in the public domain and known to health and social care professionals and relevant parts of the third sector.</p> <ul style="list-style-type: none"> <li>• Work with local partners to explore and develop a local diagnostic and treatment service for all individuals with ASCs</li> <li>• Identify a lead professional to develop diagnostic and assessment services for adults with ASCs</li> <li>• Ensure that individuals with (suspected) ASCs are able to access a community care assessments and that individuals who meet the department eligibility criteria based on the “Fair Access to Care” Guidance receive appropriate input from the team most appropriately placed to meet their needs.</li> <li>• Ensure that all individuals with ASCs are able to access information about the condition and available resources and are signposted to appropriate sources of support (including individuals who do not meet FAC’s department eligibility criteria)</li> <li>• Develop a Vulnerable Adults Protocol. This will provide clear guidance in cases where individuals</li> </ul>	<p>2011</p> <p>NHS Luton and LBC October 2011</p> <p>NHS Luton and SEPT Sept 2011</p> <p>LBC and SEPT October 2011</p> <p>NHS Luton LBC SEPT October 2011</p> <p>LBC and SEPT</p>	<p>Costings to be drawn up. Funding will come from existing diagnostic budget</p> <p>No significant additional costs</p> <p>No significant additional cost</p> <p>Autism Beds will develop a resource directory costing £3K. This will be funded from Learning Disability Development Fund (LDDF). Should enable to access timely preventative type services</p> <p>No direct cost implication</p>
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	<p>met FAC's departmental eligibility criteria but it is not clear which team should take the professional lead. It should also provide guidance around the support available to vulnerable adults who do not meet the FAC's departmental eligibility criteria</p>	<p>October 2011</p>	
<p>3) Improved planning, commissioning and partnership working for adults with ASCs</p>	<ul style="list-style-type: none"> <li>• Ensure that Joint Strategic Needs Assessment (JSNA) includes data on adults with autism and that key agencies including LBC and SEPT collect and record more accurate data around number of individuals with ASCs and that this information is used to inform the planning process</li> <li>• Identify a Senior Manager who has a clear commissioning responsibility for adults with ASCs within their portfolio</li> <li>• Work in partnership with SEPT and third sector organisations to deliver appropriate services and support, including services of a preventative nature. This will include the development of an Autism Directory and exploration of Liaison Worker Post and Facilitation Post</li> <li>• Undertake a commissioning gap analysis and identify</li> </ul>	<p>NHS Luton LBC April 2012</p> <p>NHS Luton LBC July 2011</p> <p>NHS Luton LBC October 2011</p> <p>LBC and NHS Luton</p>	<p>No significant cost implication</p> <p>No significant cost implication</p> <p>Directory has been costed at £3k (funded by LDDF) Liaison Worker post would potentially be funded from the Carers Grant, pending review of carers services approximate cost £25k per annum. Facilitation Post to be funded from transfer of funds from another service closure</p> <p>No direct cost implication</p>

