

# Cheshire East

## All-Age Autism Strategy

### 2019-2022

[Draft for consultation]



Cheshire East  
SEND Partnership



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## Forward

This strategy has been developed through co-production and engagement with all our partners; stakeholders, people with autism, their families and carers.

Autism is a lifelong condition that can significantly affect the lives of people living with it, and it is part of the daily life of around 600,000 people in the UK.<sup>1</sup> People with Autism are valued members of our communities and this Strategy reflects a shared commitment to improve the health, wellbeing, and opportunities for both children and adults with Autism.

Preparing for adulthood is a recognised challenge. While most young people with autism will not need specialist services as an adult, they will need support as they move towards adulthood in developing independence – for example; learning additional life skills, travelling independently and seeking opportunities for further education, employment and independent living.

The Strategy seeks to ensure that people with autism their families and carers are able to achieve their full potential by bringing together the Council, health and social care partnerships, educational settings, local employers, service providers, voluntary organisations and the people of Cheshire East.

To do this, the Strategy contains clear aims and objectives, which have been defined and shaped by the key priorities. The Strategy is supported by a Delivery Plan - which will be updated throughout the lifespan of the Strategy, reflecting changes in national and local policy to ensure we capture every opportunity to further enhance our vision for improved health, wellbeing, and quality of life for people with autism, their families, and carers.

We would like to thank all of you who have contributed to its development. The Strategy provides an opportunity to make a significant difference to the lives of people with autism and its success lies in the extent to which it achieves this. Our challenge now is to work together and make those aspirations real.

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<sup>1</sup> [The NHS Long Term Plan S.2.31. January 2019](#)

## Executive Summary

The Cheshire East Autism Strategy makes a commitment to improving services and support for children and adults with autism, and their families and carers. This Strategy acts as a roadmap for commissioning intentions and service re-design and improvement initiatives throughout its lifespan.

Autism touches the lives of many people in Cheshire East, and it is therefore essential that we have an all-age Strategy which enables us to work in partnership to support people with autism and their families in the most effective way. This includes raising awareness and understanding of autism in our wider communities, whilst also ensuring young people in the transition into adulthood reach their educational potential, gain employment, have a choice of housing, and have access to local services which are autism friendly.

The Cheshire East All Age Autism strategy has been prepared in line with the Autism Act [2009]<sup>2</sup>; the National Autism Strategy<sup>3</sup> and the local Written Statement of Actions following the local area SEND inspection<sup>4</sup>. The strategy should be read in association with *My Life, My Choice* the Council's Learning Disability Strategy and the local SEND strategy [Ref], as they complement each other to improve outcomes for individuals and families.

To steer and inform the strategy, a working group was established of people with autism, their families, carers, representatives from Social Care, Education, Housing, Local Area Coordinators, Health, Employment Support, Criminal Justice, Police, Advocacy, autism specific agencies, as well as Third Sector organisations.

As the Strategy highlights, we have also collected the thoughts, experiences, and suggestions of people with autism, their families, friends, and carers in what needs to be improved. Combining this with recent national and local data and evidence, we have identified key themes, which are explored throughout the Strategy.

Autism is everyone's business, and we know if we get things right for children and young people, they are more likely to enter adulthood with the appropriate level of support and therefore have greater opportunity to achieve their aspirations.

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<sup>2</sup> [www.legislation.gov.uk/ukpga/2009/15/section/3](http://www.legislation.gov.uk/ukpga/2009/15/section/3)

<sup>3</sup> [Implementing "Fulfilling and rewarding lives. Dept of Health 2010](#)

<sup>4</sup> [Cheshire East Written Statement of Action for Special Educational Needs and/or Disabilities \[SEND\] Aug 2018](#)

## Our Vision

In Cheshire East we are committed to improving the lives of individuals with autism. We will do this by working with families, local groups, and partner organisations to address the existing frustrations in accessing a number of services. It is critical that a significant amount of focus is placed in making fundamental improvements to the diagnostic and assessment pathway and to improve the timeliness of the education, health and care needs assessment process.

Our vision includes an improved diagnostic and assessment pathway, during which individuals, families and carers are supported throughout, have access to clear information and are offered the most appropriate and active service to meet their needs.

We want to empower individuals and families to participate in decisions about assessments and diagnosis, to receive support, information and advice as early as possible as soon as needs have been identified. At the heart of the strategy, we want to provide support to help families to understand the diagnosis pathway.

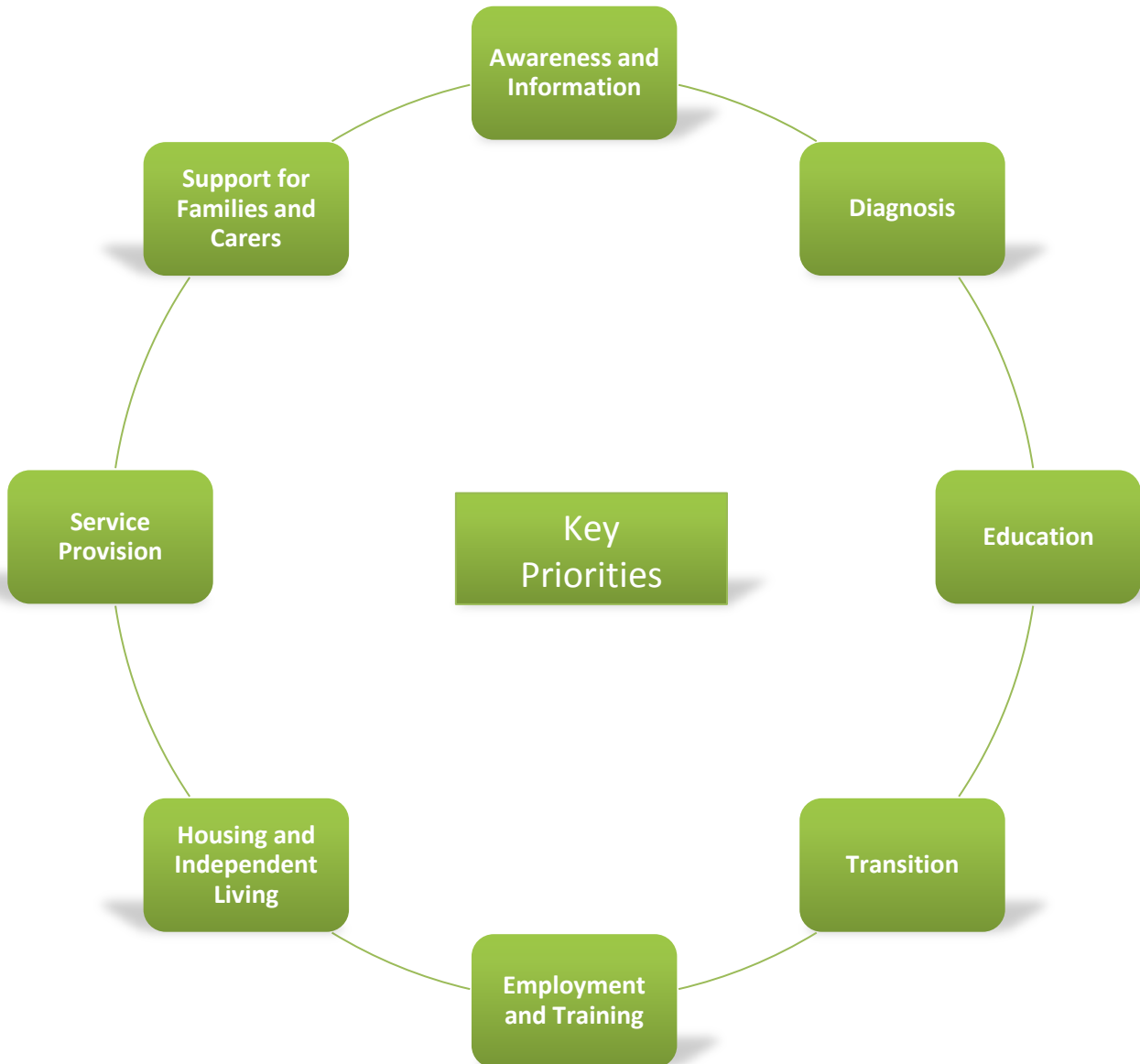
The strategy is intended to provide more timely and effective early intervention support to children, young people, adults, and families. There is an ambition that having appropriate and timely support in place will reduce the need for crisis intervention into Child and Adolescent Mental Health Services (CAMHS) and adult mental health services, and help prevent individuals entering the criminal justice system. As far as possible, we wish to ensure that all professionals working with children, young people and adults are able to demonstrate a good understanding of both autism and the support that they can provide to individuals with autism and their families.

