



City of Westminster



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Westminster & Royal Borough of Kensington and Chelsea Health & Wellbeing Board

Date:	23 November 2023
Classification:	General Release
Title:	Autism Strategy - Update
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Wards Involved:	All
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1. EXECUTIVE SUMMARY

- 1.1. There is a statutory duty under the Autism Act 2009 for local authorities and health bodies to produce and maintain a strategy for supporting autistic adults in their local area.
- 1.2. Reflecting the close partnership working between Children's Services, Adult Social Care and the local Integrated Care Board in supporting autistic children, young people and adults, we produced an all-age autism strategy for our local area, including how we will meet the needs of children and young people aged 0-25.
- 1.3. The strategy was published in September 2020, following a programme of co-production with autistic people, their parents/carers, clinicians, professionals, and support providers. A copy of strategy can be accessed via the 'Strategies and Plans' page on our SEND Local Offer websites. The adult social care

Autism strategy which extends from all age strategy was launched November 2022.

- [Royal Borough of Kensington and Chelsea SEND Local Offer](#)
- [Westminster City Council SEND Local Offer](#)

- 1.4. A multi-agency Autism Partnership Board is in place to oversee the delivery of the Strategy, the activity for which was broken down into five key workstreams.
- Providing clear and accessible advice and guidance for autistic people and their families.
 - Enabling autistic people to succeed in education.
 - Identification and Health support – whole system approach to identification and support for all ages.
 - Providing specialist support services for autistic adults.
 - Enabling autistic people of all ages to live independently and healthily.
- 1.5. This report provides the Health and Wellbeing Board with an update on the key activities of each workstream so far and the next steps to be taken forward.

2. RECOMMENDATIONS

- 2.1 The report is for information only and to facilitate the Health and Wellbeing Board's discussion on progress made to date and future priorities.

3. PROGRESS TO DATE AND NEXT STEPS

Governance – Autism Partnership

- 3.1. The Autism Partnership Group reports in appropriate ways to:
- Health and Wellbeing Board
 - Place Based Partnership
 - SEND Executive Partnership Board
 - NWL MHLDA Steering Groups
 - Other Boards as required
- 3.2. Statutory members will report and follow their own organisations governance structure and ensure that the autism strategy remains a priority.
- 3.3. The board is co-chaired by:
- Autistic person (Adult Expert by Experience) with co-chair from either the
 - Local Authority or the ICB.

Providing clear and accessible advice and guidance for autistic people and their families.

- 3.4. We have co-produced an accessible leaflet to outline the purpose of the All-Age Autism Strategy and the findings within it. The leaflet also describes the things we will be doing to improve our local area's offer as a result. The leaflet has been published on the Strategies and Plans page our SEND Local Offers and distributed across our local Autism Partnership.
- 3.5. Following the publication of the Autism Strategy in 2020, we have undertaken a comprehensive review of the 'Autism Zone' within the SEND Local Offer websites. The content has been redesigned to be more accessible and support parents / carers, children / young people and local professionals to find the information that they need more efficiently. This has been achieved by creating a pathway to key information that is based on guiding questions that are tailored to the specific audience.
- 3.6. An online data gathering form was co-produced by the Autism Partnership, to gather information about the range of services that are available in the local area to support autistic children, young people and adults. A link to this online form was distributed widely across the local area for services and organisations to add details of their offer. The form remains live, to enable us to continually collect new information about the range of support that is available for autistic people across the Bi-borough area.
- 3.7. The initial information from the form has been collated, categorised and presented on the SEND Local Offer websites to improve the visibility of the range of support that is available locally, improving awareness and access for residents and ensuring those working with autistic children and young people are able to quickly find and refer to services based on their needs.
- [Finding Support for Autistic Children and Young People | Royal Borough of Kensington and Chelsea](#)
 - [Finding Support for Autistic Children and Young People | Westminster](#)
- 3.8. In terms of next steps, we will:
- Promote the collation of support that is available for people without the need for a diagnosis of autism with our local primary care network.
 - Finalise a review of information provided to residents who are on the pathway for autism diagnosis regarding local support.
 - Increase our promotion of services, events and local stories involving autistic residents via corporate communications channels.

