

**Thurrock Council
Adult Autism Strategy
2012-2015**

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Executive Summary

Context

Autism is a lifelong developmental disability, sometimes referred to as Autistic Spectrum Disorder (ASD) or Autistic Spectrum Condition (ASC). We have adopted the term Autistic Spectrum Condition. A spectrum disorder, by definition,

refers to people with a very wide range of needs. A significant proportion of people with autism will also have a learning disability (sometimes known as ‘low-functioning’ autism). At the other end of the spectrum there are people with ‘high-functioning’ autism, which includes Asperger’s Syndrome.

Recent years have brought new statutory duties to local authorities and NHS bodies through;

- The Autism Act (2009)
- Fulfilling and rewarding lives - the national strategy for autism (2010)
- Statutory guidance for implementing the national strategy (DOH Best Practice Guidance, Gateway 15204, 2010)

This Strategy covers Thurrock Council area and has been written in response to the above legislation and guidance. Initial consultation with people with an ASC and their family carers took place at a workshop on 24th July 2012 at The Beehive in Grays.

National and regional guidelines for the implementation of the Autism Act have formed the framework for the Strategy. It has been developed at a time of financial constraint, when it will be necessary to achieve outcomes by optimising the use of existing resources.

The need in Thurrock

The need for support for people with ASC conditions varies considerably. A significant number of people with ASC will also have a learning disability, and some will also have other disabilities (learning, physical and/or sensory disabilities). Some people will need 24 hour support. At the opposite end of the ASC spectrum, people with “high functioning” Autism/Aspergers Syndrome may need just a small amount of support or access to information, advice and guidance to enable them to live independently within their communities.

The exact number of people with ASC in Thurrock is not known, but estimates set the national prevalence at 1% (this is the incidence rate used in the national autism strategy). This gives an expected number of adults with ASC in Thurrock as 992. It is recognised that there are likely to be a number of adults with ASC who have not received a diagnosis. As young people with ASC reach the point of transition from Children's Services to Adult Services they are very likely to have an existing diagnosis, so the number of undiagnosed people in the population will decline in future years.

It needs to be noted that the ASC population in Thurrock is expected to rise significantly over the coming years. This is due not only to the population increase but the provision of a specialist school with an excellent reputation for work with children with autism. Some families with children with autism are moving into the area in order to gain a place at the school. This will have a direct impact on adult services when these children reach transition and adulthood.

Existing Services in Thurrock

Statutory services are currently delivered by the NHS and Local Authority, which provide support through either the Community Mental Health Teams, Community Learning Disability Team (Health) or Social Work Intervention and Transition Team and Locality Teams. A specialist Asperger's diagnostic service is also available through South Essex Mental Health Foundation Partnership Trust (SEPT).

The voluntary sector offers valuable but limited services and support for people with ASC and their family carers, some of these are provided across the Essex County Council border.

A full description of statutory and non-statutory current provision is within the strategy.

What the Thurrock Autism Strategy hopes to achieve.

The National Strategy focuses on five core areas of activity:

- Increasing awareness and understanding of autism among frontline professionals:

- Developing a clear, consistent pathway for diagnosis in every area, which is followed by the offer of a personalised needs assessment;
- improving access to the services and support which adults with autism need to live independently within the community;
- helping adults with autism into work, and
- enabling local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities.

The Thurrock ASC Strategy has been prepared with the aim of addressing these objectives.

Thurrock Strategic Priorities

The Goals for this strategy and the actions needed to achieve them are set out in the full Action plan

From consultation with local residents in July 2012, six priority outcomes were identified as follows: These are in line with the national strategy.

A: People have accessed appropriate health services.

B: People are in paid work or undertaking work related opportunities.

C: People are living in a range of accommodation and included in a range of activities in the community.

D: People have experienced choice and control in the planning and delivery of their individualised social care services.

E: People have had appropriately planned and supported transitions.

F: People have had supportive education and training opportunities.

There are a number of cross cutting outcomes which feature throughout as follows:

- 1) Both the community and professionals are aware of Autism and some have received specific training.

- 2) There are a range of networks for support throughout Thurrock.
- 3) Universal services have access to specialist support.
- 4) Specialist support is available to people with Autism.

These Thurrock priorities are in line with the National Strategy. These will be delivered through a three year action plan. During the life of the strategy we will continue to consult and invite feedback to ensure annual action plans reflect any changes to local or national priorities.

1. Introduction

Why do we need a Thurrock Autism Strategy

Adults with ASC and their families face many barriers in their everyday lives in accessing the support and services they require including:

- Their condition being misunderstood by professionals and society
- Difficulty with the support and services they need to live independently in the community
- Difficulties gaining long term meaningful employment.

The Autism Act 2009 required the government to develop a strategy for meeting the needs of adults in England with autistic spectrum conditions by improving the provision of relevant services to such adults by local authorities, NHS bodies and NHS foundation trusts.

That requirement was met by *'Fulfilling and Rewarding Lives: The Strategy for Adults with Autism in England 2010'*.