Our approach will emphasise the importance of effective, well lead transition periods throughout an individual's life by promoting independence and enhancing lives. We want people to feel that Cheshire East is a place where you can participate socially and lead an independent life, including reaching their educational potential, gaining and maintaining employment, living close to family and social networks, and taking part in leisure and social activities.

The purpose of this strategy is to help guide us towards achieving our vision over the next 3 years, by setting the tone and direction to improve outcomes for people with autism and their families. Our ambitions and the success of the priorities are dependent on partner organisations working in an integrated way to achieve the same goals. NHS bodies and Cheshire East Council will pursue continuous progress with all the priority areas in the strategy, to put our vision into action in line with the Autism Act 2009, NICE guidance and the Written Statement of Actions following the local area SEND inspection.

## Our Priorities

In order to meet the ambitions set out within this Strategy, we have agreed a number of key priorities, which have been coproduced through extensive working with people with autism, their families and carers and professionals within the sector.



## Our key objectives

### ***Awareness and information***

To ensure people with autism, their careers and families and professionals are able to access clear, comprehensive and up-to-date information about where to go for support, and have a means of sharing knowledge and experiences with others

### ***Diagnosis***

We will improve the diagnostic and assessment pathway by reducing the waiting times and implementing an all age autism pathway. Participate in decisions about assessment and diagnosis

### ***Education***

We will ensure that there are significant improvements of the timeliness and efficiency of the education, health and care needs assessment processes

### ***Transition***

We will ensure that a seamless transition for children throughout their lives and entering adulthood, including during childhood, specifically into school / primary to secondary or mainstream to special school - encouraging independence from an early stage so that individuals do not become dependent on services and are able to live a fulfilled life with the same opportunities as anyone else

### ***Employment and training***

Develop pathways to suitable employment and training is not just important economically; it also offers the opportunity for individuals to feel valued, respected and included in society and can help prevent isolation

### ***Housing and independent living***

We will ensure that everybody has the opportunity to live in their own home, within a community setting, with their own front door and access to local amenities. We will improve the housing offer available and seek to provide choice, opportunities and support

### ***Service provision***

Specialist health and social care services will be provided as required and will be easily accessed by those who need them. Individuals and families encounter a range of high-quality services that are joined-up, easy to navigate and appropriate for their needs

### ***Support for families and carers***

We will seek to ensure that carers are identified, supported and empowered to manage their caring role, and are able to have a life outside of caring

## Why we need an Autism Strategy

### National and local context

The Autism Act [2009] Section 2<sup>5</sup> states that we need to make services better. It says that people with autism may not always get the help that they need; it is the only condition-specific legislation of its type in England. The statutory guidance places a duty on all local authorities and NHS bodies to produce an autism strategy. We must legally take notice of the guidance and follow the relevant sections, failure to do so without a good reason why specific actions have not been met can lead to us being liable for judicial review or action by the Secretary of State<sup>6</sup>

The need for an All Age Autism Strategy for Cheshire East has been informed by several drivers;

- Think Autism 2014 [13]
- Equality Act 2010]
- The Care Act 2014
- Care and Support Assessment regulations [2014] & Transforming Care Recommendations
- Accessible Information Standards NHS England 2016
- United Nations Convention for the Rights of the Child
- Supporting Pupils at School with Medical Conditions 2014
- Safeguarding requirements
- NICE Guidance CG142, QS51 & Professional Standards and guidance
- Children and Families Act 2014
- Lenehan Report [January 2017]
- Building the Right Support 2015
- Keeping Children Safe in Education Act 2014
- Working Together to Safeguard Children 2018

### Transforming Care

Transforming care is all about improving health and care services so that more people can live in the community, with the right support, and close to home. The function of Transforming Care Partnerships is to work with people with a learning disability, autism or both and their families and carers to agree and deliver local plans for the programme. There has been a greater focus on children and young people more recently concerning services and pathways to avoid children and young people being required to go into hospitals or residential placements and supporting to remain in mainstream education.

### Building the Right Support

Building the Right Support published in 2015, and sets out a clear framework to develop more community services for people with learning disabilities and/ or autism who display behaviour that challenges, including those with a mental health condition, and closes some inpatient facilities. A supplementary document in September 2017, which has a greater focus on children and young people.

### Think Autism Strategy (2014) – Review

The government's decision to update the National Autism Strategy in England to include children and young people has been welcomed by the sector,<sup>7</sup> who had been calling for a national strategy to meet the needs of children on the autism spectrum. Through the review the Government will collect

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<sup>5</sup> [Autism Act 2009 S. 2](#)

<sup>6</sup> [Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy](#)

<sup>7</sup> [Government review to improve the lives of autistic children December 2018](#)



evidence from autistic children, families and their carers on how to improve current levels of support. This is explored throughout this Strategy, in which we capture;

- Further improvements to the coproduction of address autistic children's and young people needs holistically
- Increase poor understanding of autism
- Develop diagnostic services to seek diagnose autism earlier, in line with clinical guidance
- Enhance the transition pathway between children and adult services

### Care education and Treatment Reviews

Care Education and Treatment Review [CeTR] standards have been set out to offer a process for those at risk of admission or who have been admitted. This Strategy should be read in conjunction with the Care and Treatment Review Standards. CeTRs are for people whose behaviour is seen as challenging and/or for people with a mental health condition. They are used by commissioners for people living in the community and in learning disability and mental health hospitals.

### The Lenehan Reports

The Lenehan report provides strategic overview and recommendations about the practical action that can be taken to co-ordinate care, support and treatment for children and young people with complex needs [and behaviour that challenges] involving mental health problems and learning disabilities and/or autism.

The 'Think Autism' national strategy, published in 2014, and the consequent 'Statutory Guidance for Local Authorities and NHS organisations' to support implementation of the 'Adults Autism Strategy', in March 2015 updated in 2018, have provided detail on what improvements need to take place to make meaningful changes for people with autism.

### The NHS Long Term Plan<sup>8</sup>

The NHS Long Term Plan released in January 2019 goes some way to address physical health issues as it sets out the intention for the delivery of health services in England over the next 10 years. The NHS Long Term Plan includes Autism for people of all ages, and in particular seeks to address the needs of children and young people and the health inequalities that those on the autistic spectrum may face. It states:

"Across the NHS, we will do more to ensure that all people with a learning disability, autism, or both can live happier, healthier, and longer lives."

With the focus on prevention, the NHS Long Term Plan promises to offer timely support to children, young people, and their families. It also commits to ensure reasonable adjustments are made to enable access to mainstream health services and improve the health and wellbeing of children and adults on the autistic spectrum. This includes access to eyesight, hearing, and dental services for children as part of the general screening reviews. By 2023/24 a 'digital flag' on patient records will identify if a patient has a known learning disability or autism. It further seeks improvements by the introduction of diagnosis Waiting List Standard for children and young people.

### The Local Context

In March 2018, Ofsted and the Care Quality Commission [CQC] carried out a joint area inspection of special educational needs and disabilities [SEND] in Cheshire East. The inspection focused on how partners need to work together to identify, assess and meet the needs of children and young people aged 0-25 with SEND to improve outcomes. The inspection highlighted strengths and weaknesses in the services provided in Cheshire East and

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<sup>8</sup> [NHS England. NHS Long Term Plan January 2019](#)

identified the following areas of significant weakness:

- Timeliness, process and quality of Education, Health and Care Plans
- The lack of an effective ASC pathway and unreasonable waiting times

### What is Autism?

A number of different terms are used to describe Autism. These can include 'autism spectrum disorder', 'autism spectrum', 'Asperger's syndrome disorder' and sometimes just autism; more recently 'autism spectrum disorder'. For the purposes of this document the term Autism and Autism Spectrum Condition [ASC] are both used, whilst Asperger's Syndrome [AS] or High Functioning Autism [HFA] is used to refer to individuals at a higher functioning end of the Autism Spectrum.

Autism is a lifelong condition that affects how a person communicates with and relates to other people and the world around them. Autism touches individuals in many different ways, although people with Autism will experience difficulties in three main areas:

- Social Communication - using and understanding verbal and non-verbal language, such as gestures, facial expressions and tone of voice
- Social Interaction – recognising and understanding other people's feelings and managing their own;
- Social imagination – understanding and predicting other people's intentions and behaviours and imagining situations outside their own routine

Some people with autism also have a learning disability and many of these qualify for support from learning disability services. Others may be of average or above average intellectual ability, have good communication skills and show knowledge or skill in specific areas. They may still experience significant difficulties in key areas but, since they do not require support for a learning disability, find a lack of alternative support to meet their needs. This leaves people in this situation more dependent on families, universal services, and community based support.