Enabling autistic people to succeed in education.

- 3.9. As a result of the Autism Strategies publication in 2020, we established a small representative group of leaders from local educational settings, including headteachers and SENCOs working across early years, primary, secondary and post-16 phases. The group co-produced a list of the key things we would like to achieve to improve the experience and outcomes of autistic children and young people educated in our local area, these are:

- Identifying and implementing a unified approach to providing support for autism in our local schools and settings, which is understood by system leaders.
 - Establishing a coordinated approach to identifying schools that require additional support and then providing this.
 - Improving the experience of transition to secondary school.
 - Providing high quality support for parents relating to education of their children and young people.
 - Having high quality early identification and support in our early years settings, that supports timely diagnosis when appropriate
- 3.10. The Autism Advisory Team within the Bi-borough Inclusion Service and the Educational Psychology Consultation Service have worked together to roll out **information and training about the SCERTS model**.
- 3.11. The SCERTS model is an evidence-based educational approach and multidisciplinary framework that directly addresses the core challenges faced by autistic children and people and those with related disabilities, and their families. The acronym 'SCERTS' refers to the three key areas that the methodology focusses on:
- "SC" – Social Communication – the development of spontaneous, functional communication, emotional expression, and secure and trusting relationships with children and adults.
 - "ER" – Emotional Regulation – the development of the ability to maintain a well-regulated emotional state to cope with everyday stress, and to be most available for learning and interacting.
 - "TS" – Transactional Support – the development and implementation of supports to help partners respond to the child's needs and interests, modify and adapt the environment, and provide tools to enhance learning (e.g., picture communication, written schedules, and sensory supports). Specific plans are also developed to provide educational and emotional support to families, and to foster teamwork among professionals.
- 3.12. We recognised that, for this model to be implemented consistently across our local area, training should be made available not just to education settings, but also to colleagues from across health and social care provision. Training is being delivered by the authors of the SCERTS model. Three days have been delivered, each to approximately 500 attendees from across education, health and social care services in Kensington, Chelsea and Westminster.
- 3.13. In addition to the training, we are running a more intensive implementation pilot with five identified schools / settings from across the early years, primary, secondary and post 16 phases. The learning from this more intensive programme will be used to inform best practice for implementing SCERTS in the context of our specific local area.
- 3.14. Alongside this implementation pilot, all schools have been given access to an online learning platform to support them with implementation of SCERTS in their settings. To date 66 schools have signed up to use this. We are keen that schools themselves advocate for the implementation of the model. Senior

leaders from three local schools recently presented their experiences of implementing SCERTS to their colleagues at our Bi-borough SENCO Forum.

- 3.15. We have spoken with autistic children and young people about their experiences **of transition from primary school to secondary school** and have produced a report outlining the findings from this, identifying what worked well and what could be done better across our system.
- 3.16. In partnership with our parent carer forums, three secondary schools in our local area took part in the **NHS England 'Autism in Schools' project**. The project was delivered in partnership with the National Autistic Society and provided training to our secondary schools in how to support autistic learners as well as setting up small peer support groups for families of autistic children within their school. It included a 'sensory walk', undertaken by an Occupational Therapist who was able to advise on changes that could be made to the physical environment to support the inclusion of autistic students – this is a model that we have adopted locally, and we now have an Occupational Therapist based within our Autism Advisory Team.
- 3.17. Following the recommendations in the Autism Strategy, our Educational Psychology Consultation Service and Autism Advisory Team have worked together to develop an **Early Years Pre-Diagnosis pilot**. The aim of the pilot is to ensure that early years practitioners and providers are confident in identifying a child's additional needs that may indicate that they are autistic and are also able to provide a quality first approach to meeting such needs (based on SCERTS), which can be built upon when children transition into our local schools. There will be no need have a formal diagnosis to receive this support – it will be part of our ordinarily available provision.
- 3.18. The Educational Psychology Consultation Service and Autism Advisory Team worked together to develop a short document that provides examples of strategies that can be implemented and support that can be provided in early years settings. This is supplemented by an observation form that enables the setting to record the needs that have been identified, the support that has been provided and what has and hasn't worked. This will support with a smooth transition to primary school and has also been reviewed by our Child Development Services, so that the information collected can be used if a referral for a diagnosis were ever to be made, thus reducing the time needed for information gathering at the start of the process.
- 3.19. In terms of next steps, we will:
 - complete the intensive implementation pilot of SCERTS and publish outcomes and next steps for continuing to embed the model within our local area, which will include establishing a team of local champions from settings to provide peer support to colleagues in their field.
 - provide briefings regarding the importance of the SCERTS model to senior leaders from across education settings in our local area. This will include headteachers and governing bodies.
 - act upon what children and young people have told us about their experience of transition – advising our local schools on what processes

