

Please note that the information contained in the following document is now out of date:

**PARENT PARTNERSHIP
SERVICE**

**Shropshire and Telford & Wrekin
Autism and Asperger's Syndrome**

Please do not use the contact details and telephone numbers.

Thank you

CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

Minutes of a meeting of the Children and Young People Scrutiny Committee held on Thursday 19th April 2012 at 6.00 pm in the Scrutiny Meeting Room, Civic Offices, Telford

PRESENT: Councillors G Green (Chair), S Burrell, J Greenaway, M. Ion, C Turley

Co-optees: Mr A Atkinson

Officers: Jim Collins (Assistant Director: Education, Culture & Skills); Clive Jones (Assistant Director for Family & Cohesion Services); Guy Kershaw (Project Director for BSF); Christine Marsh (Service Delivery Manager- Early Intervention); T Clarke (Scrutiny Officer).

CYPSC-45 MINUTES

RESOLVED – that the minutes of the meeting of the Children and Young People Scrutiny Committee held on 26th March 2012 be confirmed and signed by the Chairman.

CYPSC-46 APOLOGIES FOR ABSENCE

Councillor A Mackenzie, J Loveridge
Co-optee: Dr S Ali, Ms M Ward and Ms E Ofori

CYPSC-47 DECLARATIONS OF INTEREST

None

CYPSC-48 BSF UPDATE

The Project Director explained that the Building Schools for Future (BSF) update would be delivered in two parts, firstly by himself Guy Kershaw Project Director and secondly by Jim Collins Assistant Director of Education, Culture & Skills who would update Members on the consultation of the Secondary School provision under the BSF programme.

The Project Director for Building Schools for Future (BSF) gave a verbal update to the Committee Members on the progress of the BSF project.

- The new canopy had been put in place at the Abraham Darby School and the internal work for the school has started.
- The Primary school and Leisure centre had successfully been completed and all minor problems had been resolved.
- Traffic and parking issues had caused annoyance with the local neighbourhood and yellow lines had been put in to resolve this. The Head had been acting as a traffic warden to ensure the safety of the children and a pedestrian crossing has been added to the project.
- The School handover date was 25th June 2012 and the official opening would be 7th July 2012. The project was due for completion in December 2012.

- Residents of Canonbie Lea had experienced flooding before Christmas and a request had been received to check the level of the playing fields. An independent surveyor had been appointed to complete this work and the drainage engineer will speak to the residents and the landscape architect to ascertain what can be done to resolve the issue of flooding.
- At the Phoenix School, Kier Moss had erected the site cabins and the piling was due to start on 30th April. The proposed completion date had been set as September 2014.
- At the Newport Girls' High School the demountable structures are due to be replaced during the Summer holidays.
- Work commenced on the 1st April to build the skills centre at the back of the Mount Gilbert school.
- The procurement process for Ercall Wood had nine bidders apply and of these two have been shortlisted. These preferred bidders will be informed next week and will compete on the design of the Ercall Wood School over the next eight to nine weeks. The aim will be for the project to build the new school to be started in November.
- Following the appointment of the preferred Ercall Wood bidder in early July, the remainder of the programme would be taken forward. If necessary, the remainder of the programme could be accelerated to ensure that completion takes place as early as possible.

Members asked the Project Director of the BSF a number of questions.

When will the HSE report be available?

The Project Director explained that in the interim it was unlikely that the Council would have access to the report to ensure that there would be no prejudice in the event of a future prosecution taking place.

How are we going to reassure the parents that there is no danger of injury from the new canopy?

Safety checks have been carried out on the Primary School and the Leisure centre and everything has passed the required standards. The new canopy design is supported by 7 columns rather than the previous design of 1 column. There are ongoing safety checks which will continue to take place until the school is handed over in June.

Was the flood identified as a risk at the start of the development?

Following a heavy downpour in October/ November 2010 residents of Canonbie Lea experienced flooding. At the time, this was attributed to the fact that the site drainage had not been completed and the water off the fields and the temporary car park ran into the residents gardens. Following this incident full drainage and additional drainage to the standard of a 100 year event and an additional 30% volume has been constructed and approved by the Telford & Wrekin Council engineers. A CCTV report had been commissioned as part of this work to ensure that there were no blockages in the drains.

Members suggested that residents on the periphery of new developments would benefit from having a separate meeting with Council Officers prior to the residents meeting to raise their individual issues with the project.

The Project Director explained that the Council would be working with residents to resolve local issues as each project commenced, for example working with the residents of Golf Links Lane on the existing parking issue around the Ercall Wood School.

Is it possible to confirm the number of secondary school places in the Borough?

There would be 12,500 school places across the Borough, which has been calculated to take into account the proposed new developments plus 3.5%.

The Assistant Director for Education, Culture & Skills gave a verbal report to Members.

The results of the consultation were:

- The Faith School received 6 positive responses, 9 negative responses and 37 general concerns
- The move from the current Charlton site to the site of the BRJ received 16 positive responses and no negative responses
- The merger of the Sutherland and the Wrockwardine Wood School 2 negative responses, 7 general concerns and 1621 negative photocopied letters which were from either teachers, children or parents.
- Lord Silken School 9 positive responses, no negative responses.

A number of key concerns had been raised during the consultation and the Assistant Director for Education explained to Members what had been done to address these concerns.

- The consultation was extended to accommodate the diocesan engagement with the parishioners regarding the Faith School in Priorslee and to clarify the transport arrangements for the children already attending the Blessed Robert Johnson (BRJ) school and their siblings.
- An analysis of projected pupil numbers was provided to the Diocesan partners which demonstrated that the reduction in the size of the Faith school from 1050 to 900 would still provide ample places for those seeking a place on the grounds of faith.
- The dioceses were also informed that the contract for each project included the option to add extra classrooms onto the schools accommodating 150 pupils should the number of pupils rise in the future.
- Following the consultation, the original provision for places, had been increased at the new Oakengates Leisure Centre site school from 1050 to 1200 to accommodate the current projected numbers for pupils attending the school. The parents and staff from the Wrockwardine Wood and Sutherland Schools acknowledged that they wanted the lessons from a previous merger to be taken into consideration in this merger.
- The third concern raised by the residents of Salisbury Avenue was the site of the new Faith school. The proposed sites were initially the site owned by Ricoh, the site on Salisbury Avenue and the old Celestica site by the lake. To assist in the decision making, representatives of the Priorslee Action Group had been invited to meet officers to discuss their concerns. Since the start of the consultation the Ricoh site was no longer available and the preferred site is the site to the right of

the Garden Centre on Salisbury Avenue. As part of this proposal a traffic survey would be completed.

- Engineers had been asked about the potential to put the Southall School onto the site of the Lord Silkin, but the site analysis highlighted that it would not be large enough to fit all the schools and the skills centre together.
- The 16+ Centre based at the Lord Silkin School was considered a necessary part of the regeneration assisting in tackling unemployment in Brookside and Stirchley.
- The Head of Southall School had been assured that Southall School would continue to be developed as an important part of the programme, although it could not be amalgamated onto the same site as a mainstream school.

Following the report, a number of issues were raised by Members:

Sue Harris the Headteacher at the Shortwood Primary School had raised the issue of ensuring that the consultation takes place with the primary schools that feed into the proposed new secondary schools.

All feeder schools had been invited to take part in the consultation and 11,000 invitations were sent to parents.

The Committee had previously recommended that the Headteacher's and staff did not lead the consultation meetings. Has this been taken into consideration for the next phase of the consultation?

This has been taken into consideration and all meetings had since been led by Council Officers.

There have been concerns raised that the people who have taken part in the consultation have not received feedback.

The staff at both the Wrockwardine Wood and the Sutherland Schools are both onboard with the merger and the school now needs to market its vision for the future.

As areas are developed and pupil numbers increase, at what point does the project receive more money from the government to support the rising pupil numbers?

The current projections allow for the housing developments up until 2018 plus an additional 3.5% of children. Also there is already a reduction in revenue for primary aged children so there would not be an increase in the money available to the Council.

Can academies dictate the numbers of pupils they enrol?

The academies are able to dictate the number of pupils they accept which could be a problem if school places have been projected. However, we have maintained good relationships with the academies and will continue to work to do so.

What is the split between the age ranges for the Faith school?

There will be places for 750 pupils aged 11-16 years and 150 sixth form places.

How many year 6 pupils are eligible to go to the Faith School and will there be enough places if all the pupils from Priorslee Primary and Redhill Primary want to attend?

Having assessed previous trends only about 50% of the pupils from the Priorslee would be applying to attend the Faith School. However, as with all BSF schools should the pupil numbers increase in the future then the school could be extended as part of the brief that the developers have received to design buildings with the potential to expand.

While it is superb that the Faith school will have post 16 provision and it is understood why there is no post 16 provision on the Oakengates Leisure Centre site, it is still a concern that there is no post 16 provision at Oakengates.

The reason that there is no post 16 provision at Oakengates is that the site could not accommodate 16 + provision.

RESOLVED

That the Assistant Director for Education, Culture & Skills provides an update to the Committee in 6 months time.

CYPSC-49 CHILD POVERTY

The Service Delivery Manager for Early Intervention updated Members on progress made following the workshop in October and highlighted that child poverty is the symptom of something else that is happening to the child or the family which could be one or a number of factors such as low aspirations, the community that they live in, failing to engage in school or financial difficulties.

- The Assistant Director for Family & Cohesion Services said that the Council would be using the principles of the Government's Social Justice Strategy to tackle worklessness, family poverty, education issues, drug or alcohol dependency and debt.
- A Strengthening Families Task Force had been set up to oversee early intervention projects aimed at improving life chances by supporting families to reduce their need to access more costly personalised intervention, such as child protection.
- The Service Delivery Manager for Early Intervention reiterated that part of the early intervention is to strengthen existing projects supporting families by engaging with communities and exploring ways of creating community ambassadors.
- The Woodside & Sutton Hill Family Groups had existed for over 20 years and had continued to flourish. Telford & Wrekin Council had continued to support the Family Groups in partnership with the Children's Centre for the last 8 years. The Family Groups had provided a necessary contact into the community which had led to families who needed support then going on to trust the Council and be able to gain access to more services. The difficulty in the current climate for small groups was to identify funding opportunities as lottery funding is normally accessed by larger groups..
- A need had been identified to strengthen the bid writing capacity of small groups involved in early intervention. A brief had been put together to help enable groups to bid for funding as not-for-profit organisations.

