Purpose of Briefing Paper/Discussion Document

The purpose of the report is to:

- report to the Public Petitions Committee the views on the consideration of petition PE1704.

Summary of Recommendation(s)/Actions Required

That the information contained in the present response to reply to the Public Petitions Committee call for a considered response to the four points presented to the Committee (below) also be noted.

Background

The four points of consideration were presented to the Petitions Committee as follows:

- “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 12 months of the date of their initial referral”
- that children with autism in mainstream schools will have their assessed needs for classroom support met by an ASL assistant with a recognised autism qualification as part of a mandatory registration process for ASL professionals
- that young adults with autism will have a statutory right to specialist support from their local authority up to the age of 25
- that an Autism Act will be in place within the next five years to enshrine specific rights and services for autistic people in our legal system.”

Each specific bullet point will be addressed in turn.

Current Position

Bullet point 1 – current service standard timescales within NHS Lanarkshire (NHSL) are clear in that every person accepted as requiring an autism assessment will be seen within 9 -12 weeks. The most recent figures indicate that in 2017-2018 the following autism diagnoses were made:
Community Autism Service (CAS)
Local Community Autism Diagnostic teams were established in September 2014. These consist of a Community Paediatrician and an SLT or Health Visitor with specific further ASD training. The teams gather information from all professionals involved and observe the child in nursery/primary school. A clinic appointment allows the team to carry out specific activities to assess a child’s mix of skills and difficulties and take a detailed specific ASD case history form the child’s parents/carers. All this information is considered and used to reach a diagnostic conclusion. This process is developmental along the universal pathway of health care provision and is not a referral and diagnosis pathway with a dedicated guarantee or waiting time. The children will be seen initially via Speech and Language or Community Paediatric clinic lists. Community Paediatrics is not yet monitored on TRAK.

- at Q3 end, Speech and Language Therapy Waiting Times are 81.7% at 9wks and 94.5% at 12wks
- in complex cases the CAS teams can request assistance from their colleagues in the tertiary level Paediatric Autism Consultancy Team (PAC) team
- CAMHS are involved where there is a co-morbid mental health problem

4.2. Actions to Address Issues:
- a clinical group has come together recently to review the clinical diagnostic pathway from a Paediatric/Speech and Language Therapy, Health Visiting and CAMHS perspectives. The review will also attempt to outline the range of Health Services available and their role and limitations in the post diagnostic period of this lifelong pervasive condition which may require enhanced social and educational support.
5. **Autism Diagnosis**

5.1. There are currently no waiting times for children in relation to autism diagnosis, who are assessed as part of the universal pathway. As there is ongoing child assessment, the diagnosis is progressed over time and is not a stop/start process. Where autism spectrum disorder is suspected, the paediatrician and speech and language therapist work together to come to a diagnostic decision. If a child has a mental health issue as well, Child and Adolescent Mental Health Services would make the diagnosis.

5.2. The current waiting time for adults (those over 16 who have left school and are not being seen by CAMHS) for a diagnosis of autism is currently 16-20 weeks.

5.3. With regard to a 'statutory services assessment' from a qualified Social Worker, this implies that ‘as an integral part of this process’ parent carers of autistic children would waive their right to request assistance under Sections 22, 23 and 24 of The Children (Scotland) Act 1995, and have such an assessment imposed upon them after an autism diagnosis was made. Current legislation imposes a statutory duty upon the local authority to assess the needs of all children in need/affected by a disability under Sections 22 and 23 of The Children Scotland Act 1995 if requested to do so.

5.4. **Bullet point 2** – South Lanarkshire Council has invested heavily in creating a training model for both teachers and school support assistants that provides them with the skills and experiences to best support children with autism in mainstream schools and ASN provisions. These training opportunities have been recognised by organisations in the field as being very effective in skilling up staff. It would be our intention to continue to develop such training to meet the needs of a changing pupil population. This will always be part of how we respond to our duty to meet the needs of children in our establishments, however, it will not be based on creating a mandatory structure of training as such a system could have unintended consequences in terms of recruitment and retention of staff.

5.5. **Bullet point 3** – current legislation indicates that Corporate Parenting duties apply to young care experienced/looked after people up until they reach the age of 26. The implication that this should be generally extended to all autistic people would, in the first instance be something upon which the autism community itself should be consulted. Given the fact that the Micro Segmentation Report published in March 2018 by the Scottish Government concluded that over two thirds of Scotland’s autistic population did not have a co-morbid learning disability, the implication that being diagnosed with autism spectrum condition would automatically mean a person would be ‘corporately parented’ up until the age of 25 is something which many autistic people would find unnecessary and possibly intrusive. The current independent review of The Mental Health Legislation is evidence that autistic people and their parent carers object to generalisations relating to autism itself being broadly labelled as ‘mentally disordered’. A similar approach via Corporate Parenting could result in similar sentiments. However, where autistic people experience co-morbid learning disabilities or mental health problems, extended rights could prove to be supportive.
5.6. **Bullet point 4** – the current 10 year long Scottish Strategy for Autism, implemented in 2011 will expire in 2021. The reasons why specific autism legislation was discounted by the Scottish Government in 2011 centred on the conclusion that the specific rights of autistic people were already adequately encompassed within existing Equalities and Mental Health legislation. However, the specific rights of autistic people to autism informed supports and services has resulted in South Lanarkshire drafting a Local Autism Action Plan 2018-2023 which will address 15 key priorities identified by the South Lanarkshire autism community itself, and obtained after extensive consultations held between 2014-2017. The fact that specific autism legislation has been enacted in England since 2009 and Northern Ireland since 2011 would support the view that the UK autistic population does require specific services and supports. The remaining two years left of the Scottish Strategy for Autism would give ample time to consult on the question of legislation thereafter.

6. **Proposed Next Steps**

6.1. To set up five specific work streams to address and progress the key priorities and main themes which emerged following the South Lanarkshire autism consultation process, and subsequent launch of The Local Autism Action Plan 2018-2023. South Lanarkshire has also invested in the ARCH (Autism Resources Coordination Hub) a bespoke autism community hub, which will continue to be the focus of service development and strategic direction.

7. **Employee Implications**

7.1. Staffing within ARCH has been agreed and is ongoing.

8. **Financial Implications**

8.1. The funding of ARCH was agreed by the Social Work Committee in June 2018, and represents funding for a five year period from 2018-2023.