Statutory guidance for implementing the national strategy was also issued in 2010.

Thurrock Council has worked in partnership with Thurrock Coalition, our user led organisation to co-produce a local response to the national strategy and statutory guidance. Please see Appendix 1 for full details

This document :

- Identifies gaps in provision of services for people with autism and actions to address those gaps.
- Sets out how the commissioners in Thurrock will work in partnership to improve services for people with autism.
- Sets out relationships and responsibilities of statutory organisations and partners involved in service provision for adults with autism to make the best and most effective use of resources.

Thurrock Vision

The Council's Corporate Plan and Community Strategy sets a clear vision for Thurrock:

We want Thurrock to be at the dynamic heart of the Thames Gateway, a place of ambition, enterprise and opportunity, where communities and businesses flourish.

Our priorities within the community strategy are:

- improve the education and skills of local people
- encourage and promote job creation and economic prosperity
- ensure a safe, clean and green environment
- provide and commission high quality and accessible services that meet, wherever possible, individual needs
- build pride, respect and responsibility in Thurrock's communities and its residents

Our aim is to become a confident, well managed and influential Council regarded by residents, peers and partners as ambitious for the people of Thurrock and totally focussed on meeting their current and future aspirations.

Thurrock Council's vision and priorities reflect the philosophy of the National Autism Act.

2. Background

National and Local Policy Context

A number of significant national policies and reports have emerged that are relevant to provision of services to people with an Autistic Spectrum Condition, culminating in the first disability-specific act of Parliament, The Autism Act 2009.

In response to The Autism Act 2009, the Department of Health published *Fulfilling and Rewarding Lives* in March 2010, a National Strategy for Adults with Autism. This guidance sets out the following vision:

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

Statutory guidance for local authorities and NHS organisations to support the implementation of the act was subsequently issued in 2010.

National Prevalence

Given that there is no prevalence rate for ASD in adults, the figure for the whole population is a very rough guide, but we estimate that there could be over 500,000 people who have an ASD. (*National Autistic Society*)

It is estimated that autism affects 1 in 100 adults and in a survey conducted by the National Autistic Society, 63% of adults with autism do not have enough support to meet their needs (Rosenblatt, 2008).

There is widespread evidence that services provided by local authorities and health services are not always accessible. Adults with an Autistic Spectrum Condition can fall into the gap between learning disability and mental health teams, and this can be more problematic when local authorities and health services do not work closely together.

This is supported by a report by the National Audit Commission report identifying the difficulties in knowing if people have a recognised diagnosis

We are not confident that all people who may have ASD are recognised and recorded as having ASD.'

Local Authority Survey Respondent (Source: NAO)

What is Autism Spectrum Condition (ASC)

Autism Spectrum Condition (Autism) is the collective term for Autism, Asperger Syndrome, Atypical Autism and Pervasive Developmental Disorder – Not otherwise specified. Current thinking suggests that Autism is a lifelong developmental condition that varies in severity in its impact on individuals. The National Autistic Society defines Autism as: *a complex spectrum condition. People on the autistic spectrum experience three main areas of difficulty:*

They are difficulties with:

- Social communication (e.g. problems using 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)

As unique individuals, no two people with autism are the same. However, people with autism may show a strong preference for routine and rules, and some experience sensory sensitivity; for example in disliking loud noises. Around half of people living with autism also have a learning difficulty, and these people tend to receive a diagnosis of autism. Those with no learning disability have been referred to as having Asperger Syndrome, but impending changes in the definition of autism mean Asperger's as a term is being used less.

An inability to match self expectation and those of others can result in people who have autism but not learning difficulties experiencing other difficulties including anxiety and depression, especially if expectations cannot be achieved due to social limitations or lack of opportunity.

It can be difficult for professionals to recognise that a person has autism when there is no learning disability present, so the condition frequently goes undetected. Awareness of autism is poor, even amongst experienced health and social care professionals and mainstream services often struggle to provide appropriate support.

Whilst it is possible for people with autism to live fulfilling and rewarding lives, with family, friends and employment, many on the spectrum experience significant challenges, including:

- Economic exclusion and unemployment
- Inconsistency in the availability of services with a common experience of falling between services as autism does not fit the traditional inclusion criteria for mental health or learning disability services.
- Increased risk of homelessness
- Increased vulnerability to all forms of exploitation

3. Autism in Thurrock

Within Thurrock there is currently very little in the way of specialist community based or residential/supported housing services available for people on the autistic spectrum. This results in either people not accessing appropriate support, coming to the attention of mental health services or social care services at a later date and requiring in-depth support or going outside of the borough for specialist provision. This causes distress and problems to those families affected.

What is the level of need in Thurrock

There are no local sources of information that record incidence and prevalence of autism across Thurrock. 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 women (0.2%), and rates change slightly between different age groups.

It is recognised within the National Strategy that current best estimates are based on a small study, which had a secondary aim of developing a robust methodology.