People with autism can be more vulnerable to mental illness. An inability to communicate effectively, meet self-expectation or those of others, or problems engaging in everyday life can lead to anxiety or depression. Insufficient understanding of autism can also lead to risk of misdiagnosis, such as psychosis or obsessive compulsive disorder, with inappropriate prescription of drugs. Difficulties with communication, interaction, and social imagination can also leave people vulnerable to misunderstanding others' intentions and sometimes poor judgement which can lead to exploitation, exposing individuals to risk of victimisation or criminalisation.

### The Local Picture

The current prevalence of ASC is around 1.5% of children. This means that nearly 57 of the 3,800 babies born in Cheshire East (29 Eastern Cheshire CCG; 28 South Cheshire CCG) each year are estimated to have ASC.

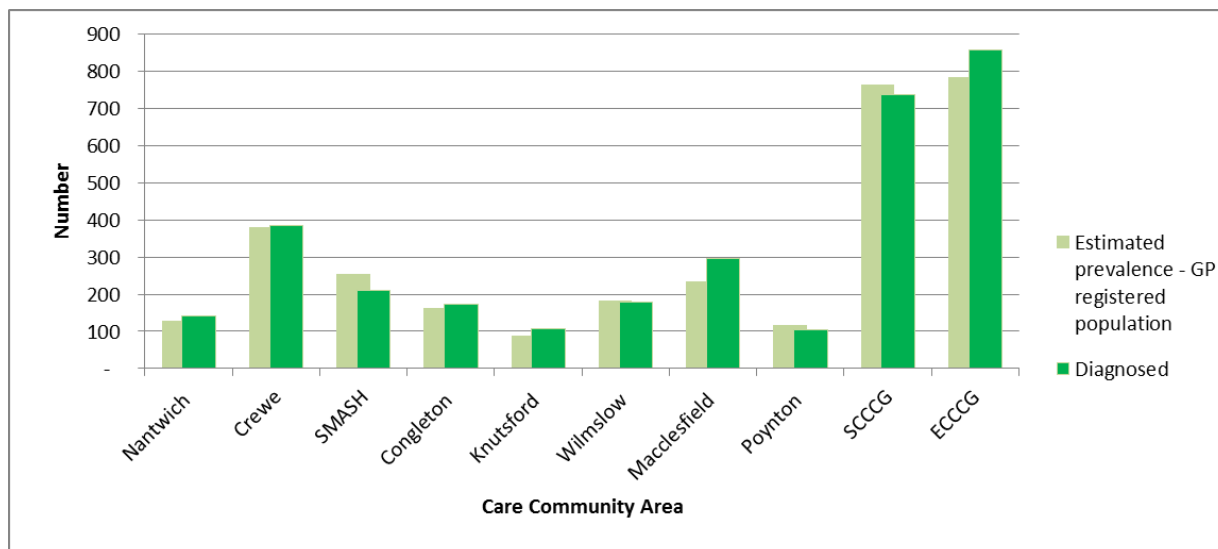
#### The local picture for children and young people

Graphs 1 and 2 highlight the numbers of children and young people with a diagnosis of autism on GP systems within South and Eastern Cheshire CCGs compared to estimated numbers in the population. Overall the number diagnosed (1,594) is greater than the number predicted [1,548] with local prevalence rates averaging at 1.8% compared to the national average of 1.5% [1.6% for SC CCG and 1.9% for EC CCG].

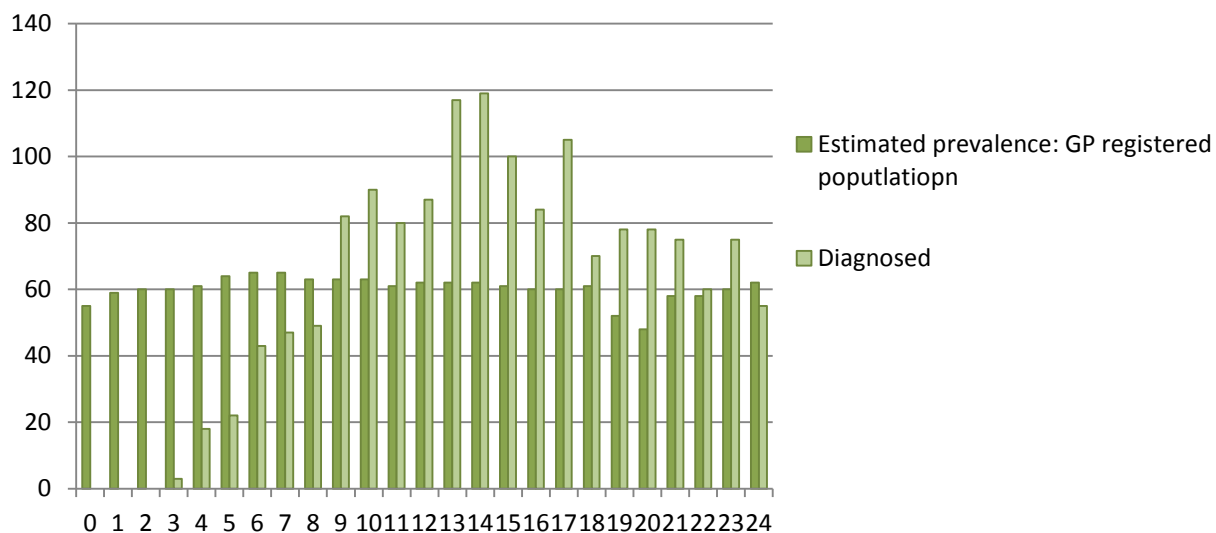
The age-distribution graph shows where the differences peak with a diagnosis rate of 2.8-3% in 13-14 year olds. These differences may be a result of over-diagnosing and/or the local prevalence being higher. Many experts believe that the pattern of behaviour from which autism is diagnosed may not result from a single cause, there is

strong evidence to suggest that autism can be caused by a variety of physical factors which may affect brain development, including; birth trauma; genetics; age of parents. As these factors will vary across geographies, it follows that autism prevalence rates will also vary.

**Graph 1:**  
0-24 years - estimated prevalence and diagnosed<sup>9</sup>



**Graph 2:**  
0-24 years - estimated prevalence and diagnosed in age bands

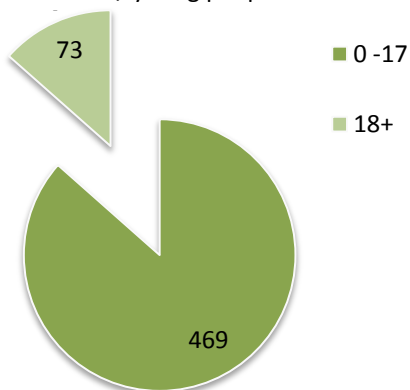


<sup>9</sup> Estimated numbers: Fonagy P et al. Pervasive Developmental conditions. [2015] In: What works for whom? Second edition. The Guilford Press. National prevalence of 1.5% applied to 2012 single year of age mid-year population estimates. Figures rounded [JSNA Jan 2018]

### Education Health and Care plans

The way services are delivered for our children and young people (up to the age of 25) with

**Graph 3:**  
Number of children / young people in Cheshire East



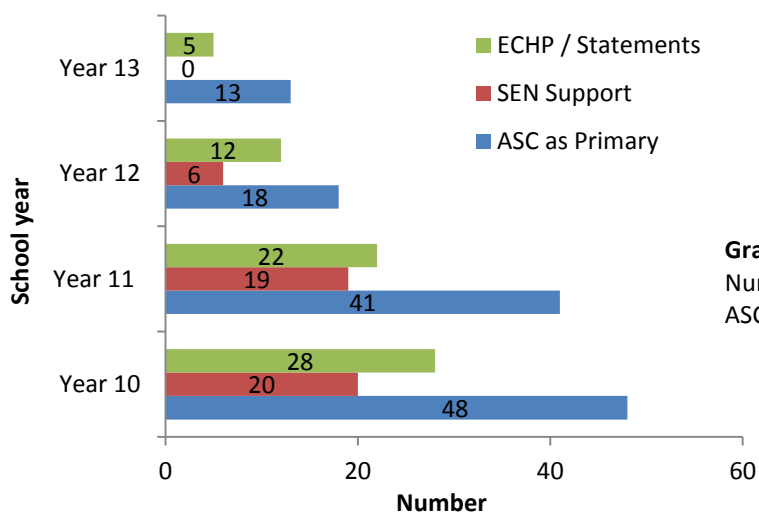
special educational needs and / disabilities [SEND] improved through The Children and Families Act 2014.<sup>10</sup>

In addition to the introduction of Education, Health, and Care Plans [EHCP], it also confirmed the continued need to ensure services are outcome focused, with an emphasis on coproduction and services working together.

