## HEALTH AND WELLBEING BOARD

# 7 July 2015

Title: Children's Service Draft Autism Strategy 2015-2018	
Report of the Corporate Director of Children's Services	
Open Report	For Decision
Wards Affected: All	Key Decision: No
Report Authors: Jacqui Twitchell-Inclusion Adviser-Autism Lead Joy Barter –Group Manager Early Years and Childcare Sponsor: Helen Jenner, Corporate Director of Children's S Summary:	Contact Details: Tel: 020 8227 5533 E-mail: joy.barter@lbbd.gov.uk
<ul> <li>The Children's Autism Strategy has been developed to align with the Adults' Autism Strategy. Its key driver is to ensure that children and young people receive support that is consistent and appropriate for their age and to enable a smooth transition into adulthood. The strategy sets out what Barking and Dagenham will do to ensure autism friendly services and provision that meets the needs of all children and young people. This includes: <ul> <li>increasing awareness amongst professionals and the wider community</li> <li>providing the highest quality provision for autism;</li> <li>promoting inclusive and multi-disciplinary practices;</li> <li>provision of a range of educational opportunities from quality first teaching in</li> </ul> </li> </ul>	
<ul> <li>mainstream classrooms to more specialist provision within Additional Resourced Provision or within Trinity School;</li> <li>ensuring a clear and effective diagnostic pathway for autism with advice and information easily available and accessible;</li> <li>involving families, children and young people in education and planning for the future.</li> </ul>	
<ul> <li>The strategy has six priority areas which have been developed to ensure that children and young people with autism and their families are able to:</li> <li>have their views, aspirations and their voices heard;</li> <li>be involved in provision planning;</li> <li>be kept safe;</li> </ul>	
<ul> <li>have access to meaningful activities during the day, weekends and in the evenings;</li> <li>be certain that professionals working with them are fully trained and understand the needs of children and young people with autism;</li> <li>have a clear transition plan for the future as children and young people move into adulthood;</li> </ul>	
<ul> <li>access clear advice, support and information through a range of partners and providers other than the council.</li> </ul>	

## Recommendation(s)

The Health and Wellbeing Board is recommended to agree:

1. The overall Autism Strategy and in particular the six key priority areas

### Reason(s)

The Children's Autism Strategy supports Enabling Social Responsibility - one of the Council's key priorities.

## 1. Introduction and Background

1.1 The original Children's Autism Strategy Group was established in 2002 in order to bring together the service providers for children and young people with autism and their families. Its remit was to agree and set out a consistent offer and approach for supporting children and young people with autism from the early years through to the end of the secondary phase. This was in response to the growing numbers of children and young people receiving a diagnosis of autism. Initially a five year plan was agreed. Representatives from health (speech and language therapists and paediatricians) plus colleagues from social care, education, schools and the voluntary sector were all involved. This group (which has continued to meet termly) has been responsible for promoting autism awareness, developing a consistent approach to support within educational settings and a comprehensive training programme for all practitioners working with children. This refreshed Autism Strategy is now aligned to the Adults' Strategy-which has been agreed by the Health and Wellbeing Board- and to the statutory requirements of the Children and Families Act.

## 2. Proposal and Issues

2.1 It is proposed that the Health and Wellbeing Board agree the Children's Autism Strategy and endorse the six priority areas as set out in Appendix A.

## 3 Consultation

- 3.1 The following partners have been involved in developing this strategy:
  - Early Years
  - Education
  - Schools (Trinity, John Perry and George Carey)
  - Voluntary Sector (Sycamore Trust)
  - Social Care (Disabled Children's and EHC Teams)
  - Parents' Groups
  - Health (paediatricians and speech therapists)
- 3.2 Further consultation is planned with all schools, wider parents' groups and early years settings.

## 4 Mandatory Implications

4.1 Joint Strategic Needs Assessment

Autism has a dedicated section in our JSNA that has been refreshed. The strategy is consistent with the strategic recommendations.

The proposals in the Autism Strategy support Section 2 and 3 of the JSNA. In particular Section 3.2 **Children and Young People with Learning Difficulties and Disabilities.** The 2011 Census found that just under 5,000 households in the borough include children and at least one person with a long term condition or disability, but there is no census data on the number of children living with learning difficulties and disabilities (LDD).