A quote from the author reinforces the need to treat these rates with caution:

“This small base means that great caution is required in interpreting the population distribution of ASD (particularly among women).”

Brugha et al, 2007

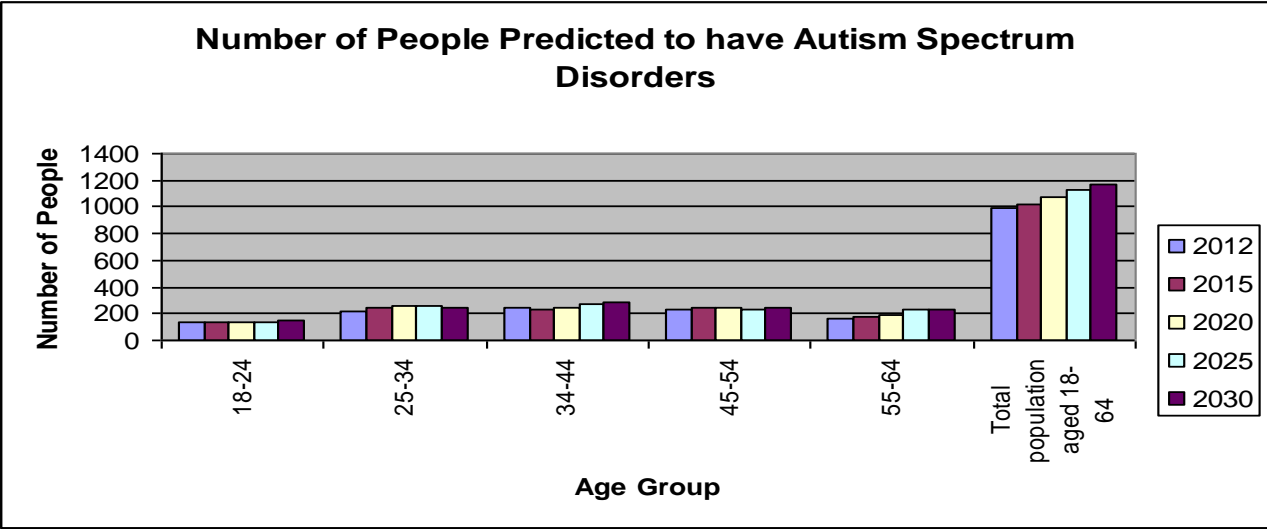
However, this study has been cited widely and in the absence of more accurate data, we have chosen these rates to estimate population of people with autism in Thurrock.

The following charts show the population by age and gender, and a key finding is the disproportionate number of males with autism. Again, it is worth viewing these findings with caution as these figures are based on the national study described above.

If we are to take the national prevalence rate in Thurrock, this equates to a predicted population of just under 1000 adults.

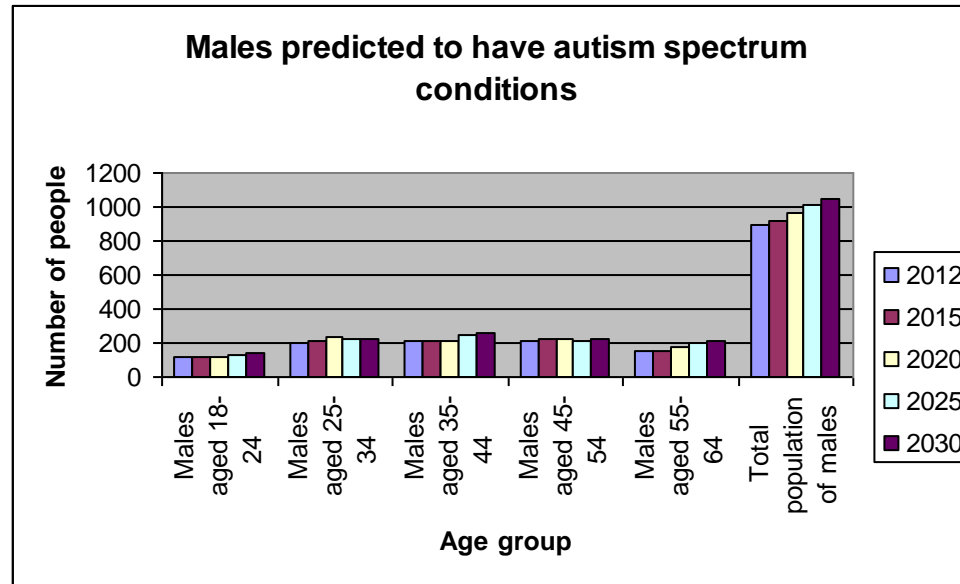
Using the data available from Projecting Adult Needs and Service Information System (PANSI) total population aged 18-64 predicted to have autistic spectrum disorders is 992 and this is set to rise.