Currently in Cheshire East, the number of children and young people with an EHCP, where the primary need is ASC is 542. The

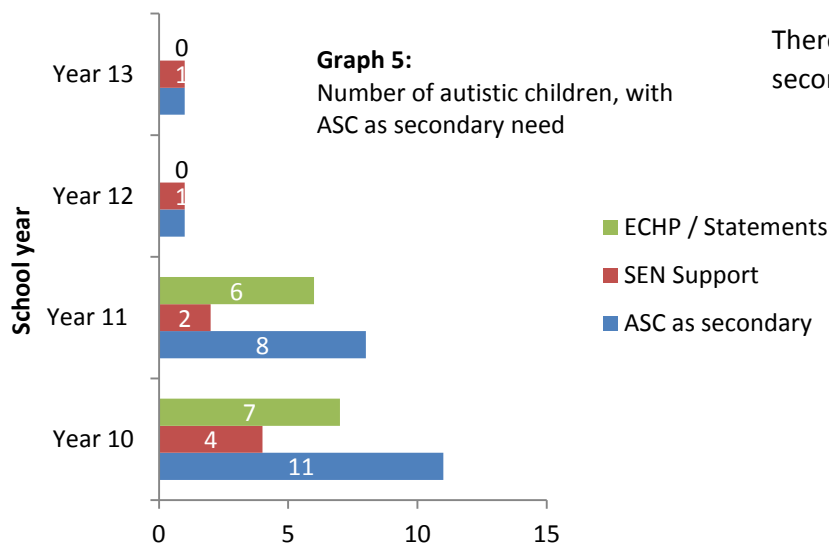
figures within Table 4 include persons who are being educated outside of Cheshire East. However, it represents all children and young people where we are responsible for maintaining the EHCP.

The school census provides information on the primary needs of pupils, even if they are not at the level of EHCP. SEND Primary Need is only collected once per year, therefore these figures relate to January 2018. Figures are for all Academies, Free schools, Maintained schools, University Technical Colleges, Studio schools in Cheshire East (including Special Schools). In terms of the numbers of autistic children, there were 538 with ASC as a primary need [see Graph 4]



**Graph 4:**  
Number of autistic children, with ASC as primary need

<sup>10</sup> [The Children and Families Act 2014 Part 3](#)

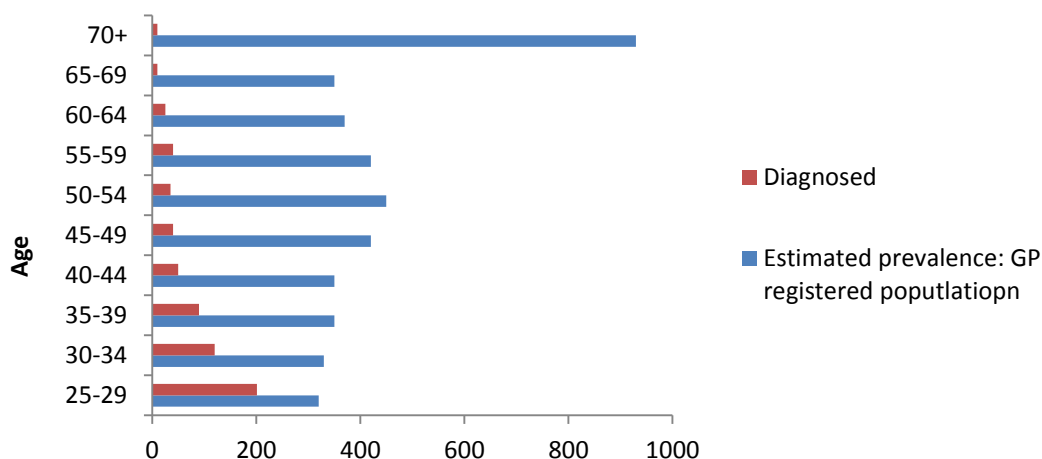


There were a further 108 who had ASD as a secondary need in the Census (Graph 5).

### The local picture for adults

We continually seek to improve our intelligence of the prevalence of autism within our adult population, which is a result of a number of factors. Ideally, an autism diagnosis requires third-party information on early developmental history as well as face-to-face assessment. Older people often struggle to provide information on their developmental history. Parents may no longer be around, and documents such as school reports have often been lost. Even when such information is available, the required level of detail cannot be provided.

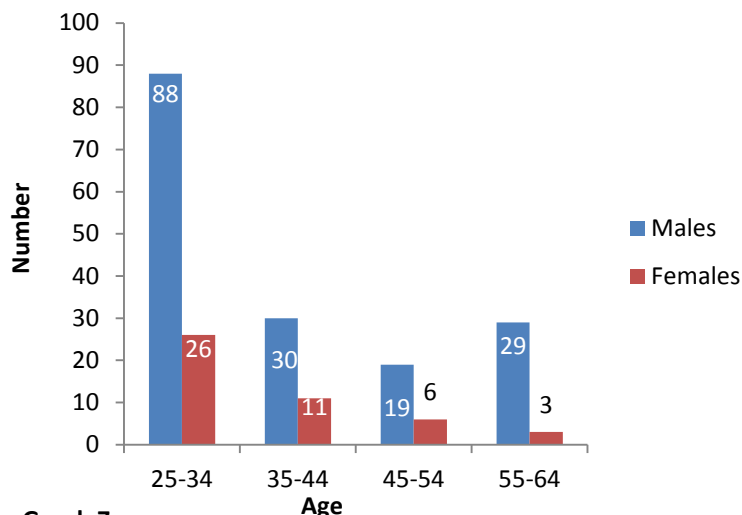
Tables 7 and 8 highlights the prevalence of ASC within the adult population of Cheshire East, detailing the estimated numbers based upon GP registration and those diagnosed.



**Graph 6:** Adult population, prevalence within the Cheshire East - estimated and diagnosed<sup>11</sup>

<sup>11</sup> Estimating the Prevalence of Autism Spectrum Conditions in Adults: Extending the 2007 Adult Psychiatric Morbidity Survey. HSCIC, 2012

It is acknowledged, there are gaps of accurate data available about the numbers of adults with autism. However, social care services hold some information, the figures are far lower than expected. Although autism became a clinical priority within the Royal College of GPs, there is not a requirement for GPs to hold a register other than the overall one for those with a learning disability.



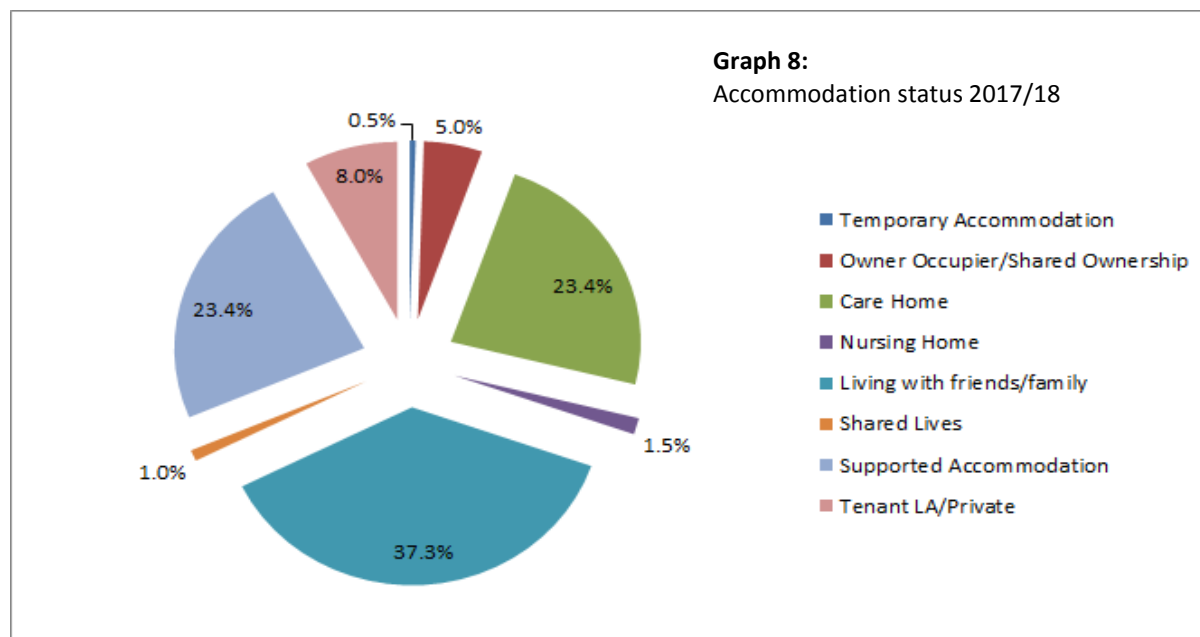
**Graph 7**  
Known number of adults diagnosed with ASC within Cheshire East<sup>12</sup>

### The local picture: housing and employment

#### Housing

There are several housing options available for individuals with autism depending on their level of support need. These options seek to encourage independence and empowering individuals to be able to live independent lives in the community.