- In the recent allocation of early intervention funding several bids were received and a combined bid from the Woodside/ Sutton Hill groups and Home Start allowed them to meet the funding criteria.
The funding amount received by the Sutton Hill group will be lower than previously but they will continue to engage with the hard to reach communities but with a narrower range of services.

The Assistant Director for Family & Cohesion Services gave the Members an update on what has happened since December's meeting.

- The service restructure had been completed and a new approach was being undertaken to tackle the issues..
- The Government is making £380,000 of funding available for the Council to tackle troubled families. These are families who may be involved in crime, anti social behaviour, truanting from school, or be out of work. These families can be a high cost to the public purse.
- The Government has also set aside £500,000 as part of the European Social Fund to tackle worklessness.
- The Council would be required to identify families that need intervention. The finances available will mean there are gaps in provision which would mean that the Council would be working in partnership with other organisations.
- Once the Council had identified the families most in need of support, they would be checked against the list held by Job Centre Plus.
- The strengthening Families Task Force would work with the Community Engagement Team to engage with communities
- Family Connect the first point of contact for Children's Services would aim to ensure that the public have enough confidence in the service to contact the Council.
- The findings from the Poverty workshops would be fed into the work of the Strengthening Families Task Force

Following the report, officers responded to a number of questions and comments made by Members:

Young people living in poverty outside one of the areas named as being an area of social deprivation may not get access to the resources of other young people in an area of social deprivation.

The Assistant Director for Family & Cohesion Services said that this would be tackled using the new approach to considering poverty.

Members recommended that the Telford Council of Churches is contacted regarding the fact that there is no diocese representation in the Strengthening Families Task Force,

This information will be forwarded to the Director of Children Services.

Members know the issues in their wards and it would seem sensible to work with them. Often residents will call the Member so that they remain anonymous rather than calling the Police.

The Assistant Director for Family & Cohesion Services said that the Members and the Police would be engaged.

Members remarked that Home Start had been successful in securing funding and had assisted the community with parenting skills and developing volunteering skills.

The acceptance by the community is something that is essential which is why local volunteers and Ambassadors are crucial.

How will we know that the Project had made any impact?

What indicators have been written into the project?

Each of the five areas will have to identify approaches and indicators to ensure that the project is a success. The Family Intervention Project measures the level that the family starts on and continues to monitor success throughout the project. This or a similar model may be used.

Families have multiple factors that affect the reason why they are in poverty, how would these be addressed?

An holistic approach will be taken to tackle multiple problems such as attendance at school, long term unemployment, crime and anti-social behaviour. The cost effectiveness of the approach would be measured.

In the past troubled families had cost the government around £9bn a year, £8bn of which was spent on the effects or impact that the families had caused in the community and £1bn was spent on supporting the families. The aim was to re address the balance of this by increasing expenditure on supporting young people. For each of the troubled families identified by the Council a total of £4,000 would be paid, of which £3,200 would be the attachment fee and £800 would be awarded if the intervention was successful which would be measured by each child achieving 60% attendance at school and not been involved in any anti social behaviour for the last 6 months.

Would it be possible for Scrutiny to receive this data quarterly as long as it is anonymous?

It is possible for Scrutiny to have this information but the benefits are not expected to be seen until the 2nd year.

Is there a Member of staff in school who will be working with the Council to tackle issues of low attendance?

Family Connect has been launched as a single point of contact for children's and family services. Schools have been encouraged to contact Family Connect to report truancy issues which would feed into the overall picture about problem families. The single point of contact which has been launched and encourages schools to contact them, to ensure that the whole picture is captured for problem families. It is thought that either the Headteacher or the Learning Mentor would contact Family Connect.

A member commented that it is important is to set realistic targets and there needs to be a realisation that the Council would not be successful with every family.

Members commented that an opportunity has been raised that Magistrates may be available to work with excluded young people to stop them getting in to further trouble.

Have you thought about the people who have been involved in anti social behaviour but have then become model citizens?

This is what the Strengthening Families Task Force will be aiming to achieve working alongside professionals such as the Adult Social Workers who for example will support those involved in drug abuse.

A sub group of Members from the Committee made a site visit to the Sutton Hill Family Group which seemed to be the kind of model that the Council were looking to support. However, a few weeks later in the local press it said that the group had run out of funding and was closing. How can this have happened?

Unfortunately for the group it had not been successful in securing funding. It then turned to the Council who were not able to offer assistance without contravening the procurement processes that are in place. The group were invited to bid for early intervention funding and merged with Home Start and the Woodside Family group in a bid, which was successful.

There are groups with great volunteers that lack the management or financial skills to put together funding bids. How can the Council support volunteers to acquire these skills?

The Council is considering how to support voluntary groups to develop their capacity to secure funding, possibly through CVS.

RESOLVED

That the Assistant Director for Family & Cohesion Services reports back to Scrutiny quarterly.

CYPSC-50 FORWARD PLAN

Cllr Mike Ion requested that the Children in Care performance monitoring information should be included on the agenda for future meetings. The Chair agreed that this would be included on the agenda for the next meeting. .

The next meeting was scheduled for 22nd May 2012 for Members to receive a report on the Children's Autism Strategy.

The meeting ended at 7.50pm

Chairman:

Date:

TELFORD AND WREKIN ALL AGE AUTISTIC SPECTRUM CONDITIONS STRATEGY

2012 - 2015

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1. EXECUTIVE SUMMARY

1.1 Context

This strategy covers Telford and Wrekin and has been written in response to the Autism Act 2009 and following strategy 'Fulfilling and Rewarding Lives'. The document has been developed at a time of economic and financial restraint when it will be necessary to achieve outcomes within existing resources and work jointly with partners around service re-design.

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
- Improved access to the services and support which people with autism need to live independently within the community
- Helping people with autism into work
- Enabling local partners to plan and develop appropriate services for people with autism to meet identified needs and priorities

The Telford and Wrekin Strategy has been prepared with the aim of addressing these objectives. However the children services had developed a Children's Disabilities Strategy, (Including Multi-Agency Autistic Spectrum Disorder Strategy) back in 2009 -12. In order to ensure all age Strategy is in place, we have incorporated into one.

1.2 The Telford and Wrekin goals and Action Plan

Five priority areas have been identified for **adults**:

1. Training of staff who provide services to people with autism
2. Data collection and identification of people with autism and assessment of needs for relevant services
3. Development of a care pathway for Telford and Wrekin.
4. Transition planning in relation to people with autism moving from children's services to adults
5. Local planning and leadership in relation to the provision of services for people with autism (including transition)

Four priority areas have been identified for the **children**:

1. Effective engagement and consultation with young people with ASD and their families
2. Ensuring provision of co-ordinated, high quality services based on assessed needs and where possible enabling children and young people with ASD to lead ordinary lives, encompassing the five Every Child Matters outcomes.

3. Stimulating, developing and sustaining partnership working in the provision of services to meet the needs of children and young people with ASD.
4. Workforce Development

The actions needed to achieve these goals are set out in the action plan at the end of the document in Section 9.

1.3 Shropshire, Telford and Wrekin Autistic Spectrum Conditions Group

This group has been established to develop and produce a local autism strategy and to shape the development of the local delivery plan.

The group will feed into the Staffordshire, Stoke-on-Trent, Shropshire and Telford and Wrekin Adult Autistic Spectrum Conditions Partnership Board.

1.4 Staffordshire, Stoke-on-Trent, Shropshire and Telford and Wrekin Adult Autistic Spectrum Conditions Partnership Board

This Adult Autism Partnership Board has been established to develop and produce the local overarching autism strategy and lead the planning and implementation of the local delivery plan for Staffordshire and Stoke-on-Trent.

The Board is responsible for overseeing the commissioning, planning and provision of autistic spectrum conditions services across the County.

Shropshire and Telford and Wrekin and Stoke-on-Trent are part of the Board as services are commissioned as the main provider for health services in North Staffordshire is Combined Healthcare NHS Trust. For South Staffordshire, Telford & Wrekin and Shropshire Authorities commission mental health and learning disabilities services along with Staffordshire through South Staffordshire and Shropshire Healthcare NHS Foundation Trust. Having a joint Board provides a basis for partnership working, sharing of ideas and information and an excellent model for joint commissioning.

In this strategy we recognise that there are a number of terms that different individuals and groups prefer to use, including autistic spectrum condition, autistic spectrum difference and neuro-diversity. In this strategy we use the term 'autism' as an umbrella term for all autistic spectrum conditions (ASC) including Asperger syndrome.

1.5 Children & Young People ASD Task & Finish group.

The children strategy 2009 – 2012, which is coming to an end this year, was developed by Children & Young People ASD Task & Finish group.

2. INTRODUCTION

This strategy has been developed by Shropshire, Staffordshire, Stoke and Telford Partnership Board. Its purpose is to provide the strategic direction for statutory health and social care organisations in Telford and Wrekin with regards to supporting adults and young people with an Autistic Spectrum Condition.

The document sets out:

- ✓ The objectives and outcomes for the autistic spectrum condition services in Telford and Wrekin in line with the National Autism Strategy published in April 2010.
- ✓ Includes an action plan of how the work programme will be taken forward over the next three years.
- ✓ Considers the national and local drivers, prevalence statistics and stakeholders who need to be involved in the development work.
- ✓ Provides a framework of how we want to monitor and evidence service quality to ensure that it will support the achievement of national and key local targets and performance indicators.

2a. What is Autism?

Autism or Autistic Spectrum Condition (ASC) is also sometimes referred to as Autistic Spectrum Disorder (ASD).

Autistic Spectrum Condition (ASC) is 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 word “spectrum” is used because the characteristics of the condition vary from one person to another.

Autistic Spectrum Condition is a lifelong developmental disability, affecting social interaction, communication, social relationships and making sense of the world

The three main areas of difficulty experienced by all people with autism are:

- Social communication, particularly using and understanding facial expressions, tone of voice and abstract language;
- Social interaction – recognising or understanding other people’s emotions and feelings and expressing their own
- Social imagination – understanding and predicting other people’s behaviour, making sense of abstract ideas and imagining solutions outside of their own routines

Many people with an ASC may also experience some form of sensory sensitivity or under-sensitivity to sounds, touch, taste, light or colours and often prefer to have a fixed routine.

3. WHY DO WE NEED A STRATEGY?

a. National Context

During the last few years there has been a strong message from Central Government that there is a need for local services to meet the needs of adults and young people with autistic spectrum conditions. It can be reasonably predicted that within the next few years there will be an expectation, a requirement even that local commissioners will commission, redesign and will provide such services.