Total number of adults in Thurrock predicted to have Autism Spectrum Conditions

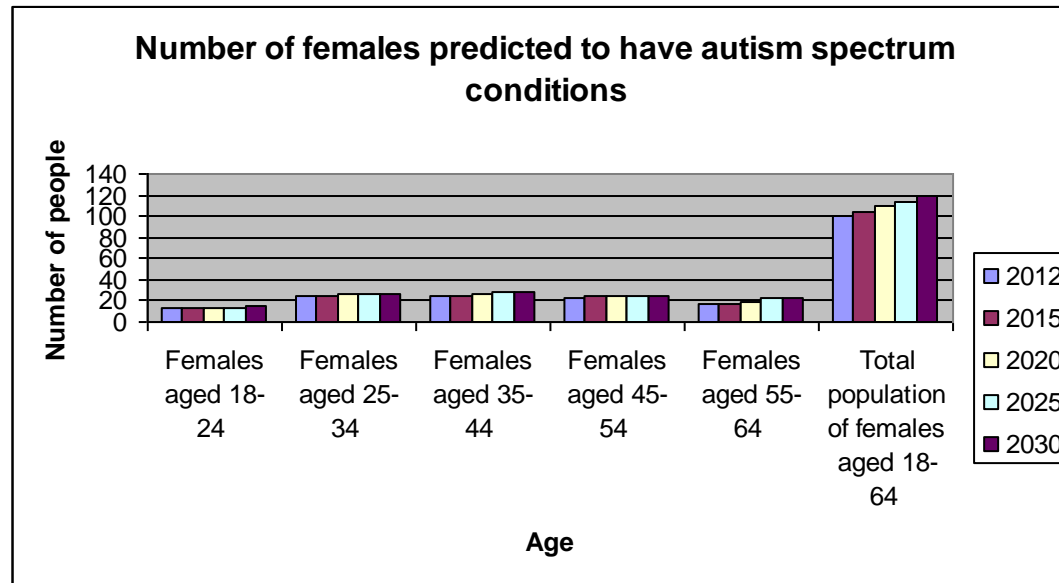


Conclusion 1: Available data indicates that total number of adults with autism in Thurrock area is 992 in 2012, with a projected increase to 1,170 by 2030.

Total number by gender – Males



Total number by gender – Females



Various studies, together with anecdotal evidence, have come up with male/female ratios ranging from 2:1 to 16:1. Whatever the true ratio, clinical referrals to a specialist diagnostic centre such as The National Autistic Society's Lorna Wing Centre have seen a steady increase in the number of girls and women referred. Because of the male gender bias, girls are less likely to be identified with autism, even when their symptoms are equally severe. Many girls are never referred for diagnosis and are missed from the statistics.

National Autistic Society (2011) identified the different way in which girls and women present under the following headings; social understanding, social communication, social imagination which is highly associated with routines, rituals and special interests. Some examples cited in the paper are:

- Girls are more able to follow social actions by delayed imitation because they observe other children and copy them, perhaps masking the symptoms of Asperger syndrome (Attwood, 2007).

- Girls are often more aware of and feel a need to interact socially. They are involved in social play, but are often led by their peers rather than initiating social contact. Girls are more socially inclined and many have one special friend.
- In our society, girls are expected to be social in their communication. Girls on the spectrum do not ‘do social chit chat’ or make ‘meaningless’ comments in order to facilitate social communication. The idea of a social hierarchy and how one communicates with people of different status can be problematic and get girls into trouble with teachers.
- Evidence suggests that girls have better imagination and more pretend play (Knickmeyer et al, 2008). Many have a very rich and elaborate fantasy world with imaginary friends. Girls escape into fiction, and some live in another world with, for example, fairies and witches.
- The interests of girls in the spectrum are very often similar to those of other girls – animals, horses, classical literature – and therefore are not seen as unusual. It is not the special interests that differentiate them from their peers but it is the quality and intensity of these interests. Many obsessively watch soap operas and have an intense interest in celebrities.

The difficulties in the diagnosis of girls and women arise if clinicians continue to use the narrow definitions set out in the International Classification Systems. It cannot be stressed enough that diagnosis and full assessment of needs cannot be carried out by following a checklist. Proper assessment takes time and detailed evaluation is necessary to enable a clinician to systematically collect information which not only provides a diagnostic label, but more importantly, a detailed profile of the person.

Many women with an autism spectrum condition are not being diagnosed and are therefore not receiving the help and support needed throughout their lives. Having a diagnosis is the starting point in providing appropriate support for girls and women in the spectrum. A timely diagnosis can avoid many of the difficulties women and girls with an autism spectrum disorder experience throughout their lives. (Dr Judith Gould and Dr Jacqui Ashton Smith Good Autism Practice, May 2011).

Conclusion 2: There is a disproportion in diagnosis between males and females. Because of male gender bias, females are less likely to be identified with autism. There may be a rise as gender diagnostic bias is taken into account

Transition from Childhood to Adulthood

A National Audit Commission report in 2009 recommended that the NHS and local authorities needed to do more to collect information on the numbers of people with autism who are receiving support from mental health and learning disability teams to begin to understand the extent that needs are being met (NAO, 2009). In terms of future demand, more should be done to analyse the number of pupils with statement of special educational needs and at school action plus who have autism and are approaching school-leaving age.