There are several sources of data on the local uptake of services by children and young people living with LDD, and modelling has been refreshed to estimate the level of need in the borough.

The JSNA made the following recommendation:

#### **Recommendations for Commissioners**

The Health and Wellbeing board will need to ensure that there is a robust programme and strategic plan in place to meet any emerging statutory responsibilities that are outlined within the current Children and Families Bill.

#### 4.2 Health and Wellbeing Strategy

The commitments set out in the Health & Wellbeing Strategy are consistent with the priorities identified in the Autism Strategy. The refresh of the Joint Health and Wellbeing strategy in March 2015 will note the key themes of this strategy.

The proposals support the Health and Wellbeing Strategy Themes 1 - 5 and 8 in particular, but should also support Themes 6 and 7 as better early support should enable established adults and older adults with Autism to lead more fulfilled lives.

The priority areas of care and support; protection and safeguarding; improvement and integration of services and prevention will all be addressed through the strategy. Future reports will evidence how the work is addressing these priorities.

#### 4.3 Integration

This Autism Strategy has integration at its heart and a key theme for the strategy is ensuring integrated approaches that make pathways for children and young people with autism more straightforward, specifically aiming to ensure a consistent approach to support and information.

#### 4.4 Financial Implications

There are no financial implications from this report and resources will be supported from the earmarked general fund budget of £1.250m 2015/16 and SEN(D) support from the Dedicated School Grant, High Needs Block funding £17m.

Implications completed by: Patricia Harvey, Group Manager Finance - Childrens Services

## 4.5 Legal Implications

Meets the requirements of:

- Children and Families Act
- Care Act
- Disability Acts
- Autism Bill 2009

Implications completed by: Lindsey Marks, Principal Solicitor Children's Safeguarding, Legal and Democratic Services)

#### 4.6 Risk Management

If the strategy is not implemented there are a number of key risks:

- By not providing inclusive provision for our children and young people with autistic needs we place them, and their families, at risk of social isolation.
- By not providing inclusive provision our children and young people with autistic needs have to be placed in specialist provision, whether or not this is the best placement for them, often not in their immediate neighbourhood and at greater expense and a consequently a reduction of choice available to them and their families.
- Without good transition plan there is a risk that children and their families experience a "cliff-edge" as they move between childhood and adulthood services.
- If our strategies do not move children towards as much independence as possible we are not preparing them to be citizens of the future, potentially leading to lifelong dependency, rather than fostering alternatives.
- Without additional care being taken there is a risk that autistic children are not fully protected from safeguarding risks.

#### 4.7 Patient/Service User Impact

The Children's Autism Strategy will help address the concerns of children, young people parents, families and agencies working with those with autistic needs about provision for autism and support a better transfer from children's to adult services.

#### 5. Non-mandatory Implications

#### 5.1 Crime and Disorder

The Children's Autism Strategy will work towards ensuring a better range of leisure services for those with autistic needs and will link to the Adult Strategy.

#### 5.2 Safeguarding

There are significant safeguarding risks for children on the autism spectrum which this strategy is designed to address. The "be kept safe" priority specifically addresses safeguarding. The whole strategy is designed to strengthen community knowledge, understanding and flexibility to give children with autistic spectrum better, safe access to a wider range of opportunities enjoyed by their peers.

#### 5.3 Property/Assets

As part of meeting the needs of children on the autistic spectrum property/assets should always consider disability when designing public buildings. The Borough accessibility strategy supports adaptations to improve access to schools and other public buildings.

#### 5.4 Customer Impact

The Strategy will ensure a seamless approach to services for those with autism.

#### 5.5 Contractual Issues

All contracts issued to providers of services will be expected to ensure autism friendly services and be able to meet the needs of those with autistic needs.

#### 5.6 Staffing issues

The Children's Autism Strategy, and related training, should be accessed by all staff so that needs and opportunities are recognised through universal services, not just in specialist services.

## Public Background Papers Used in the Preparation of the Report:

- Barking and Dagenham Health and Wellbeing Strategy 2012-2015
- Joint Strategic Needs Assessment 2013-2015
- Autism Bill 2009
- Adults Autism Strategy Refresh 2014

## List of Appendices:

Appendix 1 – Final Draft Children's Autism Strategy