Key events and dates:

Adults

- November 2006 – ‘Better services for people with an autistic spectrum disorder’
- 2009 – Valuing People Now
- June 2009 – Supporting People with Autism through Adulthood, National Audit Office
- 12th November 2009 – Autism Act
- 3rd March 2010 – Department of Health publish Adult ASC Strategy ‘Fulfilling and Rewarding Lives’
- July 2010 – National Institute Clinical Excellence (NICE) begin to work to develop a clinical guide for ASC in Adults
- December 2010 – Statutory guidance published for Local Authorities and NHS organisations to support the implementation of the Autism Strategy
- The Standard Contract for Mental Health and Learning Disabilities for 2010/2011 explicitly requires service providers to explain how reasonable adjustments for people with autism are made
- By 2013 there will be a pathway to diagnosis in every local area

Children

- Valuing People: A New Strategy for Learning Disability for the 21st Century (2001)
- Together from the start: Practical Guidance for Professionals Working with Disabled Children and their Families (2002)
- Every Child Matters – The Next Steps (2004)
- Removing Barriers to Achievement: The Government’s Strategy for SEN (2004)
- National Service Framework for Children, Young People and Maternity Services (2004)
- Aiming High for Disabled Children: Better Support for Families (2007)

A Summary of Key Themes from the ASC Strategy

The 'must do's'

- ✓ Improve access for adults with ASC to the services and support they need to live independently within the community
- ✓ By 2013 – a pathway to diagnosis in every area
- ✓ Local appointment of a senior professional lead on the development of pathway and to develop a local diagnostic and assessment service
- ✓ Standard contract for Mental Health and Learning Disabilities for 2010/2011 explicitly requires explanation of how 'reasonable adjustments' will be made
- ✓ Local partners to develop a local commissioning plan for services for adults with ASC
- ✓ Consider the establishment of local ASC partnership boards

The document makes reference to best practice, particularly the need to:

- ✓ Increase awareness and understanding of ASC
- ✓ Develop a clear, consistent pathway of diagnosis of ASC
- ✓ Help adults with ASC into work
- ✓ Enabling local partners to develop relevant services for adults with ASC to meet identified needs and priorities

National Indicators:

- ✓ NICE developing guidelines on model care pathways – published 2012
- ✓ Lead professional to 'get on with' examining existing services, scoping to be in good position to act on NICE guidelines

b. The Local Context

While national drivers have set the scene for how organisations should progress, all local statutory organisations are operating in a fluid local environment, which is beginning to offer opportunities to review our service delivery systems. There is a need to take account of the emergence of learning from elsewhere and challenge earlier assumptions about system-wide efficiency.

Historically, services have developed disparately and unevenly across the local health economy, which has led to inconsistencies in the services that users might expect and physical surroundings which are not fit for purpose. All the factors above provided possibilities to re-look and redesign how services might be delivered in the future. We would wish to see a range of outcomes from re-designed service models:

- ✓ A truly user and carer led service
- ✓ Locally rooted services with care closer to home
- ✓ Services that offer early recognition and intervention, facilitating recovery and maintaining independence
- ✓ A review of the workforce skill base

- ✓ Development of training programmes for staff to enable them to deliver high quality, effective services

Shropshire, Staffordshire, Stoke and Telford statutory organisations are committed to working together to improve services for people with autism. Although falling outside of existing care provision, people with autistic spectrum conditions often receive services provided for people with learning disabilities and/or mental health services. Although prepared to meet the demands of people with autism these services struggle to meet the needs of individuals. People may not meet the disability criteria for case services and if they do, the right type of service may not be available to them.

4. SCOPE

The strategy document includes key priorities for action to address service gaps for those who fit the definitions of Autistic Spectrum Conditions.

It includes specific services commissioned and mainstream services such as leisure, housing and education. The strategy and action plan reflects the four key themes of the national autism document 'Fulfilling and Rewarding Lives'.

1. Training of staff that provide services for people with autism.
2. Identification and diagnosis of autism in children and adults
3. Planning in relation to the provision of services to people with autism as they move from children to adults
4. Local planning and leadership in relation to the provision of services for people with autism.

The strategy sets out specific key actions to improve these services and promote choice and inclusion for people with autism.

Aims of the strategy

The aims of the Autistic Spectrum Condition Strategy are to:

1. Ensure a planned and open approach to commissioning of services for people with all ages of an autistic spectrum condition, making use of information about demand, unmet needs/service gaps and resources.
2. Ensure that services are centred on service users' needs and where appropriate family carers.
3. Ensure a transparent relationship with stakeholders in the commissioning and provision of services.
4. Provide direction and structure for both Health and Social Care provision within Telford and for other mainstream services such as Housing, Leisure, Education/School and Training.
5. Continue to review service requirements identified through the Joint Strategic Needs Assessment with due regard to available resources and the need to work within existing decreasing budgets for the main Stakeholder organisations.

6. Stakeholders

The stakeholders in this strategy are:

- ✓ Children and adult with autism living in the borough of Telford and Wrekin
- ✓ Carers and family members of children and adults with autism
- ✓ NHS Telford and Wrekin
- ✓ Telford and Wrekin Council
- ✓ South Staffordshire and Shropshire Foundation Trust
- ✓ Local advocacy services
- ✓ Shropshire Partners in Care (SPIC representing independent residential and domiciliary providers)
- ✓ Family Carers and Carers Support services supported by CVS
- ✓ Providers of day time activities and education e.g.
 - local authority
 - voluntary sector services
 - Telford College of Arts and Technology (TCAT)
 - supported Employment Providers
- ✓ Registered Social Landlords and other housing providers
- ✓ Police and Probation services
- ✓ GPs
- ✓ TCAT
- ✓ The voluntary sector

7. Prevalence Data

It is estimated that 1 in every 100 adults will be on the autistic spectrum. The estimated numbers have been worked out from the population of the UK as given in the 2011 census 58,789,194 of whom 13,354,297 were under 18.

Therefore we would be expecting around 1600 people with some form of autistic spectrum condition in Telford & Wrekin.

Further break down is 0-19 years = 393

Office of National Survey (ONS) 5 – 16 year olds = 237

Literature on the provision of services for people on the autistic spectrum repeatedly states that statutory organisations do not collect data on many people they are providing for or how many live in the catchment area.

Estimates of the proportion of people with autistic spectrum conditions who have a learning disability (IQ less than 70) vary considerably and it is not possible to give an accurate figure. It is likely that over 50% of those with ASC have an IQ in the average to high range and a proportion of these will be very able intellectually.

For further prevalence data, see Annex Two.

8. OBJECTIVES from the National Strategy

Objective One

Make sure people can get a diagnosis if they want one

Children's Services are currently working in partnership to develop a defined diagnostic pathway, for children aged 3-18, based on refinement of existing assessment processes, e.g. Common Assessment (CAF, Children's Development Centre (CDC), which will also ensure that the holistic needs of the child, young person and their families are assessed.

Currently there is no defined diagnostic pathway in Telford and Wrekin once an individual reaches 16 or leaves school. A referral for a diagnosis, usually at the request of the individual or their parents, will depend on where you live, how knowledgeable a GP is about autism, the determination of the individual, parents or carer to pursue a diagnosis or their means to pay for private consultation.

For some people with an undiagnosed condition of autism, the desire to have a formal diagnosis is very important. It can begin to answer many questions and assist them in beginning to understand why they behave, react and respond to situations in the way that they do and to develop coping strategies.

Without a formal diagnosis, individuals have no 'proof' of having a disability and so have no access to claiming welfare benefits or accessing support.

Objective 2 - The identification of adults with autism

Staff working across stakeholder groups receive the appropriate level of training to more accurately identify potential signs of autism in adults and are able adapt their behaviour and communication as appropriate.

Objective 3 - The assessment of the needs of people with autism for relevant services

Diagnosis or identification of autism is not enough: the most important outcome is that, where appropriate for the individual, a diagnosis leads to an assessment for care and support. Diagnosis of autism should also be recognised as a catalyst for a carer's assessment.

Objective 4 - Planning in relation to the provision of relevant services to people with autism as they move from being children to adults

Through school, children with autism and their families and carers will have access to support which helps them achieve and be included. Effective transition planning will ensure that support remains in place once people with autism reach adulthood as appropriate to the individual.

Effective transition planning should include career preparation up to age 16 and plans for education, employment, training, transport, housing and leisure from 16

to 19 and beyond. Crucially transition plans should be individually tailored to the need and wishes of the individual young person and reviewed and updated each year.

Objective 5 - Other planning in relation to the provision of services to people with autism

This objective ensures appropriate planning of services for people with autism ranging from locally based community services through to the provision of specialist or dedicated autism services, and including access to universal services, in line with locally identified needs and priorities

Objective 6 - The training of staff who provide services to people with autism

Our objective is to ensure that training around autism is provided to all public service staff – but particularly for those working in health and social care. This includes not only general autism awareness training, but also highly specialised training for staff in a range of roles that wish to develop their knowledge of autism.

Objective 7 - Local arrangements for leadership in relation to the provision of services to people with autism

Our objective is to ensure there is effective leadership that ensures that the needs of people with autism in Telford and Wrekin are met.

9. Current Service Provision for children and adults

Services for children and young people with ASD covers a range of agencies including:

- Health
- Social Care
- Education
- Community and voluntary sector
- Independent sector
- Leisure services
- Housing

The services that children and young people with ASD access vary according to their level of disability and need. In order to meet a child's needs services are delivered across a number of levels or 'tiers':

- **Tier 1** – Universal. These are inclusive mainstream services accessed by children with ASD. This will include information, advice and signposting to appropriate support
- **Tier 2** – Targeted. These are services targeted at those children with ASD known to require additional support.
- **Tier 3** – Complex. These are specific specialist services, usually delivered by multidisciplinary teams to manage more complex and severe needs.
- **Tier 4** – Acute / Regional. These are services for highly complex needs.

Our aim is that as many children and young people with ASD as possible are able to access universal service provision with appropriate and adequate levels of support, as needed.

Services are delivered according to the assessed need of the child. The services required to meet a child's needs may change over time according to the changing level of need.

SERVICE MAPPING for children with a disability (including ASD)

HEALTH:

Health services are commissioned by NHS Telford and Wrekin and delivered by Shropshire Community Health NHS Trust across both universal and specialist teams to meet the needs of disabled children, including those with ASD. Services include the Children's Community Nursing Team, Specialist Nurses, Therapy Services (physiotherapy, occupational therapy and speech and language therapy), the Child Development Centre, Community Paediatricians, Continence Service, Community Equipment Service, Wheelchair Service, CAMHS – LD, acute hospital services, audiology, ophthalmology and specialist regional facilities. Universal services include access to GP's, Health Visitors and School Nurses.