It should be noted that as well as being supported within mainstream schools, Thurrock has a specialist school that provides the Applied Behavioural Analysis (ABA) technique with children with ASC and learning disabilities. This has proved to be an extremely effective method of teaching and has resulted in some families moving into Thurrock in order for their children to access this valuable resource. This will have a direct impact on Adult Social Care when they reach transition and adulthood. It is therefore likely that the numbers of adults with ASC in Thurrock will rise significantly in the coming years.

Number of children and young people within Thurrock schools receiving additional support because of Autism Spectrum Conditions. Sixty children are supported within mainstream schools with 125 students within our specialist school.

Year Group	School Action +	Statemented	Total
R	8	10	18
N1			0
N2	4	1	5
1	1	10	11
2		13	13
3	5	6	11

4	2	15	17
5	1	12	13
6	1	13	14
7	2	16	18
8	2	16	18
8	1	21	22
9	3	10	13
10	6	10	16
11	3	13	16
12		7	7
13		3	3
14		2	2
Total	37	162	199

Conclusion 3: There is evidence to suggest that there has been an increase in families accessing specialist childhood provision within Thurrock. This will have a direct impact on Adult Social Care when they reach transition and adulthood.

Population growth and BME Groups

Thurrock's population is growing rapidly and becoming more diverse. The population at the 2011 census was 157,700. It is predicted to rise to 207,200 by 2033. There is no evidence to suggest that autism is more prevalent in any particular ethnic group but it needs to be recognised that the population of the borough is changing. School census data shows ethnicity in some schools with non white students at 22.7% and a shift in the largest BME group from Asian/Asian British to Black African. The number of National Insurance registrations within Thurrock by overseas nationals in 2011 was 1260 (DWP Dec 2011).

Conclusion 4: As the general population within Thurrock grows, the expected number of people with Autism Spectrum Conditions is also likely to rise. Within BME groups issues of attitudes towards autism need to be taken into account and culturally sensitive services need to be considered when implementing this strategy.

Summary of conclusions from Thurrock Data

Conclusion 1: Available data (predicted) indicates that the number of adults with autism in Thurrock is around 992, with a projected increase to 1170 in 2030. We currently do not have exact data of people with autism in Thurrock. One of our actions suggests, we need to get better at understanding our local numbers, thus moving away from estimates as much as possible towards empirically based local data.

Conclusion 2: There is a disproportion between the diagnosis between males and females. Because of the male gender bias, females are less likely to be identified with autism. There may be a rise as more effective diagnostic tools are utilised.

Conclusion 3: There is evidence to suggest that families are moving into the Thurrock area to access specialist childhood provision. This will have a direct impact on Adult Social Care when they reach transition and adulthood.

Conclusion 4: It is important this strategy does not overlook people with autism who come from BME groups and ensure that culturally sensitive services are considered.

Existing Services for People in Thurrock with an Autistic Spectrum Condition

This section maps out existing local service provision for adults with an Autistic Spectrum Condition in Thurrock. Services in Thurrock are provided by both the National Health Service and Local Authority. (Statutory Services) and the Independent and Voluntary sectors (Non Statutory Services)

Statutory Services Health

There is no separate structure for the delivery of autistic services within statutory organisations in Thurrock. Adults on the spectrum who have a learning disability are supported through the Community Nursing Learning Disability service and

those on the higher functioning end of the spectrum may be involved with the Community Mental Health Teams. South Essex Mental Health Foundation University Trust (SEPT) is the sole provider for Mental Health and Learning Disability health services in Thurrock.

SEPT Asperger's 18-30 Diagnostic Service

SEPT operate a diagnostic service for those aged 18-30. Access is via the Clinical Assessment Service or referral by a Psychiatrist. They do accept people aged over 30 if referred to the service by a Psychiatrist.

The assessment includes the use of the Diagnostic Interview for Social and Communication Disorders (DISCO). The DISCO is recognised by the National Autistic Society as a reliable assessment tool in the diagnosis of ASC.

This service is primarily a diagnostic service; however it does offer limited post diagnostic support such as psychology, family counselling and referral to voluntary sector groups.

Adult Social Care

Thurrock Adult Social Care provides assessment and support for adults and those coming through transition on the ASC and carers. The provision of services is dependent on Fair Access to Care (FACS) criteria. Thurrock continues to support those individuals who meet critical and substantial need. People meeting this criteria can be offered a commissioned service or more personalised support through a Direct Payment or Personal Budget.

Residential Services

There are currently no long term residential care or supported housing services specifically for autism in Thurrock. This results in people needing to move into specialist provision some distance away from their families and communities.

However, there are a number that are currently in development.

Sunnyside House, Aveyley.

Hathaway Road, Grays

Community Support

Thurrock Lifestyle Solutions TLS – Spectrum

Spectrum is a recently formed support group for adults diagnosed on the Autistic Spectrum.