Of the 234 clients with a recorded health condition of autism who had contact with adult social care during 2017/18, 33 (14%) have an unknown living status. Graph 8 provides some analysis of the 201 adults whose living status was recorded.

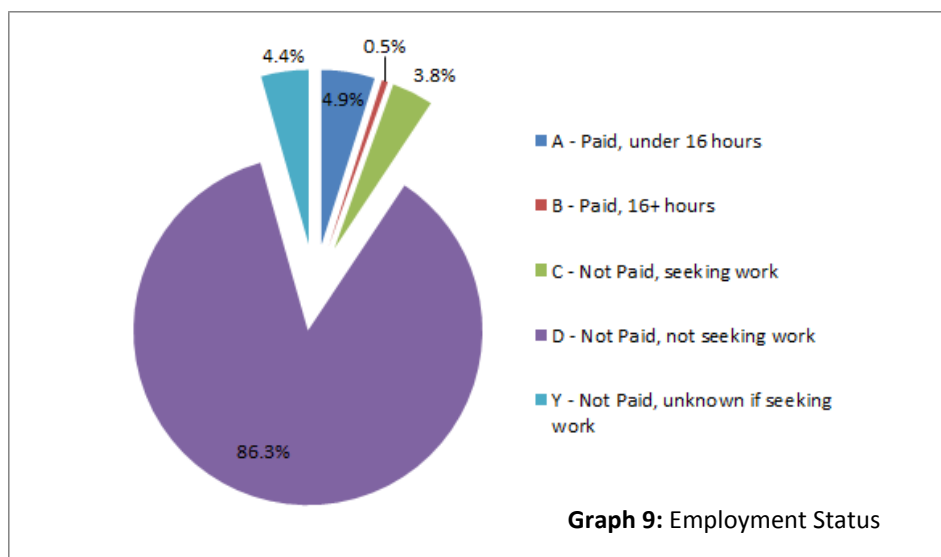


**Graph 8:**  
Accommodation status 2017/18

<sup>12</sup> Living individuals on the Adult Social Care LiquidLogic (LAS) system that are recorded as Autistic, either on LAS or elsewhere (Oct 2018)

## Employment

As Graph 9 details, of the 234 contacts made with individuals with autism spectrum conditions, 52 have no employment status recorded. Of those with an employment status recorded, 5.5% of individuals are in paid work and 3.8% are seeking employment.



## Current Service Provision

### Children and young people: Diagnosis

The care pathway for referral, diagnostic assessment, and service provision for children and young people is currently being reviewed. Preschool children who show possible signs of autism, communication, or behavioural issues can be referred for a general developmental assessment; an autism specific diagnostic multi-disciplinary assessment may be undertaken within the preschool social communication clinic.

Children and young people of school age who show signs of possible autism can be referred by any professional working in primary care, education, or social care to The Cheshire East Autism Team (CEAT).<sup>13</sup>

### Support in educational settings

The Cheshire East Toolkit for SEND provides educational settings with detailed guidance on how they can identify children and young people with different types and levels of special educational need, and information on appropriate steps and strategies to support them. It provides clear information about when a request for an Education, Health, and Care needs assessment, or specialist services, may be required.

### Transition

From home to early years setting – If child has significant identified needs which are highly likely to impact upon transition into an early years setting there is a Settling In Process, which is linked to a Settling In Grant. The named Health professional can liaise with the setting to coordinate a transition planning meeting and invite a representative from the Early Start Team. This takes place for all children with significant special educational needs of all types, and so is not ASC specific.

From EY setting to school – During the summer term prior to the child starting school, the setting, supported by the Early Start team, organise a transition planning meeting linking in with the receiving primary or special school. If child has ASC or social communication difficulties, CEAT will be invited to attend, so that school receive CEAT support from September when the child transitions into school. As above, this process is not an ASC specific offer.

<sup>13</sup> [Living Well Autism CEAT](#)

Cheshire East has developed and administered an effective transition arrangement for young people with disabilities preparing for adulthood. A new transition framework will be established to ensure improved shared working arrangements, oversight and scrutiny, and to deliver a robust professional service to young people moving to adulthood.

Where an individual is on the autistic spectrum but without an associated learning disability, the learning disability service will consider such referrals for assessment. Depending on the presentation of the individual, such assessments will be conducted jointly with another service, such as mental health. This joint assessment would determine which service is best able to support the service user if they are eligible for care and support under the Care Act 2014.

## Adults

The current pathway for adults for referral to specialist diagnostic assessment, and for social care assessment is complex and not well developed, particularly for those with Asperger syndrome. For adults who present with social care needs who have a learning disability and ASC and/or with a mental health problem and ASC, initial referrals can currently be made to the Council's Learning Disability or Mental Health Teams directly. It is important to note that the Council does not necessarily consider the diagnosis as the primary reason for a social care assessment of an individual but considers their presenting needs.

The Care Act 2014 provides the statutory framework for the assessment of adult social care needs, including young people who may be eligible for care and support when they reach the age of 18. The fundamental starting point of the Care Act is the wellbeing principle which includes:

- Personal dignity
- Physical and mental health and well-being
- Protection from abuse and neglect
- Control by the individual over day to day life
- Participation in work, education, training or recreation

Both the learning disability team and the community mental health teams will now be working to new team operating models, which have an explicit acceptance of ASC within their acceptance criteria. It is important to note that the Council is in the process of re-establishing a specialist learning disability team and some people with a learning disability and or ASC will continue to be managed by generic community teams, until the learning disability team has been fully established. It will however, take full responsibility for all young people with a learning disability and or ASC coming through from transition from January 2019.

The social workers within the community mental health team will continue to work in a multi-disciplinary environment with Cheshire and Wirral Partnership (CWP), but from January 2019 will work with Care Act eligible adults with ASC who may or may not have a severe and enduring mental health problem. Currently, acceptance into the community mental health team is predicated on the presence of a severe and enduring mental illness, which can exclude some people with ASC who still have significant needs.

Services will be commissioned by Cheshire East Council, have developed a Dynamic Purchasing System (DPS) for individuals (16+) with complex care needs, including those with ASC. These services will be outcome focused and enable individuals to be confident and reassured that they receive the right support, at the right place and right price. Services commissioned through DPS include supported living; floating support; day opportunities and befriending services. Cheshire East Council have commissioned a more flexible offer of respite support which is available to adults and those in transition to adulthood who have eligible support needs, including those with autism, this includes accommodation-based respite and community based