SOCIAL CARE:

Autism Co-ordinator is a joint commissioned post co-ordinating services for children and families with autism working within the Disabled Children's team and linking with all agencies involved in autism services.

Social Workers are based within the Disabled Children Team, which also incorporates the Child Development Centre, Special School Nurses, Record Co-ordinator and inclusion and support practitioners.. This team of social workers case manage disabled children (including those with ASC) with the most complex needs may attend the special schools (The Bridge, Haughton and Southall). The service has recently been developed to also include disabled children who attend mainstream schools, in order to promote inclusion. The Social Workers lead on safeguarding procedures for disabled children as well as providing a range of support interventions – including access to short breaks. Some disabled children may also be known to Social Workers in the Assessment and Case Management Teams.

Occupational Therapy assessments and interventions to provide home adaptations and equipment are provided through social care within the adult occupational therapy team.

EDUCATION:

Education services for disabled children are delivered through the Local Authority, across both mainstream and special schools combined with additional support services. These services include Educational Psychology, Special Educational Needs team, Learning Support Advisory Service, Behaviour Support Team, Special Schools Outreach Service and the Sensory Inclusion Service. An Access Panel also exists to provide dedicated resources to ensure access to schools both in terms of the curriculum and the physical environment.

The council has recently undertaken a restructure, which has re-aligned Educational Psychology, Special Educational Needs, Disabled Children Team, Community Social Work Team, Sensory Inclusion Service, Inclusion and Support Services, Children's Development Centre and Portage, into a Service Delivery unit under one Service Delivery Manager (SDM – Children's Specialist Services). The Service provision is managed within Family & Cohesion Services (F&CS), with close working relationships with other F&CS, School Improvement, Safeguarding, Adult Services and Health Services. The aim is to promote integrated working to ensure the holistic needs of the children are assessed and supported, with a focus on early intervention and prevention.

LOCAL AUTHORITY:

Leisure and Community Services are accessed by some disabled children. Leisure services have an existing Disability Key Worker Scheme and projects such as Every Day Swim which specifically target disabled children have successfully been implemented and provide ongoing opportunities for future development.

Leisure and Community Services are key partners in supporting Short Break provision.

COMMUNITY, VOLUNTARY AND INDEPENDENT SECTOR:

A number of groups exist to support disabled children and their families from parent led support groups and 'condition specific' groups to organisations such as Homestart, DIAL, Parents Opening Doors (PODs) and Parent Partnership. A number of disabled children also access services provided through hospices, both Hope House and Acorns, and residential short breaks through Action for Children and Mencap (commissioned through Shropshire Council)

Adults

At the present time people with an autistic spectrum condition receive a range of services in various settings. However, it is difficult to come to an accurate picture of exactly how many people are using which service. To date there has been no statutory or performance indicator requirement to keep this data. To identify current services we are reliant on the use of prevalence rates applied to overall service provision.

Currently in Telford and Wrekin there are no statutory sector funded services specifically for people on the autistic spectrum. Telford Council fund a specialist Asperger's worker whose role is to provide advice, support, signposting and strategies. See Annex One for more information regarding activities available for able people with an autistic spectrum condition within Telford and Wrekin.

As detailed in Section 6 of this strategy, applying national prevalence rates to the population indicates that we would be expecting around 1600 people with some form of an autistic spectrum condition in Telford and Wrekin. However, we would not necessarily expect all of these people to be accessing statutory services for a variety of reasons, for example some will not meet criteria for social care services.

Given that there is not a specific service catering for people with autism, we can expect that this client group will be present in a number of mainstream services, mainly mainly with a learning disability or mental health background

- Caseloads of learning disability social workers
- Caseloads of mental health social workers
- People within services provided by the two specialist Mental Health and Learning Disability Provider Trusts
- Caseloads of Consultant Psychologists/Psychiatrists
- Attending learning disability day services
- Attending mental health day services
- Attending voluntary sector groups
- Short break and respite services
- Living in independent sector residential and nursing homes
- Living in supported tenancy schemes

This is not an exhaustive list- and does not take into account the accessing of housing, supporting people, leisure or educational/training services by people on the autistic spectrum.

Summary of Service provision for people with Autism in Telford and Wrekin

- Pathway for School Age Children being piloted in the South Early Intervention Locality Service
- ASD/C Co-ordinator (0-19yrs) is a joint commissioned post between Telford NHS, Shropshire NHS and Telford and Wrekin LA co-ordinating services for children and young people and their families, providing information, signposting to services and collecting data to feed into the ASD Operational Group and Steering group this post started in October 2010
- People with ASC will be represented within mainstream provision
- Obtaining a diagnosis can be challenging, development of clearly defined referral criteria and pathway required – Pathway for school age children has been developed and is currently being piloted in the south Early Intervention Locality Service of Telford.
- Young people with ASD will range a number of services. Gaps exist in availability and coordination of these services for children with ASD across tiers 1-4 (health, social care, education, 3rd sector, independent sector, leisure services, housing) – Service provision is mapped by ASD Co-ordinator and fed back to the operational group to look at how best to meet the needs of children, young people and families.

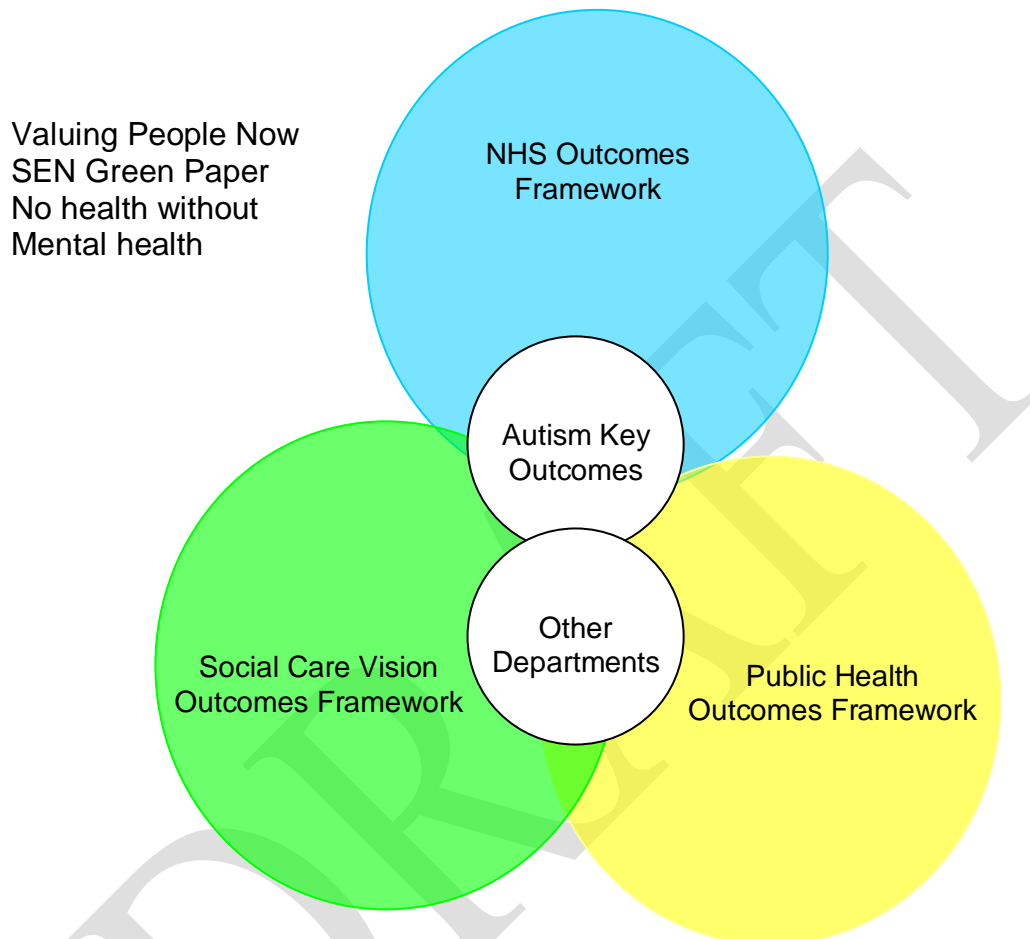
10. MONITORING AND REVIEW

The Autism Partnership Board will have overall responsibility for monitoring and reviewing the strategy on an annual basis and will update the action plan accordingly. This group will report back to the Autism Partnership Board for Adults and children but also to Children's Board for Children

In line with the DH document launched in April 2011, 'Evaluating Progress'; we are committed to a clear focus on and transparent approach to outcomes.

The diagram below highlights how the outcomes frameworks align with each other and other national policies/initiatives.

From targets to outcomes – aligning the outcomes frameworks:



In the 'Fulfilling and Rewarding Lives' Evaluating Progress released on 1st April 2011 provides guidance on measuring progress towards implementation after one year for the following seven areas:

1. Adults with autism achieve better health outcomes
2. Adults with autism are included and economically active
3. Adults with autism are living in accommodation that meets their needs
4. Adults with autism are benefiting from the personalisation agenda in health and social care, and can access personal budgets
5. Adults with autism are no longer managed inappropriately in the criminal justice system
6. Adults with autism, their families and carers are satisfied with local services
7. Adults with autism are involved in service planning

Although there is no similar evaluation of the outcome for children it is easy to apply the above principles to children.

Telford and Wrekin will work towards these long term outcomes to make a difference to the lives of children and adults with autism, their families and carers. We will also embrace the following three key ambitions:

1. Local authorities, NHS and partners know how many children and adults with autism live in the area
2. A clear and trusted diagnostic pathway is available locally
3. Health and social care staff make reasonable adjustments to services to meet the needs of individuals with autism

Monitoring of progress will be in line with the Self assessment framework 'Essential Quality Outcomes for local self assessment'.

11. Gaps in service based on self assessment

Children	Adults
<ul style="list-style-type: none"> • Access to leisure and fun/sport? • Whole system Workforce issues – skills, training • Parenting support • Child minding with appropriate support • Data collection – ASD Co-ordinator mapping services, collecting data • Housing • Practical support • Inpatient Short Break provision • Transition worker (children to adult) • Residential provider list • Specialist team • Nurse prescriber (16-17 year olds) • Base for older young people (16-17) • Mainstream school support 	<ul style="list-style-type: none"> • Access to leisure and fun/sport • Workforce issues – skills, training • Data collection • Housing and accommodation • Practical support • Inpatient and Respite care • Transition worker (children to adult) • Specialist workers with teams • Nurse prescriber • Support to employment • Review demand and capacity • Personalisation agenda • Pathway into criminal justice and out. • Support to carers (Survey needed to determine baseline) • Users involvements in all aspects of planning. • Inpatient Short Break provision

12. Autistic Spectrum Conditions Strategy Implementation Plan

The plan is included below and progress will be regularly tracked through monitoring. There is a need to focus on building capacity and capability at local level to enable local partners to develop relevant services for people with autism

to meet identified needs and priorities and the local area therefore also needs to develop its own commissioning plan for services for people with autism.