	<p>key commissioning priorities for individuals with ASCs. These should be reviewed annually.</p> <ul style="list-style-type: none"> <li>• Develop appropriate day opportunities for individuals with ASCs and ensure that the needs of adults with ASCs is fully incorporated in the day care modernisation process</li> <li>• Ensure that adults with ASCs who meet Departmental FACs eligibility criteria have access to personal budgets and are offered appropriate help to complete their support plans and broker support</li> <li>• Work in partnership with LBC housing department and registered social landlords to plan and explore future housing options for individuals with ASC's and ensure that allocation system is accessible and complaint with Disability Discrimination Act</li> <li>• Ensure that new Service Level Agreement for Advocacy and Service User Engagement makes specific reference to and includes ASCs in eligibility for advocacy service provision</li> </ul>	<p>April 2012</p> <p>LBC April 2013</p> <p>LBC April 2012</p> <p>LBC April 2012</p> <p>LBC Sept 2011</p> <p>NHS Luton</p>	<p>The Day opportunities element of an individuals care package is costed according to individual need in line with personal budgets. Day care Modernisation is expected to be cost neutral</p> <p>No direct cost implication</p> <p>No direct cost implication</p> <p>No direct cost implication</p>
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	<ul style="list-style-type: none"> <li>• Include within the NHS Standard Contract for Mental Health and Learning Disability Services specific reference to adults with autism. The contract should also demonstrate how reasonable adjustment for adults with ASCs is made.</li> </ul>	<p>LBC SEPT July 2012</p>	<p>No direct cost implication</p>
<p>4) Improved planning in relation to the provision of services to young people with ASC's as they move from being children into adults</p>	<ul style="list-style-type: none"> <li>• Review and improve the transitions experience for young people aged 14+ to enable individuals to access the services that they need at the start of adult life (ensure that processes are consistent with best practice)</li> <li>• Ensure that there is a clear pathway so that young people are appropriately referred to Adult Social Care for a Community Care Assessment and that Adult Social Care invites relevant individuals for an assessment</li> <li>• NHS bodies and foundation trusts should ensure that there are protocols in place for the transition of clinical mental health care for children with autism in receipt of CAHMS (includes signposting non eligible individuals to sources of support and information)</li> </ul>	<p>LBC October 2011</p> <p>LBC October 2011</p> <p>NHS Luton October 2011</p>	<p>No direct cost implication</p> <p>No direct cost implication</p> <p>No direct cost implication</p>
<p>5) Help adults with</p>	<ul style="list-style-type: none"> <li>• Explore the possibility of funding and setting up a</li> </ul>	<p>LBC</p>	<p>LBC in liaison with Shaw Trust.</p>

<p>ASC's into employment and work</p>	<p>Social Skills Training and Support group for individuals with ASC who are in work or wish to seek employment with third sector organisation(s)</p> <ul style="list-style-type: none"> <li>• Employment Workshop for Employers to include a specific autism session</li> <li>• Travel training to be made available for individuals with ASCs</li> </ul>	<p>October 2011</p> <p>LBC July 2012</p> <p>LBC April 2012</p>	<p>Training for 8 individuals would cost £24k- £12k from Shaw Trust, £12k from LDDF</p> <p>No direct cost implication</p> <p>No direct cost implication</p>
<p>6) Support and work in partnership with parents and carers of individuals with ASC's</p>	<ul style="list-style-type: none"> <li>• Ensure that parents and carers of adults and young people in transitions are aware of a right to a carers assessment</li> <li>• Explore the possibility of parents and carers participating in Autism training (both as experts by experience and attendees)</li> <li>• Work with the third sector to build up support and information networks for parents and carers of individuals with ASCs- this piece of work will be undertaken as part of the review and consultation on carers services</li> </ul>	<p>LBC July 2011</p> <p>LBC April 2012</p> <p>NHS Luton LBC October 2011</p>	<p>No direct cost implication</p> <p>Training to be costed</p> <p>Existing funding for carers services would be used</p>
<p>7) Ensure strong leadership in relation to the provision of services for adults with autism</p>	<ul style="list-style-type: none"> <li>• Appoint a lead professional to develop diagnostic and assessment services for adults with ASCs</li> <li>• Identify a Senior Manager who has a clear commissioning responsibility for adults with ASCs</li> </ul>	<p>NHS Luton SEPT October 2011</p> <p>NHS Luton</p>	<p>No direct cost implication</p> <p>No direct cost implication</p>

	<p>within their portfolio</p> <ul style="list-style-type: none"> <li>Set up Strategy Implementation/ Steering Group to oversee and review progress in implementing strategy</li> </ul>	<p>LBC April 2011 NHS Luton LBC and SEPT April 2011</p>	<p>No direct cost implication</p>
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## **APPENDIX 1: AUTISM STRATEGY WORKING GROUP**