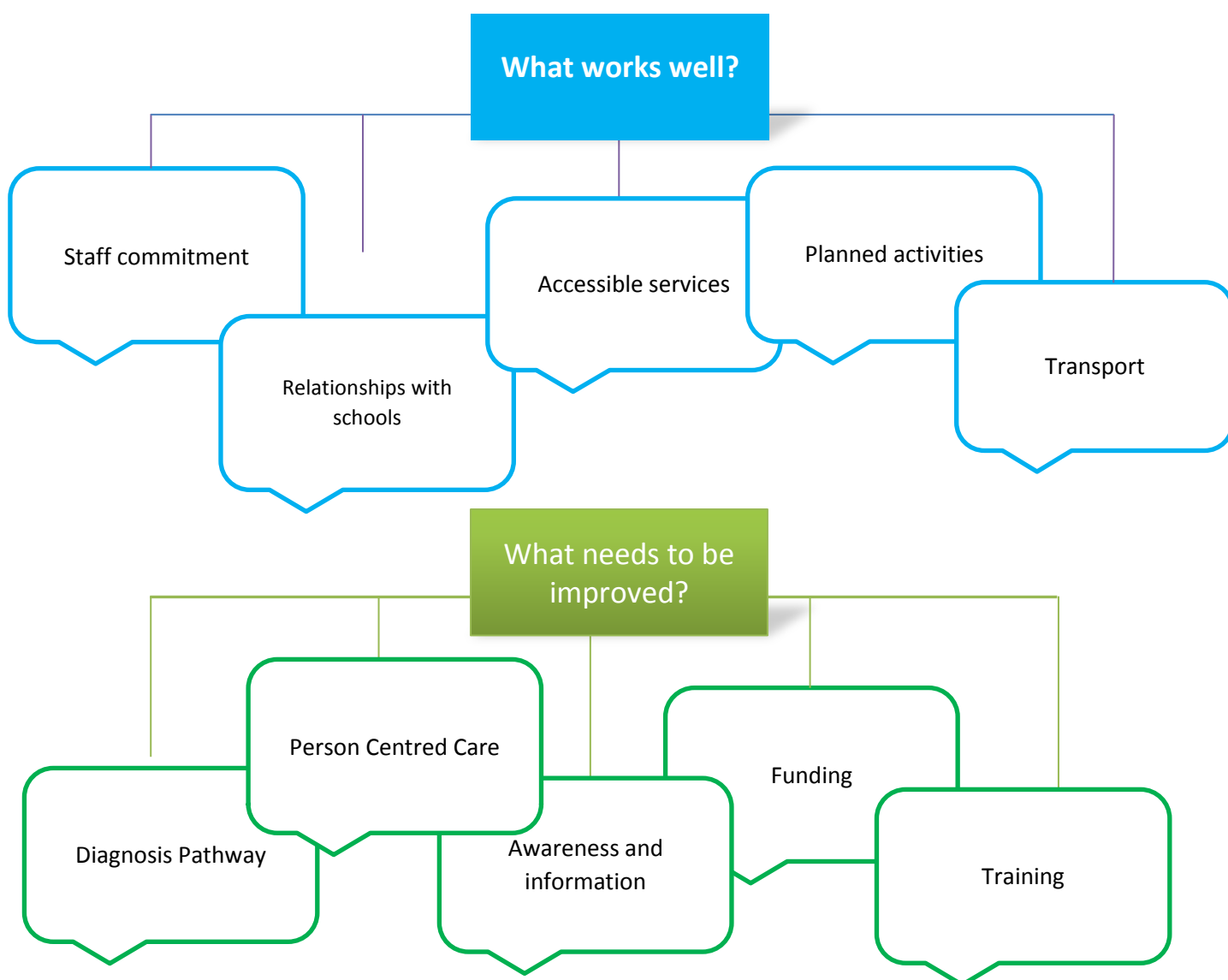


respite. Through this new model we will be able to deliver a more effective range of respite services to be available to both carers and the cared for person, offering a range of personalised options, appropriate to meet the needs of many and offering best value.

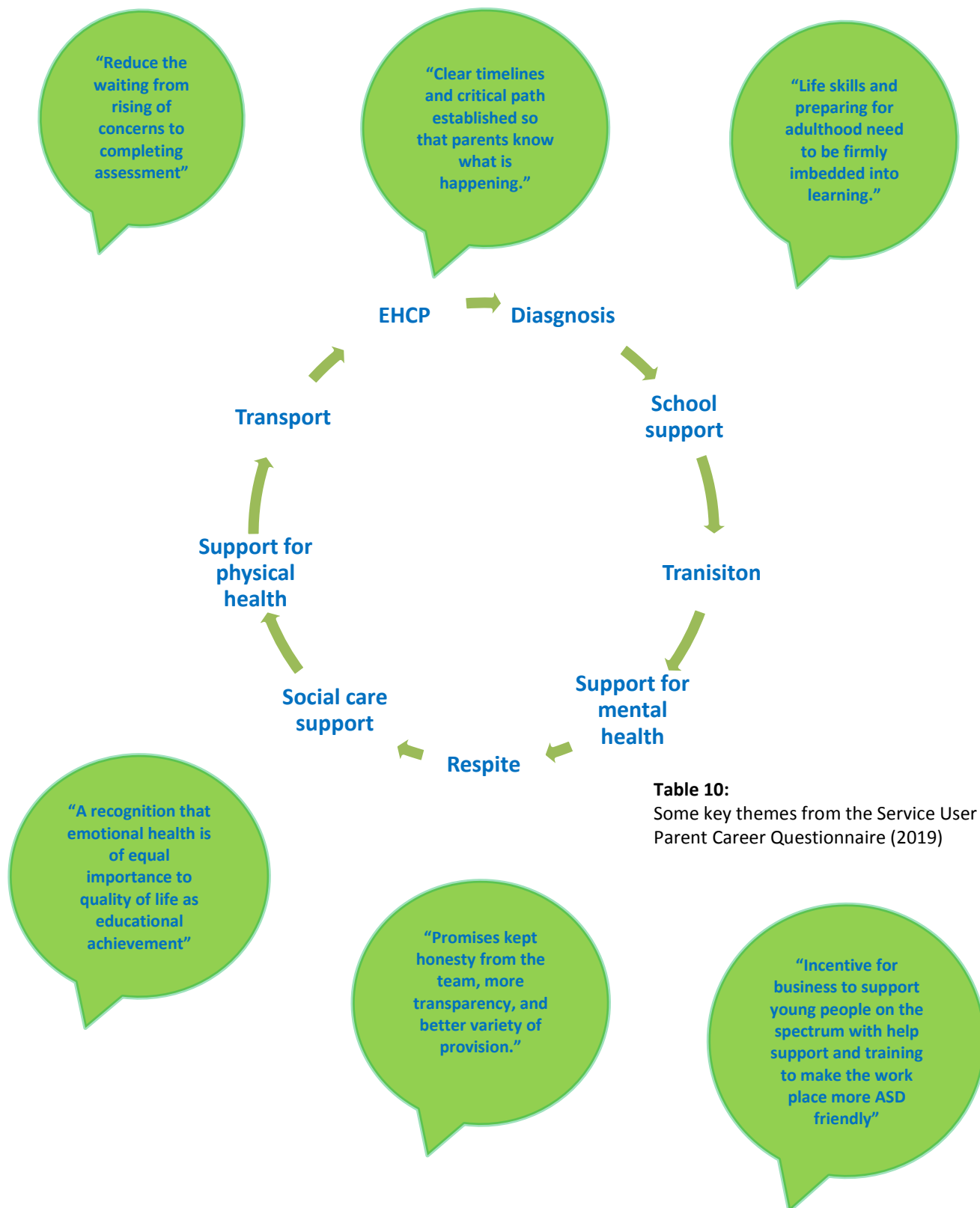
### Developing the strategy

The development of our **All Age Autism Strategy** has been linked to the updating of our Cheshire East Joint Strategic Needs Assessment (JSNA), through a multi-agency Joint Autism and JSNA Strategic Working Group. Further, through additional coproduction within the SEND Partnership, service users and parent carers, in which we have been working extensively to develop this strategy with consultation events over recent years.

We consulted with individuals and groups of people who experience autism on a daily basis, seeking views on the strategy through face to face conversations; telephone calls; emails; meetings; workshops and questionnaires - in which the following was clearly emphasised and which have informed and shaped the key priorities of this Strategy;



To further support the development of the Strategy, a service user online questionnaire, hosted by The independent Cheshire East Parent Care Forum<sup>14</sup> was undertaken to seek additional comments in ensuring that the document is reflective of what elements are seen as important for all service users (see Table 11).



**Table 10:**  
Some key themes from the Service User / Parent Career Questionnaire (2019)

<sup>14</sup> The Autism Questionnaire was sent out to a number of service user and parent carer groups throughout Cheshire East between December 2018 and January 2019. 28 returns were received, together with personal comments.

## Delivering the strategy

### How we will deliver on our priorities

Central to making this autism strategy a success is to ensure we effectively plan, measure and monitor how we will deliver the priorities detailed within this document, which will be achieved through the outlined Delivery Plan within each strategic priority.

The monitoring of the Delivery Plan and progress reports will be undertaken through the Multi-Agency Workstreams of the SEND Partnership Board, who in turn report to The Cheshire East Health and Wellbeing Board. Quarterly reports will be submitted to the Board and Directorate Senior Management Team and published annually to support the Strategy aims and objectives.

