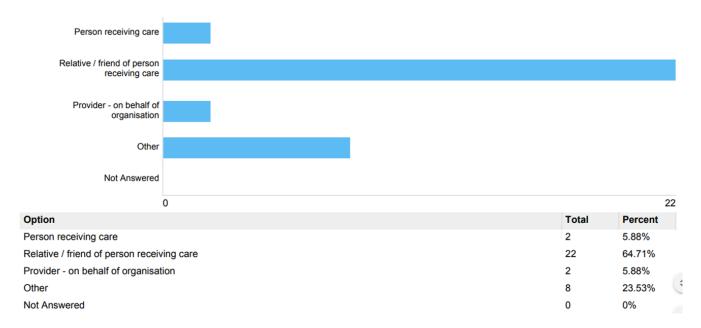
#### 1. Analysis

### **Citizen Space Analysis**

34 responses were received through Citizen Space and the majority of these responses were completed by a relative or a friend of the person receiving care. A breakdown has been in Appendix A



The other respondents included; Former Special Educational Needs Coordinator (SENCO) council employee, a local charity, kinship carer, Barking Havering and Redbridge Clinical Commissioning Group (BHR CCG), a person interested in the welfare of people with autism, and a person with Asperger's

### Are the priorities identified in the strategy relevant and if not what should be added/amended?

There were **31** responses to this part of the question.

Approximately 90% of the respondents said the priorities identified in the strategy were relevant. Respondents have suggested the following key areas are absent from the strategy and should be covered in further detail;

- Direct payment funding
- Mental Health –the link between Autism and Mental Health and the service available for people with a Mental Health Diagnosis.
- Police and Criminal Justice System
- Universal Services robust information to be provided on the universal services that are available locally.
- Training for front line staff
- Increase the number of supported living provisions within the borough
- Blue badge consideration for Autism as a hidden disability
- The education section is missing from the strategy.

### Are the actions set out in the action plan appropriate and if not what additions /amendments?

There were **22** responses to this part of the question.

The majority of the responses that were received suggested the following;

- The actions need should be Specific, Measurable, Attainable, Relevant, and Time-based (SMART).
- Training- the action plan refers to training, however, it is not clear what specific training is required for individual groups.
- Identify individual roles of those responsible for achieving the action plan
- The current action plan is mainly focused on children and young people, responses have been received that actions specifically for adults with autism should be included
- Diagnostic pathways to be clarified

### Are there any additional areas that should be included within the strategy and if so what?

There were **24** responses to this part of the question.

- Transition between schools, particularly primary to secondary should be planned and provision in mainstream schools should be improved.
- Additional provisions within mainstream schools, such as quiet rooms, or sensory rooms, for children to be able to access if needed. A respondent explained further, 'Often children with high functioning Autism do not fit easily into a category as they don't have learning disabilities and often don't have behavioural issues but suffer anxiety and need a quiet space.'

The strategy mentions 'missed diagnosis' in girls, it has been suggested that there needs to be more information on autism in girls, the following response was received; 'This is a serious problem that needs to be addressed. There is no point training people in Autism Awareness if you do not cover this important issue too. Girls can present differently to boys. They often mask and camouflage their behaviour because they have learnt what they need to do to fit in. Playing this role leaves them anxious and exhausted. They feel failure and rejection most days. They internalise their anxieties only letting it out when they get home and feel safe.'

This respondent went on to comment; 'Even the diagnostic panel in Havering do not recognise the differences High Functioning girls can present with. This is where the autism education needs to start, with the teams diagnosing children.'

#### Further responses stated:

- Interlinks with Mental Health
- Aftercare plan for parents and families following diagnosis.

- The Autism Hub currently focuses on young adults with autism and there should be more targeted support for children with autism. As a general point this respondent went onto say that all services should be more inclusive.
- Expansion of existing special schools and development of new special schools within borough
- Improved communication plan across partners (health and education)
- A number of responses have highlighted that the education element of this strategy is missing.

## Is having an all age strategy the most effective way to achieve the vision set out in this strategy? Please provide any alternative suggestions.

There were **24** responses to this part of the question.