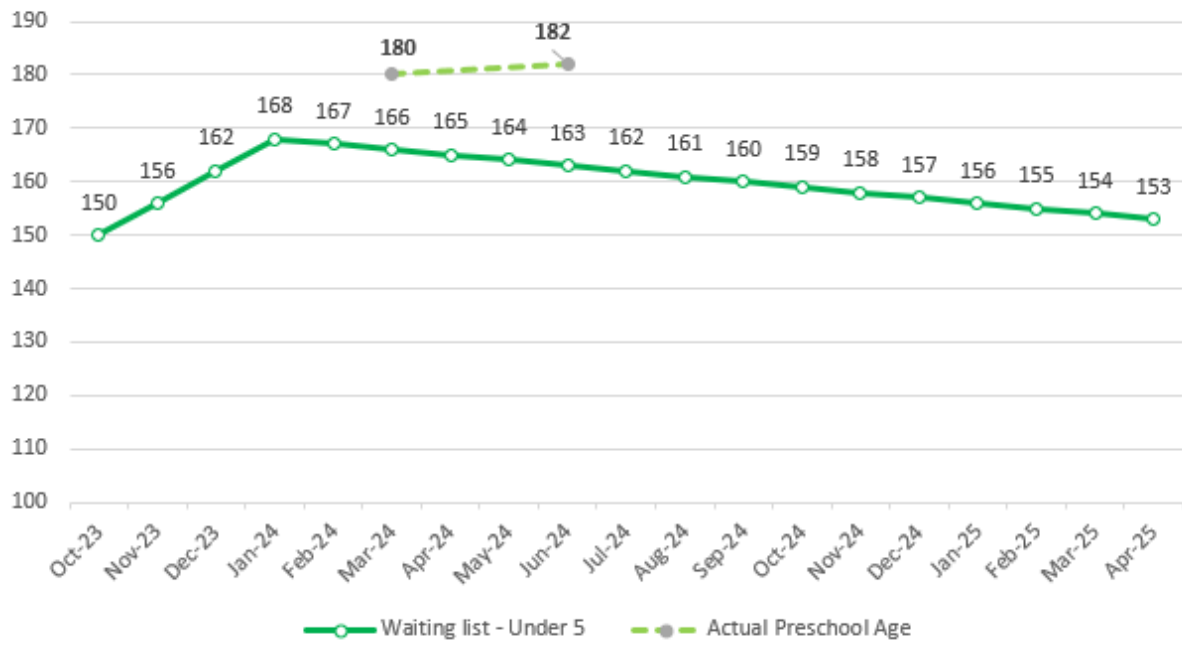
will make this work better and building advice into the parent groups that are run by our Autism Advisory Team.

- test the Early Years Pre-diagnosis Pilot with selected settings and then, based on the findings, roll this out more widely. This will be undertaken by a dedicated speech and language therapist, which will help to further embed the SCERTS model across our health providers and maintain a multi-disciplinary approach to delivering the aims of our Autism Strategy.