## Delivery Plan

Priority 1:		Awareness and Information		
Objective:		To ensure people with autism, their careers and families and professionals are able to access clear, comprehensive and up-to-date information about where to go for support, and have a means of sharing knowledge and experiences with others		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Developing a multi-tier local training framework varied according to professional role and level of improvement with autistic individuals, their families and carer	Improved access to appropriate training	People with autism, their family and carers and professionals report increased awareness of the resources available	March 2020
2.	Ensure that an e-learning programme for raising autism awareness is made widely available to as many agencies as possible	Increased coproduction of training and awareness packages	People with autism, their family and carers and professionals report satisfaction with the information and resources available	March 2020
3.	Actively involve people with autism, parents and carers on the development of learning programmes and in the delivery of the training programmes	Training packages are most suitable in terms of need	Annual updates of the number of training and awareness sessions and online packages are undertaken	Ongoing
4.	Develop an autism champion network of knowledgeable individuals, their families and carers to promote consistency and clarity	Champions will play a central role in the continuous cycle of improvement of autism practice	Database of champions throughout the support networks of individuals with autism, their families and carers and professional	March 2020
5.	Maintain the Living Well page ensuring that there is clear transparent information for parent carers and children	Increasing visits and contact to Living Well autism webpages	Quarterly Analytics stats for web pages	Ongoing
6.	Through the JSNA, continue to improved data collection of individuals with autism within Cheshire East to support commissioning decisions	We need to continually improve our evidence and analysis in order to understand how to develop services effectively and ensure resources are used cost-effectively to meet people's needs	Quarterly reports	Ongoing

Priority 2:		Diagnosis		
Objective:		As a partnership, working together to jointly commission a consistent and integrated autism assessment pathway, which is compliant with NICE guidance and Quality Standards, and includes access to evidence-based pre and post diagnostic support		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Create a single point of access for autism assessment	The pathway to diagnosis and post diagnosis support for children and adults to be clear, transparent and communicated effectively within localities.	Customer satisfaction of Improved access and experience of the pathway	March 2021
2.	A coordinated, multi-disciplinary assessment and decision-making to support diagnosis	Everyone knows where to go when seeking a diagnosis and they are able to get there	Quarterly reports of assessment will be completed within 12-weeks of original referral for a specialist multi-disciplinary autism assessment	March 2021
3.	Management and access to a clear local offer - matching need to intervention and support	Providing the most appropriate interventions, support and strategies to ensure all professionals are working together in partnership with the family to deliver a single, agreed plan of support	Improved experience of the assessment process that will generate an individual person-centred, goal orientated management plan	Ongoing
4.	Greater choice and breath of provision	Aligning, integrating and developing appropriate services and building on local innovation	Customer satisfaction based on the needs of children / young people and families	Ongoing
5.	Diagnosis Standard Waiting List	In accordance with the NHS Longterm Plan January 2019 (3.33)	Reduction in waiting time	March 2022

Priority 3:		Education		
Objective:		Making sure that everyone has access to appropriate educational provision so they can fulfil their potential as learners		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Ensure all pre-school child facing staff receive good quality autism awareness training from trainers such as Autism Education Trust (AET)	To ensure children and their families are support at the earliest stages	Training reports	Ongoing
2.	Continue to develop pre-school, the RP and specialist schools as ‘hubs’, or centres of excellence	Educators can develop and share their expertise, as such focusing on needs of individually with autism. Encouraging places of education to share good practice and support each other to support autistic students more effectively	Reports of increased attainment form individuals with autism in an educational setting, and participation in SENCO Networking	Ongoing
3.	Make sure schools and post 16 education in their area are taking on training from the Cheshire East Autism Team (CEAT)	Consistency in training and awareness in places of educational settings	CEAT Training output reports	Ongoing
4.	Continue to collect and analyse data through the JSNA on the number of children and young people on the autism spectrum in the area	Use this data to plan and commission the services they will need	JSNA data	Ongoing
5.	Continue to develop the provision planning and panel process to meet the full range of needs of children and young people on the autism spectrum	Prevent children and young people having to be sent to more distant and costly school placements	Quarterly reports	Ongoing
6.	Carry out education, health and care needs assessments for children with an autism diagnosis when they are requested	A child who needs an EHC plan has access to one as early as possible in their school career	Quarterly reports	Ongoing
7.	Ensure anyone working with people with autism and their families staff are trained in the requirements of the Children and Families Act and the SEND Code of Practice	Increase and embed the coproduction of SEND within Cheshire East	Customer satisfaction of the experiences of children / young people, their families and carers	September 2019

Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
8.	Open and transparent discussions between assessment staff with parents / carers	Clear information about available options and working with them to find suitable packages of support	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
9.	Work with schools and post 16 education with children and students on the autism spectrum to make sure they are providing good quality education	Improved attendance and attainment of children and student with autism	Annual reports	Ongoing
10.	Staff are trained in the requirements of the Children and Families Act and the SEND Code of Practice	Ensuring that anyone working with people with autism, their families and carers are trained appropriately	Quarterly reports	Ongoing
11.	All assessment staff have open and transparent discussions with parents and carers	Providing them with clear information about available options and working with them to find suitable packages of support	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
12.	To improve awareness and understanding of autism in their school, all schools should encourage staff to make use of existing resources on autism	Access to <i>MyWorld</i> teaching resources provided by <i>The National Autistic Society</i> and materials produced by the <i>Autism Education Trust</i> and take part in initiatives like <i>Schools' Autism Awareness Week</i>	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
13.	All schools and places of education should ensure governors receive training in autism awareness	four areas of need set out in the SEND Code of Practice	Annual reports of training	Ongoing
14.	Support the implementation of the four areas of need set out in the SEND Code of Practice	School should Ensure they are measuring the progress of all pupils on the autism spectrum across the	Quarterly reports	Ongoing
15.	Record where young people go after they leave school and post 16 education to help assure themselves that they are equipping pupils on the autism spectrum as effectively as possible for adult life	Successful transition	Annual reports	Ongoing

Priority 4:		Transition		
Objective:		A clear preparing for adulthood pathway, which meets the diverse needs of young people with Autism. This will mean young people will know where to access support as they navigate across different services (health, education, social care, community) enabling them to achieve their aspirations as they move into adulthood		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Improve the quality of transition assessments through ensuring workers are experienced in understanding the needs of young people with autism and focus on developing support that promotes their independence	A clear understanding of young people’s needs so the right support will be put in place to achieve their full potential.	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
2.	Improve communication between children’s and adults social care; health and education including having appropriate information sharing agreements in place	Young people will not have to retell their story and information will be shared between services appropriately	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
3.	Engage with colleges and universities to increase understanding of the needs of children and young people with autism in further education/training and to improve their access to support within the setting	An increased number of young will achieve qualifications, which will lead to employment.	Quarterly reports / meeting minutes	Ongoing
4.	Engage with a wide range of partners to explore their potential for providing more life skills training for young people with autism e.g. interview training, extended work experience opportunities,	Increased opportunities for children, young people and adults to access meaningful employment and vocational training	Annual reports	Ongoing
5.	Work with employers on supporting young people through interviews, into employment and ensuring support it in place to maintain employment	This will reduce barriers to young people with autism being able to secure a job	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing



Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
6.	Review and develop support around transport, travel training and bus passes	Young people will become more independent and able to access the community	Annual reports of opportunities through commissioning	Ongoing
7.	Ensure information on transition and support is available to people with autism, families and carers	Young people and their families will be able to make informed choices.	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
8.	Continued development of Complex Needs Dynamic Purchasing System (Framework) to include provision for those in transition to adulthood	There will be provision in place to meet the needs of young people with Autism	Annual reports	March 2020