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12a. ACTION PLAN (Childrens)

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress
<p>Priority 1. Understanding the needs and wishes of children and young people with ASD and their families through effective engagement and consultation.</p>	<p>Develop systems and processes for effective data collection and analysis across the range of multi agency provision involved in delivering services for children and young people with ASD.</p>	<p>ASD Co-ordinator. Family Information Manager/ Schools</p>	<p>Children, young people and families are able to make informed choices and be in control</p>	<p>Service directory database has been developed. Any new information is added to the database and reviewed regularly. A database of children and young people with a diagnosis of autism or Asperger's but is subjective to information provided. Re-launch of Children with Disability Record.</p>
	<p>Develop a robust process for effective engagement and consultation with children and young people with ASD and their families.</p>	<p>Senior Manager JCT Contracting</p>		<p>Plans to engage with Active Involvement Team</p>
	<p>Review and maintain within funding restraints the range and choice of short breaks available for children and young people with ASD.</p>	<p>Short Breaks Co-ordinator</p>		
<p>Priority 2. Ensuring provision of co-ordinated, high quality services based on assessed needs in the</p>	<p>Improve co-ordination of services for the provision of ASD interventions for children and young people. Use of CAF/TAC processes – Needs</p>	<p>Co-ordinated service provision through</p>	<p>Children and young people's needs will be met in a timely and effective way based on</p>	<p>Early Support programme</p>

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress
<p>right place at the right time in the right way, and where possible enabling children and young people with ASD to lead ordinary lives, encompassing the five Every Child Matters outcomes .</p>	<p>assessment to inform Resource Panel allocation</p>	<p>Integrated, multi-agency working</p> <p>Early Intervention Locality Services</p>	<p>competence and appropriateness</p> <p>Children, young people and their families will have a sense of 'normality' in their lives</p>	
	<p>Develop appropriate parenting programmes specifically targeted at parents of children with ASD.</p>	<p>Senior-Delivery Managers, across service deliver areas including Contracts & Localities Commissioning</p>		<p>To determine funding streams – active mapping.</p>
	<p>To develop a local multi-agency central resource for staff, families and carers to access in relation to best practice, guidance and information.</p>	<p>SDM Children's Specialist Services ASD Co-ordinator Information Officer Involving parents and young people</p>		<p>Development of Information Hub, developing role of ASD co-ordinator, families have started to access service.</p>

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress
	To develop and agree definition of ASD and eligibility criteria for access to services. Standardised tools for screening, diagnosis and interventions across all agencies will also be implemented.	Head of Clinical Services/ Senior Nurse		Pathway being developed Identifying different terminology across agencies – to work towards consistent terminology
	Housing with appropriate support for young adults			Developing transition protocol
	Education, including early years <i>Interventions:</i>	Senior School Improvement Manager		
	<ul style="list-style-type: none"> • Develop Early Support 	Integrated strategy - Service Delivery Managers		Telford Children Development Centre developing up take of programme
	<ul style="list-style-type: none"> • Conduct an audit of the training needs of staff from school and settings 	Integrated strategy - Service Delivery Managers		
	<ul style="list-style-type: none"> • Arrange a comprehensive programme of CPD and outreach 	Children's Specialist Services		
	<ul style="list-style-type: none"> • Introduce the Inclusion Development Programme (IDP) 	School Improvement		
	<ul style="list-style-type: none"> • Develop provision management in schools 	Planning, placements & Commissioning Early Intervention		

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress
		Working in partnership with Health and Voluntary Sector, including children, young people and Families		
	<i>Provision:</i>			
	<ul style="list-style-type: none"> • Draw up a map of provision for children with ASD across the LA 	ASD co-ordinator		Through the information database a clearer picture of service provision and any gaps in service is being developed
	<ul style="list-style-type: none"> • Use the provision map to identify gaps and then develop additional provision as needed 			
	Ensure effective transition planning	Strategic Transition		To gain a better

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress
	Develop good practice in relation to personalisation including the use of individualised budgets	group. All agencies involved in transition		understanding of the potential of individualised budgets
Priority 3. Stimulating, developing and sustaining partnership working in the provision of services to meet the needs of children and young people with ASD and their families.	Establish a children and young people ASD task and finish group for Telford and Wrekin to enable all agencies to plan, commission and monitor services for children, young people and their families.	ASD strategic group	Children, young people and families will have a perception of being supported by a service through seamless pathways	ASD strategic partnership group established and developing
	Monitor and evaluate the effectiveness of service provision in delivering positive outcomes for children & young people with ASD. To map parenting support	ASD strategic group		Current Plans to engage with Active Involvement Team
Priority 4. Workforce Development	To establish a comprehensive multi-agency training programme for practitioners and managers to recognise and understand characteristics of ASD and to provide direct interventions.	Principal Child Workforce Development Officer/ Learning & Behaviour Support Development Officer		Mapping by ASD co-ordinator to progress and input to workforce development plan. Meeting with Workforce Development to discuss training needs July 2011, ongoing.

Priority	Milestone/Key Action/ Service Development	Lead(s)	Impact/outcome	progress

12b. ACTION PLAN (Adults)

Section 1 – Training of staff who provide services to people autism

	Action	Lead	Target Date	RAG Self Assessment
1.1	Undertake mapping exercise across organisations about training carried out	Autism Training Leads	July 2011	
1.2	Establish Autism Training Sub Group with reps from Social Care and Health to agree work programme	Autism Training Leads	August 2011	
1.3	Review Department of Health on line materials and local programmes to identify best practice	Autism Training Sub Group	Autumn 2011	
1.4	Agree content of Autism awareness training	Autism Training Sub Group	Autumn 2011	
1.5	Develop a training plan for implementing	Autism Training Sub Group	Autumn 2011	

1.6	Identify key priority groups for training and make links with independent sector	Autism Training Sub Group	Autumn 2011	
1.7	Review model of training to identify best practice	SSSHFT/CHCT Autism Leads	Autumn 2011	
1.8	Agree content of specialist training and who should receive it	Autism Training Sub Group	Autumn 2011	

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Section 2 – Identification and diagnosis of autism in people, leading to assessment of needs for relevant service

	Action	Lead	Target Date	RAG Self Assessment
2.1	Organise a Shropshire, Telford and Wrekin wide workshop to map out a model care pathway for the area	Telford and Wrekin		
2.2	Review existing best practice and other models across the country	Autism Partnership Board		
2.3	Each LA should appoint a lead professional to develop diagnostic and assessment services for people with autism in their area. Agree where this responsibility should rest	Autism Partnership Board	Sept 2011	
2.4	Await NICE guidance and review local model against this	Autism Partnership Board	July 2012	
2.5	Work with NHS and LA partners to ensure sign up to local Care Pathway across organisations	Autism Partnership Board	December 2012	
2.6	Inform statutory organisations about the pathway – Social Care & Health, Health, 3 rd Sector	Autism Partnership Board	Sept 2012	

Section 3 – Planning in relation to the provision of services to people with autism as they move from children to adults

	Action	Lead	Target Date	RAG Self Assessment
3.1	Review Transition Protocol to ensure it reflects the needs of people on the autistic spectrum	Autism Partnership Board	November 2012	
3.2	Work with Autistic Spectrum Disorder Children's groups to ensure feedback mechanisms in place around transition planning	Local Transition Leads	November 2012	
3.3	Work and share information with Telford and Wrekin Transition Strategic Planning meetings	Local Transition Lead	November 2012	
3.4	Collect data of young people in transition and provide an annual update	Transition Lead	November 2012	

Section 4 – Local planning and leadership in relation to the provision of services for people with autism

	Action	Lead	Target Date	RAG Self Assessment
4.1	Identify autism commissioner leads in Staffordshire, Shropshire, Stoke On Trent and Telford and Wrekin.	Autism Partnership Board lead	May 2011	
4.2	Develop autism strategy and action plan		September 2011	
4.3	Consult family carers, service users and local interest groups in autism planning as part of the strategy work	Autism Partnership Board	July – October 2011	
4.4	Collect data on total numbers of people with autism through the Joint Strategic Needs refresh		December 2011	

4.5	Consider establishing a virtual team using existing skills from Mental Health and Learning Disabilities.	Autism Partnership Board	December 2011	
4.6	Continue to raise wider public awareness and profile of ASC across Telford and Wrekin	Autism Partnership Board	March 2012	
4.7	Work with wider partners including Employment and Housing to raise awareness about support and advice available	Autism Partnership Board	March 2012	
4.8	All stakeholders make explicit their ability to make reasonable adjustments to support people with autism	Autism Partnership Board	March 2012	
4.9	Develop a local integrated commissioning plan for autism	Commissioners/ Director for Adult Social Care	March 2012	

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Annex One

What is available in Telford specifically for able people with autism?

1. **Senior Practitioner for People with Asperger's Syndrome** – advice, support, signposting, strategies: Contact Sara Heath 01952 381420 or email: sara.heath@telford.gov.uk
2. **Autism Co-ordinator** – Co-ordinating services for families and individuals with autism, providing information and signposting to services, training and groups across Telford and Wrekin and nationally: Contact Michelle Troth 01952 567356 or email: michelle.troth@telford.gov.uk
3. **Telford Asperger's Group (TAG)** – is an invitation only social and discussion group for adults with AS or seeking a diagnosis of AS meets from 2-4pm in Wellington on the first and third Tuesdays of the month. Contact Sara Heath on 01952 381420 or email: sara.heath@telford.gov.uk
4. **National Autistic Society Social Group** is an open group for adults with a diagnosis of AS. It meets twice a month from 7-9 on a Thursday evening in Telford. Contact Beth Jones 07974067833 or email beth.jones@nas.org.uk
5. **Asperger's Support Group (ASG)** is an invitation only discussion group for adults with a diagnosis of AS. It meets once a month at in Shrewsbury at the Roy Fletcher Centre, Shrewsbury, contact Alison Laing or Paul Moloney, on 01952 381420 or email alison.laing@sssst.nhs.uk
6. **Autonomy** – is an open self help and social group which meet from 7:30pm on the first Monday of the month in Telford. Contact Eric Heath via the Autonomy main number 01743 821363 or email autonomyshropshire@yahoo.co.uk.
7. **Autonomy Chess Club** – is an open social club run for people with AS by people with AS who wish to play or learn to play chess. It meets on a Wednesday from 7:00-9pm in Wellington. Contact: Matt Joyce via the Autonomy main number 01743 821363 or email autonomyshropshire@yahoo.co.uk.