Several responses have agreed that having an all-age approach will be effective because; this approach will reduce the transitional gap that often occurs from children to adult services and will encourage a cohesive seamless approach. This should also encourage the correct level of communication between partners. In addition, it has also been requested that the 'transition to adulthood' phase should be focused on

A respondent also suggested that the all-age approach would allow parents and carers to have a better understanding and overview of plans and the variance between children and adult services.

Although the majority of the responses have been positive about this question, there have been some comments as to why the all-age approach is not suitable.

There is a minority (2 respondents) view that children and adult strategies should be viewed separately. Further responses state that 'it is important to consider the differences in the offer of services and that the action plan should reflect this'.

In addition to this, the lack of funding was mentioned several times; particularly that funding should be allocated independently to each service area.

# Should this strategy apply to everyone with autism, including people with learning disability? If not what alternative suggestions do you have?

There were **25** responses to this part of the question.

The responses to this question varied as some respondents agreed that the strategy should apply to everyone with autism, including people with a learning disability. The reasons for these agreements were:

- People will feel the approach is inclusive
- There will be a pathway for both autism and learning disabilities.
- There will be fewer barriers to go through
- Most respondents suggested that learning disabilities and autism are likely to be diagnosed together.

However, some respondents disagreed and felt that the two strategies should remain separate. The reasons given for this were;

- It was strongly felt that the focus of this strategy should remain on autism
- It was also felt that overall learning disabilities are catered for effectively within the borough and services are available to provide the required support.
- High functioning autistic adults are often missed and have limited services and support available to them. There is a view that by covering both learning disabilities and autism these individuals will experience further issues when seeking support services.

## What is the best way to make sure that the strategy is implemented? Do you think that the Partnership Board can do this effectively?

There were **22** responses to this part of the question.

100% of the respondents in this category believed the Autism Partnership Board will be able to effectively implement the strategy, however, the success will only be possible if the following steps are taken;

- Ensure individuals are named as owners in the action plan
- 'The partnership board needs to have a wide membership. It needs to be able to ensure that elected councillors fully implement the strategy.'
- 'One such check can be participation at a regular open meeting within the town hall where the partnership board can hold an open meeting which can be attended by anyone living in Havering.'
- Encourage publicity of the board developments via social media, Romford recorder, etc.

Funding has been mentioned on several occasions,

- 'They will need full council backing and funds need to be available to implement the plan.'
- 'Funding will be the main issue here'

## Are there any other comments that you would wish to make on the Draft Strategy not covered by your responses above?

There were **19** responses to this part of the question.

The following responses have been extracted from the consultation:

- 'Blue badges are given to people with autism even if they do not get pip, as long as they have medical report not from GP but a specialist who diagnosed the person'
- It needs to be easier for Adults who suspect they have autism to get a referral for diagnosis. Many parents suspect they have autism after their child is diagnosed and it would be helpful if they had a safe space to share their suspicions and be referred for diagnosis if appropriate. As parents of an

- autistic child, we had zero support following diagnosis. I didn't even know there was support available.
- 'Please involve parents and children we are the professionals of there care.
   Ask us anything someone will answer. Well done for this it's just the beginning.'
- 'Please invest in more inclusive approach in the borough. More events, training and presentations within businesses and local schools.'
- 'It's a recurring pattern now for Havering to focus on people with autism.

  There are people with other disabilities in the borough and it is about time strategies were discussed to support everyone and not just the largest groups of people. Havering seems to forget the smaller groups of disabilities, which is extremely detrimental to these people's futures.
- 'As I read through the draft I strongly agree with a little bit more communication between the school and parents and more involvement of the parents would be good as the children are often not capable to talk about their day at school. Maybe better coordination of all this by SENDCo, also raising awareness at the individual school. The other one I struggle with is the short breaks, which is not meeting with the demand now at Havering. There is very little on offer! With more children, being diagnosed in future and better information given demand will be even higher.
- Talks given by professionals such as a clinical psychologist who has interest in a certain area for example how to use special interest of autistic people constructively or just simply understanding why and how they react differently to neuro-typical people would also be welcome I guess. I am pleased that something is being done about this...