### **TERMS OF REFERENCE**

#### **PURPOSE OF GROUP**

To support the development of an (adult) autism strategy for Luton within the context of the national autism strategy “Fulfilling and Rewarding Lives”: The Strategy for adults with autism in England (2010)

#### **MEMBERSHIP**

Group to include interested and relevant stake holders across Luton. Proposed membership is as follows:

Bridget Moffat, Planning and Development Manager- LBC  
Heena Yadav- Representative from Advocacy Alliance  
Representative from Probation Service  
Representative from Fire Service  
Representatives from Children’s Service- LBC  
Karen Malone- Mental Health Commissioner Luton PCT  
Diane Walsh – Carers Officer LBC  
Pauline Parr- Representative from Autism Bedfordshire  
Declan Jacob or Representative from Mental Health- South Essex Partnership Trust  
Milin Karale or clinical Representative from South Essex Partnership Trust  
Tracey Brennan- D4 Supported Employment  
Marcia Richards or Representative from Assessment and Care Planning Adult Social Care, LBC  
Representative from Dimensions, Specialist Autism Provider  
Representative from Supporting People

Input is also likely to be needed from GP practice, LBC training department and housing department and representatives from both departments will be invited to relevant sessions

## MEETINGS

It is proposed that group meet will meet for up to 6 sessions in the period between September and December 2010

## AREAS TO BE COVERED

In order to develop comprehensive strategy it is proposed that the group covers a range of areas covered by the national strategy including:

- Prevalence of autism spectrum conditions in Luton
- Has PCT and LA addressed autism in Joint Strategic Need Assessment?
- Levels of awareness of autism amongst social and health care workforce and wider workforce
- What specialist expertise and support do we have locally to support adults from across the spectrum?
- Is there a defined diagnostic pathway? Is there a local lead?
- How well do people on the autistic spectrum have their health care needs met?
- Are we commissioning the right services for people on the autistic spectrum?
- Is there a clearly defined referral pathway into adult social care? Are individuals falling through the net?
- Do employment, leisure and education services (and other public services) make reasonable adjustment to facilitate the inclusion of people with an Autistic Spectrum Condition?
- How well are local supported employment services helping people with an Autistic Spectrum condition into paid work?
- Are there barriers in accessing employment services and VTS?
- Are there gaps in employment/ education provision?
- Is advocacy accessible/ appropriate?
- Do people on the autistic spectrum have difficulty in accessing housing with appropriate support?
- Are those caring for people on the autistic spectrum able to access an assessment and appropriate support?
- Are any bespoke carers services required? Are we properly recording the number of carers caring for someone with an Autistic Spectrum Condition?
- Are people on the Autistic Spectrum able to access direct payments/ individual budgets?
- What information do we collect and how can we share this between services to inform planning?

It is proposed that these issues are covered in sessions as follows:

**Session 1- Thursday 16<sup>th</sup> September**

Overview of national strategy, general issues and gap analysis and prevalence of autism in Luton

**Session 2- Thursday 30<sup>th</sup> September**

Diagnostic pathway, clinical practice and programmes of care and support.  
Referral pathway in adult social care and issues for care management  
Good practice models e.g. Liverpool

**Session 3-Thursday 28<sup>th</sup> October**

Offending and antisocial behaviour- issues for the probation and fire service.  
Response of the (wider) public sector including housing. Housing needs of individuals on the autistic spectrum. Good practice examples – Dimensions.

**Session 4: Thursday 11<sup>th</sup> November**

Employment Issues, day opportunities

**Session 5: Thursday 25<sup>th</sup> November**

Key training issues, provision of advocacy for people for people on the autistic spectrum

**Session 6: Wednesday 8<sup>th</sup> December**

Issues for family and carers of individuals on the autistic spectrum  
Mop up session. Development of the strategy and key priorities

Additional meetings with individuals from the working group may also need to be arranged

BGM – 21/9/09