Awareness Training

8. **Training in Awareness of Asperger's Syndrome** – is also available from Shropshire Joint Training. Contact: Joint Training Co-ordinator on 01743 254733 or visit:
9. <http://www.shropshire.gov.uk/schtraining.nsf/open/DBDF577A74AAE0EF8025710E00387A7E>
10. **Learning about Asperger's Syndrome** – Workforce Training and Development, Telford & Wrekin Council. Contact Michelle Hutchison: 01952 384918 email michelle.hutchison@telford.gov.uk – Michelle is no longer in this role
11. **Open College Network 10 week accredited course in Understanding ASCs.** Contact Paula Costin on 01952 642237 email: paula.costin@tcat.ac.uk
12. **TCAT community courses, An Introduction to Autism** (6 weeks, day times) – contact Cathy Addison, Community Outreach Worker, Community Education on 07887661847 or email: cathy.Addison@tcat.ac.uk

Carers' support:

13. **Support Telford Autism ADHD (STAA) Group for parents and carers of children with ASD (autism), ADHD and associated difficulties** meets on the second Thursday of each month at Haughton School in Madeley (term times only). Contact Julie Collins (PPS Officer): 01952 457439 or email julie@pps-shropshireandtelford.org.uk or Lesley Perks (PPS Officer): 01952 617758 or email lesley@pps-shropshireandtelford.org.uk
14. **STACS group for Parents and Carers of People with Asperger's Syndrome** meets in Wellington on the first Wednesday of every other month. Contact: Louise Griffiths 01952 262064, email: louise.griffiths@carerscontact.org.uk or Barry Brown 01952 254594

15. **Parents Opening Doors (PODS)** - Parents Opening Doors is a voluntary forum for parents and carers who have a child with a disability or additional need of any kind. PODs parents committee has a great wealth of experience of children with autism. Contact Jayne Stevens 07775342092 or email: info@pods.org
16. **Carers Contact Centre**, The Poplars, Lightmoor, Telford: Mental Health Carers' Support Officer offers support for carers of people with Asperger's syndrome. Contact Louise Griffiths 01952 262064 email: louise.griffiths@carerscontact.org.uk

Other

17. **Telford and Wrekin Library Service** -The Library Service is proud to hold the STACS collection of over sixty books on autism and Asperger's syndrome. Contact: Marilyn Higson 01952 382997
18. **The Information Hub** - The Information Hub is a drop in service based at the Stepping Stones Centre, Malinslee, available to all families of disabled children across Telford and Wrekin. This is a free service and helps families to access information regarding all aspects of disabilities for children and young people. The Information Hub holds information on autism and related service for families to access. Families can access autism resources within the hub and make appointments with the Autism Co-ordinator or Information Officer to discuss any information. Contact The Information Hub on 01952 567402 or email: ican2information@telford.gov.uk
19. **CHEC Healthshop**, Madeley, Telford - CHEC houses the only 'Health Shop' in Telford. The Health Shop provides professional, friendly and impartial advice, sign-posting & information on health and social issues. The Health shop has resources on autism that can be loaned out to individuals. Contact Terriane on 01952 583 779 or email: terriane@btconnect.com

Annex Two

Based on current accepted prevalence figures

Country	2008	2013	2018	2023	2028	2033
United Kingdom	61.4	63.5	65.6	67.8	69.8	71.6
England	51.5	53.3	55.3	57.2	59.1	60.7
Wales	3.0	3.1	3.1	3.2	3.3	3.3
Scotland	5.2	5.3	5.4	5.4	5.5	5.5
Northern Ireland	1.8	1.8	1.9	1.9	2.0	2.0

Note: Figures may not sum due to rounding

**Estimated and projected population of the United Kingdom and constituent countries, 2008-2033 (Office of National Statistics)
(In millions)**

	2008	2013	2018	2023	2028	2033
United Kingdom	614,000	635,000	656,000	678,000	698,000	716,000

Projected number of those with ASC across the United Kingdom based on the agreed prevalence.

	2009	2010	2011	2012	2013	2014	2015
Children (aged 0-19)	43,700	43,900	44,000	44,300	44,800	45,200	45,800
Adults (aged 20+)	125,000	126,300	127,600	129,400	131,100	132,800	134,500
Total population	168,700	170,200	171,600	173,700	175,900	178,00	180,300

Information from Telford & Wrekin Population Estimates & Projections 2009. Delivery & Planning Telford & Wrekin Council
6

Telford and Wrekin estimated prevalence of ASC based on current accepted prevalence figures of 1:100.

	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>	<i>2014</i>	<i>2015</i>
Children (aged 0-19)	437	439	440	443	448	452	458
Adults (aged 20+)	1250	1263	1276	1294	1311	1328	1345
Total population	1687	1702	1716	1737	1759	1780	1803

autism.west midlands provides the following services:

Information Helpline	0121 450 7575
Education Coddington Court School	01531 640 541
Training	0121 450 7576
Supported Living (ASSET)	0121 450 7589
Supported Employment (ASpire)	0121 224 7844
Family Support	0121 450 7574
Residential Services	0121 450 7584

autism.west midlands

18 Highfield Road
Edgbaston
Birmingham
B15 3DU

Telephone: 0121 450 7580/82

Fax: 0121 450 7581

Information Helpline: 0121 450 7575

Website: www.autismwestmidlands.org.uk

Email: info@autismwestmidlands.org.uk



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A guide to Autism

*autism.west midlands is an independent provider of services
for people with Autistic Spectrum Disorders*

What is Autism?

You may hear several different names used to describe autism. These could include:

- Classic autism
- Kanner Syndrome
- High-functioning autism
- Able autism
- Atypical autism
- Asperger Syndrome
- Semantic Pragmatic Disorder (SPD)
- Autistic tendencies
- Pervasive Developmental Disorder (PDD)

Autistic Spectrum Disorder (ASD) is an umbrella term often used to describe these conditions because it groups together all the different variations of this disorder. The idea of a spectrum is useful because it shows that people with a diagnosis of autism can range from having average or above average intelligence to having severe learning disabilities, and may be accompanied by mental health difficulties.

Some facts about autism

- It is a 'hidden disability' because people with autism are usually no different in appearance from anyone else
- It is now believed to affect as many as 1 in 110 people
- It is believed to be 4 times more common in males than females
- It is a lifelong disability, but getting the right help and support from people who understand can really make a difference
- Nobody knows for certain what causes autism, but research points to a genetic link
- People with autism can be very sensitive to sounds, tastes, smells, touch or the sensations caused by what they see

The Triad of Impairments

Autism affects the way a person relates to other people and this can cause confusion with social interaction. Because all people are different, the way autism affects individuals is also different. However, they all have difficulties in 3 main areas, often known as 'The Triad of Impairments'.

Communication – Talking and Understanding

Language difficulties range from no speech at all to fluent speech, often repetitive and mainly talking about or focussing on their own areas of interest, rather than true conversation. There is always difficulty in understanding spoken language, as well as the other clues to meaning in what we say or do e.g. confusing signals from body language, gesture, tone of voice, facial expression.

Social Interaction – Getting on with other people

Difficulties range from indifference and aloofness to wanting desperately to make friends but not understanding social rules and other people's behaviour and feelings well enough to do so successfully. Some people with autism have real difficulties with social situations.

Imagination – Thinking and Behaviour

There may be deficits in imaginative and conceptual skills, and difficulties in making sense of the world. These lead to a rigid way of thinking and doing things, repetitive activity and narrow interests. Changes of routine cause anxiety and distress.

What can help?

Language

- Keep your own language simple
- Keep sentences short and to the point
- Use the person's name to get their attention first
- Give time for the person with autism to process what you say and to respond
- Avoid 'flowery' phrases and abstract ideas
- Speak clearly and watch for signs of understanding what is said

Visual Support

- Give visual clues, if appropriate, to aid understanding e.g. photos, picture symbols, objects of reference
- Using sign language where appropriate, may help get your meaning across

Structure

- Provide a clear structure to a day so s/he knows what to expect and when
- Keep to predictable routines
- Explain any changes in advance, if possible, to minimise anxiety
- If you need more information, please contact our Information Helpline on 0121 450 7575, or email info@autismwestmidlands.org.uk



Asperger Syndrome is a disorder on the autistic spectrum that causes restrictions to normal functioning in the areas of communication, socialisation and imagination and often in physical co-ordination and sensory perception. It affects both boys and girls, but currently affects boys in significantly higher numbers due to their displaying more aggressive and disruptive behaviours and girls seemingly having a better ability to mask their problems. An Austrian psychiatrist, Hans Asperger, originally described it in 1944.

Children with Asperger syndrome exhibit, to a greater or lesser degree, a **Triad of Impairment**, which is the defining characteristic of autism, as identified by Dr. Lorna Wing:

- **Communication:** Language impairment across all modes of communication: speech, intonation, gesture, facial expression and other body language.
- **Inflexibility of thought:** Rigidity and inflexibility of thought process: resistance to change, obsessive and ritualistic behaviour, may parallel play as opposed to playing and interacting with peers
- **Socialisation:** Difficulties with social relationships, poor social timing, lack of social empathy, rejection of normal body contact, inappropriate eye contact.

Alongside the triad there may be sensory issues often referred to as the fourth strand (see our separate Sensory sheet).

Asperger syndrome, like many autistic spectrum disorders, is a very individual syndrome. There will be wide variations in the physical and mental symptoms presented, in the resulting degree of difficulties for the individual and in any early signs noted by parents. The presence of other disorders (see below) may confuse the issue.

Some people believe that HFA and Asperger syndrome are one and the same thing. The differences between AS and HFA are subtle but generally, children with a diagnosis of Asperger syndrome do not exhibit early cognitive, language or developmental delay.

Some people with a diagnosis of Asperger syndrome may be highly intelligent. Sometimes they can lead a perfectly normal life with little difficulty, but sometimes, the degree of impairment can make life just as much of a challenge as for those with autism.

Verbal skills

People with AS generally have good verbal skills, but when speaking there may be little facial expression, gestures may be limited, and intonation can be monotonous. The content of speech may be abnormal, with lengthy discussions on a favourite subject. Words may be invented and words repeated over and over again.