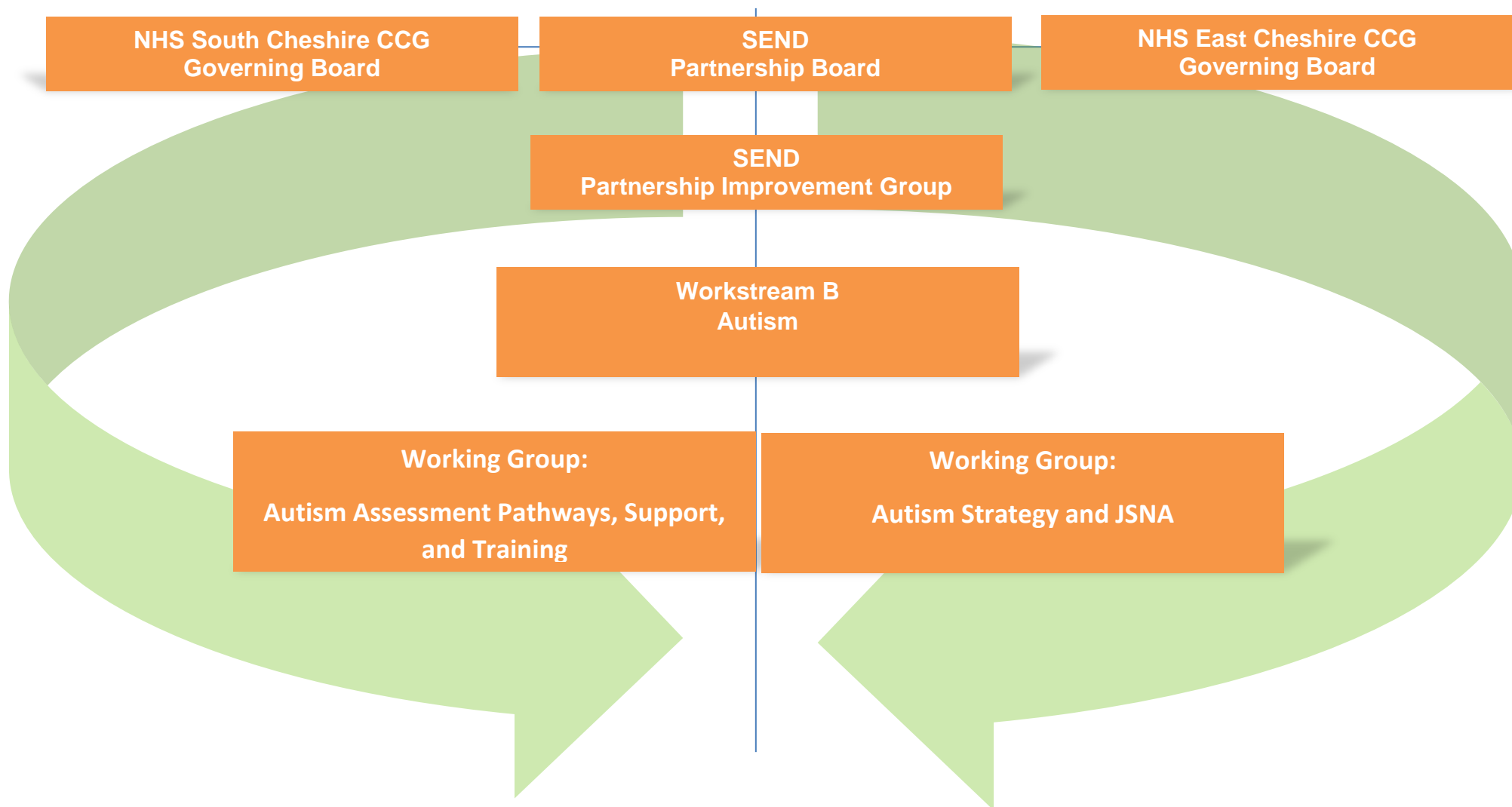
Priority 5:		Employment		
Objective:		Pathways to suitable employment and training is not just important economically; it also offers the opportunity for individuals to feel valued, respected and included in society and can help prevent isolation		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Promote the uptake of autism awareness training among local employers	Increasing awareness for improved employment and training opportunities	Annual reports	Ongoing
2.	Consider the possibility of supporting autism voluntary groups to become social enterprises, with the aim of employing individuals with autism	Direct support to partner voluntary organisations to seek increased employment and training opportunities	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
3.	Promote the Government’s Disability Confident scheme among local businesses / organisations	Greater awareness and confidence within the local business sector	Annual reports / meeting minutes	March 2020
4.	Work with the Department for and Work and Pensions to stop inappropriate referrals for Job seekers to voluntary groups and to raise their awareness of autism.	Improved relationships with DWP and less individuals to be sanctioned by the DWP because of the increased autism awareness	Customer satisfaction of the experiences of children / young people, their families and carers	March 2021
5.	Develop bespoke training autism awareness training for <i>New Life</i> and other services supporting individuals with autism into work, using relevant practice examples	Increasing awareness for improved employment and training opportunities	Annual reports	Ongoing

Priority 6:		Housing and independent living		
Objective:		People with autism have an improved housing offer, access to secure and suitable housing, sustaining choice and independent living		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Appropriate housing is available and housing needs are identified	Better housing offer for people with autism within Cheshire East	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
2.	Work in partnership with colleagues from the Learning Disabilities team to develop a housing offer for people with Autism.	Increasing opportunities to engage with people with autism, their families and carers through improving the housing offer	Annual reports	Ongoing
3.	Continue to work with Spatial Planning and Strategic Housing to further develop needs, by improved intelligence of need	Further enhancing our data for need and contribution to specialised supplementary planning documents	Annual reports	March 2021
4.	Clear identified local knowledge of current housing status and projection of need	Improved intelligence of need	Annual reports	Ongoing

Priority 6: Service provision				
Objective:		More specialist health and social care services will be provided and will be easily accessed by those who need them. Individuals and families encounter a range of high-quality services that are joined-up, easy to navigate and appropriate for their needs.		
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Maintain the Complex Needs Dynamic Purchasing System (Framework) to develop the market in terms of provision for young people and adults with autism	Person-centred care and support focus on positive outcomes, autistic people are better able to manage their own lives	Quarterly reports	Ongoing
2.	Support schools in implementing the SEND toolkit	Provide support and advice for a successful implementation	Annual reports	March 2021
3.	Development of Dynamic Support Database - a Risk Register to ensure there was support available to those individuals who may be at risk of admission to a Mental Health Inpatient unit	Reduction in admissions	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
4.	Further develop our knowledge base of need and cohort intelligence	Improved intelligence of people with autism	Quarterly reports	March 2020

Priority 7:		Support for families and carers		
We will seek to ensure that carers are identified, supported and empowered to manage their caring role, and are able to have a life outside of caring				
Ref	Actions to be taken – what are we going to do?	What we expect our actions to produce?	Measuring success	When by
1.	Embed Think Carer throughout services	To ensure that family and carers are identified at the start of care pathways, involving them in decisions and offering support / signpost to specialist support	Customer satisfaction of the experiences of children / young people, their families and carers	March 2022
2.	Ensure that carers are involved in the development of care plans	Improved support and information for both people with autism, their families and carers	Improved client engagement in /satisfaction with the development of information	Ongoing
3.	Appropriate support throughout transition stages	Improved access to information and advice so that the right support can be identified and provided effectively	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing
4.	Continue to connect families and carers to each other, providing up to date information via Cheshire East Council Live Well and support to voluntary groups	Direct support networks for families and carers	Vibrant voluntary and community sector	Ongoing
5.	Promotion of Respite provision, developing databased of Respite requests	Improved access to Respite Care through commissioned programme	Quarterly reports	Ongoing
6.	Working with the voluntary sector, continue to promote social opportunities and activities for children, young people and adults with autism	Enhanced opportunities to engage	Customer satisfaction of the experiences of children / young people, their families and carers	Ongoing

## Governance Arrangements



## Glossary of Terms

AS	Asperger Syndrome
ASC	Autism Spectrum Condition
ASD	Autism Spectrum Disorder
CeTR	Care Education and Treatment Review
CEAT	Community Early Assessment Team
CQC	Care Quality Commission
Diagnosis	When someone is told what his or her medical condition is
EHCP	Education, Health and Care Plans
HFA	High Functioning Autism
NICE	National Institute for Clinical Excellence
NHS	National Health Service
OT	OT Occupational Therapy
Outcome	Outcome The difference something makes
Pathway	Pathway A map that sets out the routes to access services
SEND	Special educational needs and / disabilities
Strategy	Strategy A plan that sets out what should be done to make things better
Transition	Transition A process or period of change

## Consultation feedback

We would like to produce a new All Age Autism Strategy, for the period 2019 to 2022, the Strategy sets out how plans to improving services and experiences for people with autism and their families in Cheshire East.

The consultation runs for 4 weeks from Monday 04 February 2019 with a deadline for response by 5pm on Monday 04 March 2019.

There are many ways to provide us with your comments about the contents of this draft Strategy;

**Questionnaire:** Complete the short questionnaire at the end of this document and return it to;

Cheshire East Council  
Research and Consultation  
Westfields  
Middlewich Road  
Sandbach  
CW11 1HZ

**Online:** Visit <https://surveys.cheshireeast.gov.uk/s/AutismStrategy/> and complete our online survey

**By email:** [RANDC@cheshireeast.gov.uk](mailto:RANDC@cheshireeast.gov.uk)

**In person:** You can visit one of our customer contact centres, please visit [www.cheshireeast.gov.uk/contactus](http://www.cheshireeast.gov.uk/contactus) for more information