Supporting Asperger's Families in Essex (SAFE)

Safe is a support group for people on the autistic spectrum and carers.

It was set up in 1997 by a group of parents of children with Asperger's. They provide parent support group meetings, run regular social skills training programmes, two adult support groups, two youth groups and social events for all ages.

SAFE campaigns for better services and understanding for people with Asperger Syndrome and their families around the county.

Please see Appendix 2 for mapping exercise undertaken by Thurrock Coalition

Training

Frontline staff acknowledge that their understanding of autism is limited. Whilst most professionals know something about autism, they do not necessarily understand how autism affects a person. This makes it hard for them to recognise autism and communicate appropriately. It also means they may have little idea how to adapt their behaviour or services

At the current time staff working across the Council and Private and Voluntary Sector have been able to access an on-line e-learning package provided through The British Psychological Society. This consists of three modules as follows:

- Building awareness of autism
- Supporting adults with autism
- Working with adults with autism

Recognising and having an understanding of autism is important and at present many staff feel they lack in these skills, for these reasons we have identified training as a specific workstream within this strategy as in line with the national strategy

Resources

Financial mapping and analysis

Our current expenditure on supporting people with ASC is £1,874.782.09 per annum.

This support is provided as follows:

Residential care – 20 people at a cost of £1,554,153.90

Short breaks – 1 person at a cost of £500

Homecare – 4 people at a cost of £60,644.42

Daycare – 4 people at a cost of £21,598.96

Transportation - 1 person at a cost of £1,016.79

Direct Payments – 14 people at a cost of £236,838.02

Where do we want to be

4. Ideal scenario

National vision and strategy

The National Strategy focuses on five core areas of activity.

- Increasing awareness and understanding of autism among frontline professionals
- Developing a clear, consistent pathway for diagnosis in every area, which is followed by the offer of a personalised needs assessment.
- Improving access to the services and support which adults with autism needs to live independently within the community
- Helping Adults into work, and
- Enabling local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities

Specific areas for action

Increasing awareness and understanding of autism

It is essential that at the very least, autism awareness training is available to everyone working in social care and those services in the voluntary sector who support people with autism. Without appropriate training, staff are unlikely to know how to adjust the way they deliver services.

Many professionals have some knowledge of autism and how to support people on with autism, but frequently admit their knowledge is severely limited in terms of how autism affects people. Poor understanding of autism amongst practitioners can lead to the condition being overlooked.

A further consideration for adults with autism is that many of the most effective advocacy and buddy schemes are delivered through the voluntary and social enterprise sector and volunteer groups, who have a real insight into the challenges faced by adults with autism. However, funding is often a significant issue for such groups which makes it hard for them to increase their capacity. Given how valuable these services can be for individuals, we believe that more should be done to support volunteer and third sector groups to deliver these kinds of services.

We aim to:

- Improve access to information for people with autism and their families
- Commission autism awareness training for front line staff in all areas

Improved access to diagnosis and assessment services

Adults with autism need to be able to get access to appropriate and timely assessment and diagnosis. This is not an ends in itself and needs to be linked to community care assessments to enable people to access support if they need it.

People who have complex needs associated with autism continue to be supported by community learning disability services. Clear pathways are needed and professionals need to be aware of these.

We aim to:

- Work with health colleagues to ensure clear pathways are in place from diagnosis through to assessment of need
- Improve the way the Council carries out eligibility assessments and reviews

- Ensure that carers are fully aware of the right to an assessment in their own right

Transitions

During transition a young person is on a gradual continuum from being a child being cared for, to becoming an adult, making decisions about their own life, with support, if necessary

The aim of the transition process is to minimise disruption, and to enable young people to realise their potential for independence.

We aim to:

- Ensure that statutory duties around transition planning are followed and the local area meets the minimum standards in transition planning. This strategy links to the recently developed transition pathway

Improved access to services: Facilitate independent living for adults

Following diagnosis, adults will be entitled to an assessment by Thurrock Council to establish whether they are eligible to receive services. The eligibility criteria is designed to ensure equity and consistency in the way resources are allocated across all groups of people.

We recognise that people with autism have not always been well serviced by the standard approach to assessment, as their needs may be masked by poor communication skills on the part of the person being assessed. We therefore have ensured that practitioners carrying out assessments within the locality team have access to a link worker who has specialist skills around ASC.

In line with the national social care policy of personalisation, people can now exercise choice and control about how their needs can best be met by contributing to their self directed support plan. For many people this includes managing a personal budget to purchase their choice of help and support services. We would like to see more people with autism taking up this opportunity.

Housing

People with autism have varying levels of support and housing needs with some being able to live completely independently.

Exercising choice and control over where and with whom we live with is a fundamental part of life and independence for most adults. We share this vision and our aim is to support people with autism to live as independently as possible.