The good verbal skills may mask a tendency to rely on literal meaning (e.g. 'hop off the bus') and an inability to read body language and facial expressions. Subtle verbal jokes and sarcasm may not be understood. Poor auditory processing skills mean that sentences can often be repeated word for word but the person with AS is unable to comprehend what it actually means. Visual input is often helpful – written or with picture diagrams.

Inflexibility of thought

A person with AS will often have a narrow range of interests and become very knowledgeable and obsessive about a particular subject, sometimes to the exclusion of all else.

Routine is extremely important to people with AS. They may feel the need to adhere to specific rituals and

will become unduly upset by changes in their known timetable. Their pronounced lack of flexibility in both daily life and thought means that they must be carefully prepared for any change. Lateral thinking and using imagination to cope with different circumstances are not skills that come naturally to them!

Social skills

People with AS make better efforts to adapt socially than do those with autism. They have a genuine desire to make social contact but there are problems with two-way interaction and the inability to understand social conventions and these can carry on into adolescent and adult relationships too without the right programmes and training opportunities. Social skills often overlap with communication and inflexibility of thought.

It can affect:

- **Conversational skills:** greetings, joining a conversation, verbal turn-taking, listening skills, talking about a particular topic, awareness of personal space, ending a conversation.
- **Play skills:** observational skills, joining play, turn-taking, sharing, compromising, conflict resolution, coping with 'no', coping with losing, reciprocal play, ending play.
- **Understanding emotions:** reading facial expressions, reading body language, voice quality - intonation, pitch, speed, awareness of own body language, having a large emotional vocabulary e.g. not just happy/sad.
- **Dealing with conflict:** anger management and self-regulation skills, the ability to ask for help, ability to walk away from a stressful situation, being assertive but not aggressive, dealing with bullying, etc.
- **Friendship skills:** as above but also things like knowing what a friend is, being able to choose appropriate friends, recognising true friends from false friends, the ability to share a friend, deal with peer pressure etc.

Other difficulties

They can be very egotistical and chauvinistic, and create impossibly high standards for themselves in all that they do, leading to anxiety when perfection cannot be achieved.

In general, anxiety features significantly in the lives of those affected, apart from fear of failure. Often the anxiety is related to low self-esteem, a fear of being misunderstood and of not understanding others. There is also the anxiety associated with an awareness of being different and not fitting in.

Poor physical and visual motor skills, clumsiness and poor co-ordination can be seen as characteristics of AS but are not always present.

Strengths

Some but not all people with AS have excellent rote memories. They can be completely focused on the work in hand. Average or above-average intelligence.

Extensive vocabulary – but many people have difficulty with the practical use of language. Expertise in their chosen topic of interest – although this can become difficult in social situations as they may only talk about one topic. Excellent factual memory for their chosen topic of interest. Dedication and commitment to their job if they work in a supportive environment and their job is suited to their interests. The drive to perform well at school or work, if given a supportive and inclusive environment.

Problems associated with school

Typically, children with AS may appear to be coping academically in primary school but have a high level of anxiety and lack of friends. They are likely to be exhibiting some disruptive behaviour, either at home, or at school, or both. This behaviour may have been deemed odd and noticed at home from an earlier age, but may have been discounted by professionals as not being significant. Keeping a diary of these behaviours can help build up a better idea of a child's difficulties.

Sometimes the transfer to secondary school takes place before real problems surface. The difficulties may not be academic (children with AS are frequently top of the class). They are more likely to be because there is lack of understanding of the behaviour and intentions of others, the meanings of the instructions and lessons, or an inability to interpret the wide variety of verbal and non-verbal language used by teachers and peers. They can be prone to being bullied due to their lack of social skills and for their reactions.

Asperger Syndrome is known to coexist with other syndromes, such as:

- **Attention Deficit / Hyperactive Disorder (ADHD):** A condition giving rise to inattention and impulsivity, often combined with extreme levels of motor activity.
- **Dyspraxia:** A problem with gross and/or fine motor skills.
- **Obsessive-Compulsive Disorder:** When ritualistic actions such as constant hand washing etc. have to be performed, sometimes many hundreds of times a day, before the sufferer can move on.
- **Speech and Language problems:** (e.g. SPD – Semantic Pragmatic Disorder) - Lack of understanding idioms, inability to use appropriate speech in appropriate places and a tendency to take everything literally.

Plus possibly -

- **Anxieties and phobias:** People with AS are often nervous and anxious of any change in their lives; they can also be unnaturally afraid of quite ordinary things.
- **Depression:** People with AS can become depressed about their lack of a social life, their inability to function independently at school or college, if they feel rejected by potential friends or employers.



USEFUL CONTACTS

The National Autistic Society

The largest autism charity in the UK can help with local support groups; information on Asperger Syndrome for individuals, parents, professionals; befriending; training; links and much more.

Web: www.autism.org.uk

Helpline: 0845 070 4004 (10am-4pm)

Parent to Parent line: 0800 9520 520

Advocacy or Educational Service /

Tribunal Support Scheme: 0845 070 4002

Social Programmes: 0115 8473 540

They also have an assessment and diagnostic centre in Kent (The NAS Lorna Wing Centre for Autism).

Tel: 020 8466 0098

Resources for Autism

Aims to fill the gaps in practical services for those on the spectrum by providing music and art therapy, adult art and social groups, play, youth and holiday scheme provision and home based family support. Currently provide services in London, home counties and Birmingham.

Web: www.resourcesforautism.org.uk

Email: admin@resourcesforautism.org.uk

Tel: 020 8458 3259

Autism Independent UK

Offers information on their Web, a diagnostic & assessment resource centre, helpline, training (mostly for professionals but also for parents), library of books and videos and are developing group homes.

Web: www.autismuk.com

Email: autism@autismuk.com

Tel: 01536 523274

Autism London

Provides support for those affected by autism & Aspergers syndrome, living in London.

Tel: 0845 603 7954

Web: www.autismlondon.org.uk

Email: info@autismlondon.org.uk

Autism Research Centre

Based at Cambridge University, ARC does research to understand the causes of autism and develop new methods for assessment and intervention. You can download from their Web various tests for autism and Asperger Syndrome.

Web: www.autismresearchcentre.com

Tel: 01223 746057

Contact a Family

Provides support, information and advice to families with disabled children or those with a medical condition.

Web: www.cafamily.org.uk

Helpline: 0808 808 3555

Cerebra

For parents of children with brain injuries and neurological problems, including Asperger Syndrome and autism. Has a helpline, telephone counselling service, sleep service, DLA Guides, grants scheme, speech and language therapy voucher scheme, holiday home and more.

Web: www.cerebra.org.uk

Parent Support Helpline: 0800 32 81 159

Autism NI (PAPA)

The Northern Ireland Autism Charity.

Web: www.autismni.org

Tel: 028 9040 1729

Aspergers Network

Based in Northern Ireland, they have a helpline, parent support groups, social groups, adult groups, advocacy and Teens and Twenties social outing groups.

Web: www.aspergersnetwork.org.uk

Helpline: 028 92 611851

Irish Autism Action

Web: www.autismireland.ie

Tel: 044 933 1609

The Scottish Society for Autism

Web: www.autism-in-scotland.org.uk

Tel: 01259 720044

Spectrum Girls

For AS girls of all ages who want to meet new friends. A social group meets in Herts for those from London and Home Counties, others can be pen pals or cyber mates.

Email: spectrumgirls@sky.com

Tel: Lesley Zorlakkki 0771 448 3485

Girls Connect

A support group in Twickenham for families with teenage girls with AS/HFA.

Email: Louise at girlsconnect@metooandco.org.uk

Web: www.metooandco.org.uk/girlsconnect.html

USEFUL READING

See also OASIS information sheet, 'Books – where to find them'

OASIS publishes A First Guide to Asperger

Syndrome (2nd edition) in its First Guide series (Price £6.00 plus p&p or you can download it free from our Web). Publications list/order form available on our Web, or email/telephone for one to be sent to you.

OASIS free Information Sheets: including others on aspects of AS, please contact OASIS for the full list or download them from the web.

Web: www.oasis.co.uk

Information for parents - autistic spectrum disorders a free booklet with lots of advice and contacts available from DfES Publications.

Tel: 0845 602 2260

or download from

Web: www.earlysupport.org.uk

(go to 'Materials for download' and then 'Information for Parents booklets').

Check these publishers for new books on Asperger Syndrome/autistic spectrum disorders, which come out regularly:

Routledge Education

(member of the Taylor Francis Group)

Tel: 020 7017 6563 (Marketing)

Web: www.routledgeeducation.com

(academic and research based) or

Web: www.routledgeteachers.com

Jessica Kingsley Publishers

Web: www.jkp.com

Email: post@jkp.com

Tel: 020 7833 2307

The NAS

The NAS books are supplied by Central Books. You can order online.

Web: www.autism.org.uk

Tel: 0845 458 9911

SEN Marketing

Books and software for special educational needs.

Web: www.senbooks.co.uk

Tel: 01924 871697

The internet book shop

Web: www.amazon.co.uk

USEFUL INTERNET SITES

If you have Internet access try the following for a wide range of articles:

www.aspergerfoundation.org.uk is a practical Web with info sheets, training details, etc.:

www.autism-help.org a site set up by an Australian social worker/parent of an autistic child. It has a huge amount of information.

www.faaas.org is a site for families of adults with AS.

www.maapservices.org a US site for more advanced individuals with Autism, AS and Pervasive Developmental Disorder.

www.tonyathwood.com.au Dr Tony Athwood's Web has a mine of information and articles for parents and people with AS.

www.udel.edu/bkirby/asperger/ a very informative and full American site, run by OASIS (On-Line AS Information & Support).

www.users.dircon.co.uk/~cns/ for University Students with Autism and AS.

For more organisations look at our separate OASIS Information Sheet on Useful Contacts and Websites.