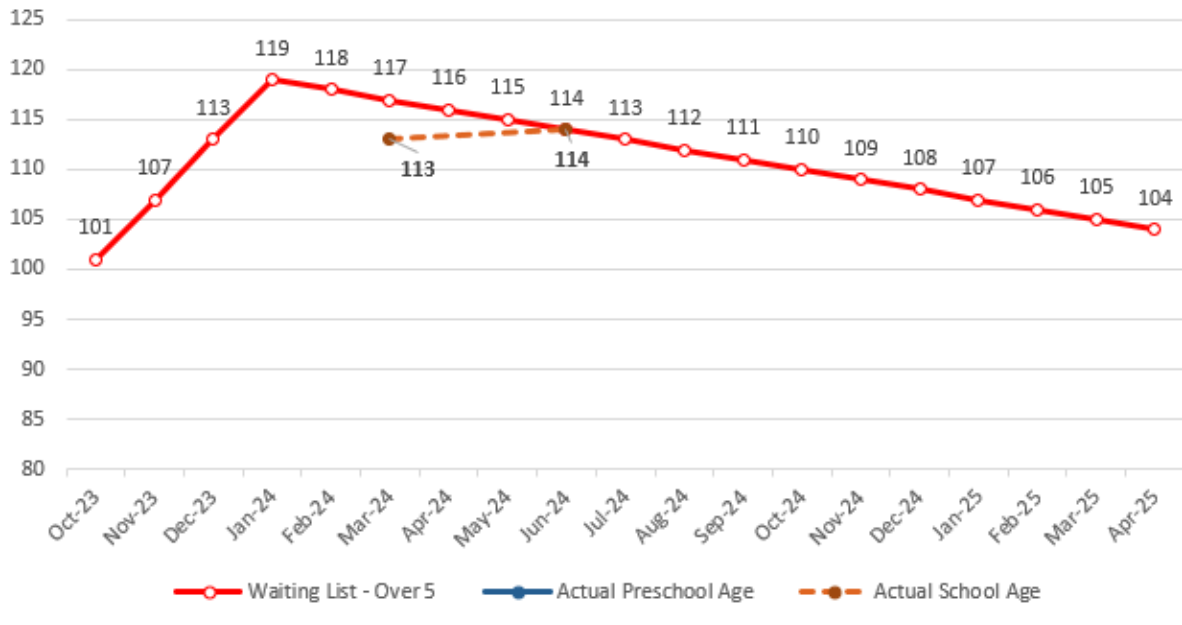
Identification and Health support – whole system approach to identification and support for all ages.

- 3.20. Following the publication of the Autism Strategy in 2020, the **Adult ASD Assessment Service** in CLCH successfully began a pilot to improve the efficiency of ASD assessments, by offering online input with administrative support. Subsequently, they were successful in the award of a second year of funding to increase and continue the new offer from the NWL MHLDA Programme.
- 3.21. In Jan 2022 a Business Case was agreed to outsource a number of ASD assessments from the **Cheyne Child Development Service**. Following a comprehensive procurement process and an increase in funding, a provider was sourced to take 400 cases from Feb 2023 to Feb 2024.
- 3.22. In October 2022 a second Business Case was provisionally agreed by the NWL ICB, later formally confirmed in March 2023, to permanently increase the capacity of the **CDS partnership (Chelsea and Westminster, Imperial and CLCH)**, totalling £1.7 million, with half released in 23/24, and then the full amount from April 2024. The increased funding has increased capacity across the service lines, e.g. ASD assessments and Initial Health Assessments for Looked After Children. Providers have already recruited to a number of posts, with some difficulties still remaining for key Paediatric roles. Both recruitment and impact are being closely monitored and reported on following the trajectory of recovery anticipated with the increased funding. At the same time both CDS (Cheyne and Woodfield Road) are aligning pathways and innovating to maximise capacity across the catchment area.
- 3.23. The three charts overleaf show the expected impact on the numbers of children and young people on the waiting list for autism diagnosis at Cheyne and Woodfield Road Child Development Centres as a result of this work:

Woodfield Road - Under 5 Waiting List Trajectory



Woodfield Road - Waiting List Trajectory - Over 5





- 3.24. Work has continued to embed the **Dynamic Support Registers (DSR)** for both boroughs, supporting those in crisis, at risk of hospitalisation or of placement breakdown where the individual has either a Learning Disability and/or Autism. The ICB co-ordinate one DSR in each borough separately for CYP and a joint one for Adults. All partners are fully engaged in this multi-agency and multi-disciplinary approach to crisis management, led by the ICB and supported by the two newly appointed NHS ASD Keyworkers who work with the individuals on the register who are at risk.
- 3.25. **CNWL** has recently employed a **Lead for Autism** across their services. This role will support MH staff to better manage the needs of patients with autism within universal services. It is anticipated that this will also further enhance the close working relationship between mental health and community health services in the two boroughs.
- 3.26. Following feedback from residents, support for Parent/Carers has been set up via **Full of Life (RBKC)** and **Make It Happen (WCC)** to provide more intensive therapeutic support.
- 3.27. The **Centre for ADHD and Autism Support** had originally been commissioned to provide peer support for young people approaching adulthood and for adults over 18, mostly post diagnosis. We have successfully embedded them into our local services, giving peer support to a growing number of residents in local venues. The NWL ICB **Autism Peer Support**

Advice and Inclusion Service (provided by CAAS) has been awarded more funding this year enabling an expanded offer, providing both **pre and post diagnosis support** for those 14 and above, but focussed on those children preparing for adulthood or adults, as well as scoping a potential similar offer for CYP within 23/24 across NWL

- 3.28. The **Oliver McGowan training** has finally been released by NHSE. NHS providers and the ICB are now mandating the training for all staff in all NHS CQC registered organisations, with Part One being general awareness raising, online, and part two, more specialist training for those working directly with Autistic patients, co-led by people with lived experience.
- 3.29. We have run a pilot with one **Westminster GP Practice** to enable them to consider the environment and the needs of their autistic patients, following consultations with each patient. This has led to improvements and reasonable adjustments for the individuals concerned. We are now rolling this out to all Westminster GPs and will be following up with Kensington and Chelsea practices early in the new year.
- 3.30. In Terms of next steps, we will:
- Collaborate with West London Children's Healthcare and CLCH to finalise a new specification and single service contract for the combined CDS services.
 - Monitor the implementation of the recovery trajectories for all aspects of the CDS services, including ASD waiting times and IHA performance.
 - Support WLCH with their alignment of their services.
 - Monitor the impact of continued funding into the Adult Assessment Service.
 - Work with CNWL to ensure their services are accessible and suitable for those with Autism in line with new funding
 - Work with the new NWL ICB Autism Peer Support Advice and Inclusion Service to embed into services locally and support them to review the CYP peer support offer locally.

Providing specialist support services for autistic adults.

- 3.31. We want to plan together – **involving autistic adults and their families in service development and delivery**. Workshops have been held with experts by experience, carers, providers and professionals to explore innovations to support Autistic adults.
- 3.32. Following the publication of the Autism Strategy, recommendations were made to improve the quality of Adult Assessment services for Autistic adults. As a result, ASC employed a Senior Autism social work lead to link with health, social care and housing departments to work on reasonable adjustments and service approach for more Autism friendly assessments and services.
- 3.33. We are working to **improve understanding and acceptance of autism within society**. Work has started to raise awareness via training for professionals, providers and 3rd sector to promote better understanding of Autism and wider acceptance of neurodiversity.