Adults with autism need a range of living environments. Those who require intensive support have historically been referred to residential accommodation outside of Thurrock. Whilst this is still appropriate for some cases, others benefit from choice, control and independence with support, either alone or with others,

We aim to:

- Support people to access mainstream housing where they can have a tailored package of support from a provider of their choosing, using a personal budget
- Build on existing projects to enable people with autism to have access to mainstream housing and that suitable support staff have suitable training and awareness
- Offer people with autism the opportunity to live as independently as possible and to exercise choice and control
- Continue to encourage the development of a range of new and innovative housing options offering care and support

Employment

Only 15% of adults with autism in the UK are in full time paid employment, as opposed to 46% of all disabled people.

People with autism are capable of making a positive contribution to the work place and some people with the condition have traits that can make them particularly valuable to employers in specific roles. We aim to promote greater awareness amongst potential employers about these benefits, as well as making reasonable adjustments to achieve compliance with disability discrimination legislation.

People with autism need clear information and support in their journey to work.

We aim to:

Increase awareness to employers

Ensure access to supported employment opportunities

Improving the way we plan and prioritise services for adults.

Thurrock Council and NHS systems do not currently record information related specifically to autism. This shortcoming has been identified and the need to adjust these systems to enable information to be included has been actioned.

Through this process we will also seek to clarify how many people with autism also have additional conditions such as learning disabilities and or mental health difficulties.

We aim to:

- Improve collection and analysis of information and trends to clarify how many people in Thurrock have the condition
- In line with requirements of the autism act, we will continue to have a designated senior lead for autism to drive forward the strategic planning process.
- Explore a mechanism for adults with autism and carers to oversee the implementation of this strategy

SCIE therefore encourages local authorities to explore how to support volunteer and third sector groups in planning and commissioning services locally.

One key route to do this may be through working with user-led organisations for disabled people such as Thurrock Coalition.

5. Thurrock Goals

In July 2012, a workshop was held in Grays to begin to establish the scope of the strategy for Thurrock. This involved people with ASC, their carers, and professionals from health, social care and the voluntary sector.

One of the main aims of the day was to achieve a consensus around the outcomes that the local strategy should seek to achieve for people with ASC in Thurrock. These were identified as:

A: People have accessed appropriate health services.

B: People are in paid work or undertaking work related opportunities.

C: People are living in a range of accommodation and included in a range of activities in the community.

D: People have experienced choice and control in the planning and delivery of their individualised social care services.

E: People have had appropriately planned and supported transitions.

F: People have had supportive education and training opportunities.

There were a number of cross cutting outcomes which feature throughout as follows:

- 1) Both the community and professionals are aware of Autism and some have received specific training.
- 2) There are a range of networks for support throughout Thurrock.
- 3) Universal services have access to specialist support.
- 4) Specialist support is available to people with Autism.

All of the above outcomes were mentioned in the National Autism Strategy and they will form the basis of the Thurrock Autism Strategy.

These areas were selected as it was considered that access to a diagnosis was key to enable people to be assessed/signposted for future support; having trained staff across agencies would help with accessing key services such as housing and healthcare; increased public awareness would ease and promote integration into mainstream education, employment and leisure; specialist housing and employment support would address two key areas of peoples' lives.

How are we going to get there

6. Core strategy

There is no existing separate structure for services for people with ASCs in Thurrock. Therefore we will use existing structures to take this work forward.

The action plan is included and progress on its actions will be regularly tracked by The Disability Board and agreed mechanism to include adults with autism and their carers.

There is the need to focus on building capacity and capability at local level to enable local partners to develop relevant services for adults with autism to meet identified needs and priorities

The key areas that have been identified for further work in Thurrock are set out below. The following are a combination of the 7 priorities identified by the Dept of Health in the Implementing Fulfilling Lives document and the areas of work that have been agreed locally.

- The provision of services for the purpose of diagnosing autistic spectrum conditions in adults
- The identification of adults with autism
- The assessment of the needs of adults with autism for relevant services
- Planning in relation to the provision of relevant services to young people with autism as they become adults
- Planning in relation to the provision of services to adults with autism
- The training of staff who provide services to adults with autism
- Local arrangements for leadership in relation to the provision of services to adults with autism

How will the strategy be implemented

7. Implementation

Disability Board

The Disability Board exists to improve the lives of people with disabilities including those with ASC. This is a multi agency board with wide representation of both people with a disability and professionals working alongside them. There needs to be an exploration of how to best ensure that people with autism and carers are able to input into this strategy and oversee its implementation.

8. Resources

There are no additional separate funding streams for autism services as they are included within mental health and learning disability expenditure.

9. Action Plan

This action plan is based on both the National Strategy and local outcomes that Thurrock residents highlighted during consultation.