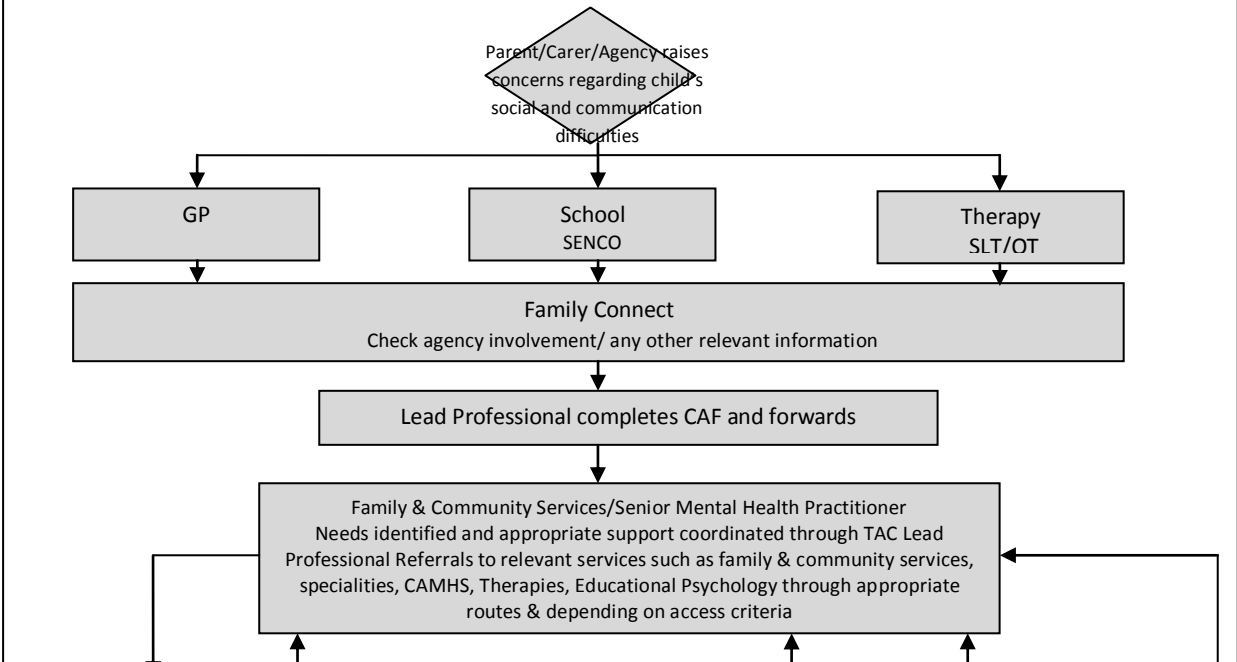
The Cambian Group run seven residential special schools and colleges for young people with autistic spectrum disorders, Asperger Syndrome/HFA, severe learning difficulties. Please contact OASIS for the prospectuses of our schools and colleges specifically for autism.

OASIS produces 8 chargeable publications entitled 'First Guide to...'; wallet sized cards explaining 9 learning disabilities and a wide range of free information sheets.

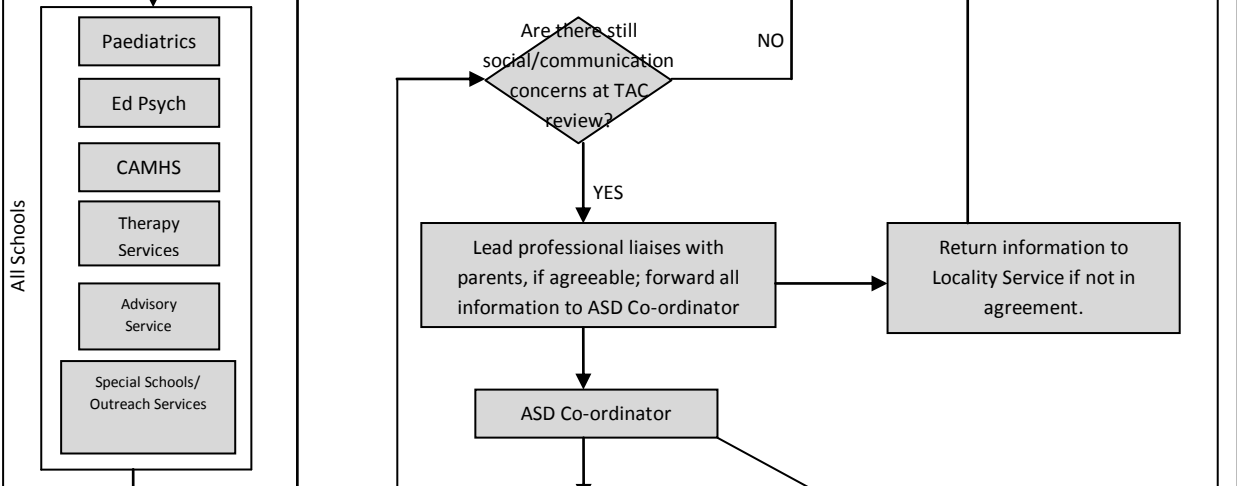
Please contact OASIS (see front of sheet for contact details) for the full list, or view them on the website www.oasis.co.uk.

All the information sheets are checked and amended annually. Please ensure you have the current version.

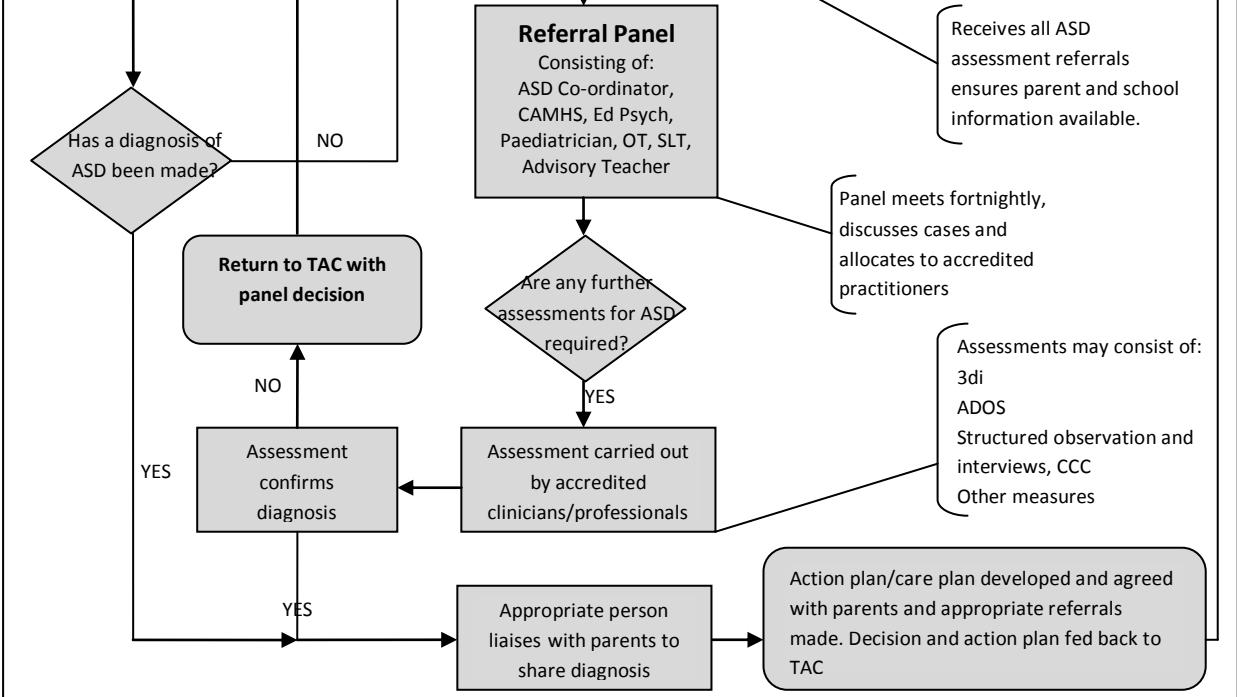
Early Intervention Services



Referral



Panel/Assessment



**Children & Young People Scrutiny Committee
Forward Plan 2011/12**

MEETING DATE	AGENDA ITEM	LEAD MEMBER/ OFFICER	ADDITIONAL ATTENDEES
Tuesday, 9 th August 2011 6.00pm VIP Suite	<ul style="list-style-type: none"> • Phase 1 Children's service review and re-structure • Work Programme 	Cllr. Paul Watling Laura Johnston Clive Jones	
Monday, 19 th September 2011 6.00pm Scrutiny Meeting Room	<ul style="list-style-type: none"> • Corporate Parenting Strategy • BSF Programme • Short Breaks for Disabled Children 	Cllr. Paul Watling Jim Collins Damien Madine Clive Jones Stacey Norwood	Jonathan Eatough Chloe de Poix Guy Kershaw
Thursday, 20 th October 2011 6.00pm Scrutiny Meeting Room	<ul style="list-style-type: none"> • Child Poverty workshop • Phase 2 Family & Community Service and Safeguarding structure proposals 	Chris Marsh Jim Collins Karen Perry	
Wednesday 7 th December 2011 6.00pm Scrutiny Meeting Room	<ul style="list-style-type: none"> • Planning of School Places – Secondary School Provision • Update on BSF programme • Updated position on the costs of the Mott MacDonald investigation into the Abraham Darby canopy collapse 	Cllr. Paul Watling Jim Collins	
Tuesday 13 th December 2011 6.00pm Scrutiny Meeting Room	<ul style="list-style-type: none"> • Phase 2 Family & Community Services and Safeguarding Structure proposals – to agree the Committee's response. • Co-operative Youth Offer 	Cllr Paul Watling Clive Jones Karen Perry	Jas Bedesha
Thursday 9 th February 2012	<ul style="list-style-type: none"> • Meeting with children and young people in care on leaving care and becoming independent. 	Chloe de Poix Karen Perry	Andrew Doggett Karen Kalinowski

MEETING DATE	AGENDA ITEM	LEAD MEMBER/ OFFICER	ADDITIONAL ATTENDEES
			Paul Grainger
29 th February 2012	<ul style="list-style-type: none"> Issues raised at the meeting with young people in care Cabinet report on proposals for Jigsaw 	Karen Perry Chloe De Poix Jim Collins Clive Jones	Karen Kalinowski Angela Yapp Nicola White Lee Higgins Richard Smith Jill Rallings
26 th March 2012	<ul style="list-style-type: none"> Short Breaks for Disabled Children School Governance- impact on the local authorities from introduction of academies, trust and free schools. 	Cllr Paul Watling Viv McKay Jim Collins	
19 th April 2012	<ul style="list-style-type: none"> Child Poverty – update on the visit to Sutton Hill family centre. Feedback on how the results of the workshop on 20th October are being taken forward. BSF update 	Clive Jones Chris Marsh Jim Collins Guy Kershaw	
22 nd May 2012	<ul style="list-style-type: none"> Children’s Autism Strategy 	Diane Partridge Michael Bennett	
Forward items			
Youth Services (this was included in the review of restructure proposals)			
Corporate Parenting – feedback from meeting on 20 th October on suggestions for PI’s, college and HE events for children in care			
School governance, changes in relationship with local authority with shift to academies and free schools, Schools Trust Partnership, feedback in 6 months			
Tracking of children when they transfer schools			