- 3.34. Oliver McGowan Mandatory Training (OMMT) is now statutory for certain CQC-regulated providers and activities. Oliver McGowan is basic awareness around autism – for all health and social care staff. Level 1 mandatory for all staff. L2 is mandatory for those who work with ASD.
- 3.35. We have been improving our joint working and processes to ensure positive transitions for children and young people into adulthood. An **updated protocol has been agreed to strengthen the pathway for Autistic CYP**, and work is underway to implement the protocol. Giving more clarity on pathways for autistic people.
- 3.36. We have funded specialist music and art activities for autistic young people and adults through the **In-Deep community-based provider**. This service is for people with autism and sensory needs and provides a social space for them to engage with fun music and creative activities. It also brings carers and families together to participate in the activities.
- 3.37. We are piloting technology to help autistic adults to have more independence. **Brain in Hand** is an app added to a mobile or tablet device that is helping individuals to remember things, make decisions, plan, or manage their anxiety with minimal care and support. The app will monitor and track any patterns and behaviours, to be able to personalise the remote support further.
- 3.38. In Terms of next steps, we will:
- Work with LA and ICB leads to finalise the new training program for raising awareness of Autism. Funding has already been ring-fenced to launch the training across the Bi-borough.
 - Develop Autism champions to help improve awareness and understanding in local organisations such as libraries, businesses, hospitals etc.
 - Monitor the impact of Oliver McGowan training through the Bi-Borough Autism partnership board.
 - Promote better use of adult Autism services – CAAS and In-Deep who provide resources for CYP to transition into.
 - Monitor transition tracking meetings to review impact of new protocol for Autistic CYP.
 - Establish closer working relationships with housing colleagues.
 - Extend the funding for the senior Autism social worker to continue to support service delivery across agencies.
 - Hold further workshops to involve experts by experience.

Enabling autistic people of all ages to live independently and healthily.

- 3.39. We want autistic people of all ages to have the confidence that services available to them are working to implement autistic friendly environments.
- 3.40. Research has been undertaken into best practice in **Autism Friendly Communities and Champion programmes** internationally. Buy-in has been secured from some frontline public-facing services for a pilot of Autism

Champions embedded in their workforce. The invitation will be extended to private sector businesses.

- 3.41. A workplan has been created for **engagement and co-production with residents**, who are invited to discuss their experiences and needs from their local community environment, to undertake **surveys of local venues to assess their autism friendliness**, to share their lived experience of High Streets and co-produce the action plan, and to accompany the Autism Champions programme to inform practice and to co-produce next steps. A number of partners who work with autistic residents have been contacted to promote opportunities for engagement and co-production, including VCSOs and the Council's supported interns programme.
- 3.42. In Kensington & Chelsea, we've established a £100K small grant programme in partnership with Young K&C to **make youth services more inclusive** by offering organisations training or capacity to enable young people with SEND to attend mainstream provision or to establish dedicated SEND sessions.
- 3.43. In Westminster, we are working with Young Westminster Foundation to **develop training and proposals for the youth organisations to enable the sector to be more inclusive**.
- 3.44. The **Holiday Activity & Food Programme**, which was delivered across both boroughs, had a 22% uptake of SEND young people (663 children in WCC and 508 in RBKC).
- 3.45. As part of the youth review in RBKC and renewing **Service Level Agreements**, a core priority being established is to make youth provision more inclusive.
- 3.46. Representatives from the Autism Partnership have met with Chairs of staff disability network groups in both Councils and attended session with RBKC Ability to Thrive Network to consult on areas of strength within the Council regarding supporting autistic employees, areas for development and suggestions for action. Results of these conversations were presented to HR with suggestions for action.
- 3.47. We have been exploring the potential to embed autism friendly practice in future Property audits and strategies, to ensure that needs of autistic residents are considered. A resident friendly environment audit tool has been created from NICE guidelines and a checklist is ready to be used to gather resident feedback on environments in public venues and inform service improvement – residents will be asked to undertake these surveys.
- 3.48. We have researched existing 'reasonable adjustments' for that should be used in primary care settings and have drafted a combined local 'ask' of GP surgeries and a draft Patient feedback document to be used by surgeries. We have identified a pilot site to take this forward.

4. FINANCIAL CONSIDERATIONS

- 4.1 None.

5. LEGAL CONSIDERATIONS

5.1 None.

Appendix A – Accompanying PowerPoint presentation