National and Local Frameworks

To increase awareness and understanding of autism amongst frontline staff across the whole council					
To develop a clear consistent pathway for diagnosis, which will be followed by the offer of a personalised needs assessment					
To plan in relation to the provision of services to people with autism in transitions					
To enable local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities					
People have accessed appropriate health services	People have experienced choice and control in the planning and delivery of their individualised	People have had appropriately planned and supported transitions	People are in paid work or undertaking work related opportunities	People are living in a range of accommodation and included in a range of activities in the	People have had supportive educative and training opportunities

	social care services			community	
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The following cross cutting themes are included in each of the Thurrock outcomes

Both the community and professionals are aware of Autism and some have received specific training	There are a range of networks for support throughout Thurrock	Universal services have access to specialist support	Specialist support is available to people with Autism	Information about individuals is communicated and shared appropriately	There is specific advice, information and advocacy available to people with autism
National Priority	Local Outcomes	To deliver the action	Key tasks	Who is responsible	When will this be achieved by.
To increase awareness and understanding of autism amongst frontline staff across the whole council	Both the community and professionals are aware of Autism and some have received specific training	Training programme	<p>Ensure autism awareness training is available to all staff working in social care.</p> <p>Provision of specialist training for those in key roles that have a direct impact on access to services for adults with autism.</p> <p>Increase access to information and advice for people with autism and their families</p> <p>Improve awareness of autism in the general population and with</p>	<p>Workforce Development Team</p> <p>Commissioning</p>	<p>August 2013</p> <p>September 2013</p> <p>September 2013</p>

			employers Identify other agencies where training would increase access for adults with autism	Disability Board	Ongoing
To develop a clear consistent pathway for diagnosis, which will be followed by the offer of a personalised needs assessment	People have accessed appropriate health services	Work with health colleagues on pathways	Staff across health and social care receive autism awareness training so that they are better able to identify potential signs of autism.	Workforce planning within health and social care	August 2013
			Identify a clear pathway for diagnosis of autism, from initial referral through to assessment of needs	Health and Social care commissioners	September 2013
			Ensure that all relevant local organisations understand what the pathway to diagnosis is.	Health and Social care commissioners	October 2013
			The NHS body providing healthcare services to the adult informs, with the individuals consent, the relevant local authority adult social care	Health and Social care commissioners	January 2014

			<p>department promptly to ensure that a community care assessment can be carried out within a reasonable time period if the individual wants an assessment</p> <p>Improve the way that the local authority carries out eligibility assessments and reviews by ensuring staff are competent in carrying out assessments</p> <p>Ensure that carers of people with autism know they are eligible to have their needs assessed through a carers assessment.</p>	<p>Operational service managers</p> <p>Carers strategy officer</p>	<p>January 2013</p> <p>April 2013</p>
To plan in relation to the provision of services to people with autism in transitions	People have had appropriately planned and supported transitions	Ensure suitable transition arrangements are in place	Professionals working with young people with autism approaching transition should inform the parent and young person of their right to a community care assessment and inform	Operational Service Manager/Education	August 2013

			carers of the right to a carers assessment. Statutory duties around transition planning are followed. Links with Thurrock Transition Plan	Transition lead	April 2013
To enable local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities	People are living in a range of accommodation and included in a range of activities in the community	Data collection and commissioning	Allocate responsibility to a named joint commissioner/senior manager to lead commissioning of community care services for adults with autism	Head of Commissioning	2011
	People have experienced choice and control in the planning and delivery of their individualised social care services		Map local need and identify gaps to be addressed by future commissioning of services. Reduce dependence on out of area services by developing local market	Commissioning	September 2013
	People have had supportive education and training opportunities		Improve collection and analysis of information	Service Manager, Performance, quality	April 2013

			<p>and trends to clarify how many adults in Thurrock have autism.</p> <p>Explore the role of community and voluntary groups in delivering services to meet the needs of adults with autism, their families and carers.</p> <p>Ensure that adults with autism are able to access personal budgets and benefit from personalisation.</p> <p>Providers of mental health and learning disability services are recommended to ensure reasonable adjustments to service delivery</p> <p>Explore establishing a local autism group or method of communication to ensure that the views of people with autism and carers are taken into</p>	<p>and Information</p> <p>Commissioning</p> <p>Operational Service manager</p> <p>Health commissioning</p> <p>Commissioning</p>	<p>September 2013</p> <p>September 2013</p> <p>TBC by health</p> <p>June 2013</p>
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			<p>account when developing and commissioning services for adults with autism.</p> <p>Ensure that housing staff have suitable training and awareness on ASC which will assist access to mainstream housing</p> <p>Review current supported employment options ensuring relevance to people with ASC.</p> <p>Ensure access to advocates who have knowledge of ASC</p>	<p>Workforce planning and development</p> <p>Commissioning</p> <p>Commissioning</p>	<p>TBC</p> <p>April 2013</p> <p>August 2013</p>
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How will we know when we are there?

10. Monitoring

In line with policy guidance, it is proposed that progress in the implementation of this strategy and the future development of detailed joint commissioning plans, should be overseen by the Disability Board. There may be a possibility of an autism group set up which will also monitor this strategy

11. Review of the strategy

This strategy will be reviewed throughout its lifetime to ensure relevance and ensure it includes any developing national policies or drivers.