

**AUDIT OF SERVICES FOR PEOPLE WITH AUTISTIC SPECTRUM DISORDERS**  
**STATISTICAL REPORT**

<b>Contents</b>	<b>Page</b>
<b>Introduction</b>	<b>1</b>
<b>Main findings</b> <i>Summary of main points</i>	<b>2</b>
<b>Children and Young People</b> <i>Analysis by NHS board area of statistical information relating to children and young people with autistic spectrum disorder</i>	<b>3</b>
<b>Adults</b> <i>Analysis by NHS board area of statistical information relating to adults with autistic spectrum disorder</i>	<b>10</b>
<b>Annex A</b> <i>More detailed tables for children and young people with autistic spectrum disorder.</i>	<b>15</b>
<b>Annex B</b> <i>More detailed tables for adults with autistic spectrum disorder</i>	<b>20</b>
<b>Annex C</b> <i>Detailed tables showing analysis of written questions asked in audit.</i>	<b>24</b>
<b>Annex D</b> <i>Local Authority Contact List</i>	<b>94</b>
<b>Glossary</b>	<b>99</b>

# **AUDIT OF SERVICES FOR PEOPLE WITH AUTISTIC SPECTRUM DISORDERS**

## **STATISTICAL REPORT**

### **INTRODUCTION**

This report provides analysis of autistic spectrum disorder figures received during the recent audit of services. It fulfils the commitment made by the Scottish Executive to implement the findings of the Public Health Institute of Scotland needs assessment of people with autistic spectrum disorders (PHIS 2001). This was commissioned 'to provide information for service commissioners on the best available knowledge about autistic spectrum disorder and current service provision in Scotland, and guidance on how these services might better meet the needs of both children and adults with ASD in the future,' of which an audit was one important aspect.

#### **Health warnings**

This is the first survey asking for information from local authority /NHS partnerships as to the incidence of autistic spectrum disorder and great care should be taken when interpreting these figures. Most areas managed to complete question 1 which asked for the number of children and young people diagnosed as having autistic spectrum disorder, including Asperger syndrome but the remaining questions 2-5 were not so well completed.

While it is encouraging that most areas were able to complete the first question, the reader should be aware that these figures are considered to represent an underestimate of the true incidence of autistic spectrum disorder in Scotland. Most partnerships noted that their figures were an underestimate but had improved reporting over time due to a combination of better reporting procedures and better diagnosis. Therefore figures for pre-school children can be taken to be reasonably accurate while those for children aged 5-10 are less accurate and so on for the older age groups.

Throughout this report there is no information available for Borders and Western Isles and these NHS Board areas have been excluded from the Scotland totals when calculating rates per 10,000 population.

It is hoped that this report will form a starting point for further discussion and lead to more accurate figures as partnership working and data collection procedures continue to improve over time.

Further information on the accuracy of these figures for each area is detailed in Annex C.

## **MAIN FINDINGS**

### **Children and Young People**

- Overall, over 3,400 children and young people are identified as having autistic spectrum disorder, including Asperger syndrome.
- Overall, 35 children per 10,000 population are diagnosed with autistic spectrum disorder. This varies for different age groups and areas.
- For the 5-10 age group, 49 children per 10,000 population are diagnosed with autistic spectrum disorder. This figure is thought to be more accurate than the overall figure for all age groups.
- Two-fifths of children with autistic spectrum disorder are also reported as having learning disabilities.
- Nearly two-thirds of primary school children with autistic spectrum disorder attend mainstream schools.
- Around one-third of children with autistic spectrum disorder were specifically diagnosed with Asperger syndrome.

### **Adults**

- 645 adults were identified as having autistic spectrum disorders, including Asperger syndrome.
- Around 1 in 7 of these adults was diagnosed with Asperger syndrome.

## CHILDREN AND YOUNG PEOPLE

### 1. Children and young people diagnosed as having autistic spectrum disorders, including Asperger syndrome.

Table 1A summarises the information received for children and young people diagnosed as having autistic spectrum disorders, including Asperger syndrome. Overall, we are aware of over 3,400 diagnoses of autistic spectrum disorder. Of these, 13% are pre-school age, 52% are aged 5-10, 26% are aged 11-16 and 9% are aged 16-18.

**Table 1A :Children and young people diagnosed as having autistic spectrum disorders, including Asperger syndrome.**

NHS Board	Pre-School	Aged 5-10	Aged 11-16	Aged 16-18		Total
				in school	who have left school	
Argyll and Clyde	22	109	69	12	8	220
Ayrshire & Arran	12	103	38	8	2	163
Borders	-	-	-	-	-	-
Dumfries and Galloway	9	56	26	-	-	91
Fife	47	206	49	2	-	304
Forth Valley	7	33	11	4	1	56
Grampian	18	90	65	22	7	202
Greater Glasgow	81	251	137	46	7	522
Highland	10	156	106	16	6	294
Lanarkshire	103	239	117	92	10	561
Lothian	80	377	136	9	2	604
Orkney	10	44	31	3	3	91
Shetland	2	0	11	1	1	15
Tayside	55	118	80	30	6	289
Western Isles	-	-	-	-	-	-
<b>Total</b>	<b>456</b>	<b>1,782</b>	<b>876</b>	<b>245</b>	<b>53</b>	<b>3,412</b>
<b>Percentage of total</b>	<b>13%</b>	<b>52%</b>	<b>26%</b>	<b>7%</b>	<b>2%</b>	<b>100%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*

Table 1B presents this information for each NHS Board as a rate per 10,000 population. For each age group the relevant population figures have been used e.g. for the pre-school column we have calculated the rate per 10,000 population aged 3-4.

**Table 1B :Children and young people diagnosed as having autistic spectrum disorders, including Asperger syndrome. Rates per 10,000 population.**

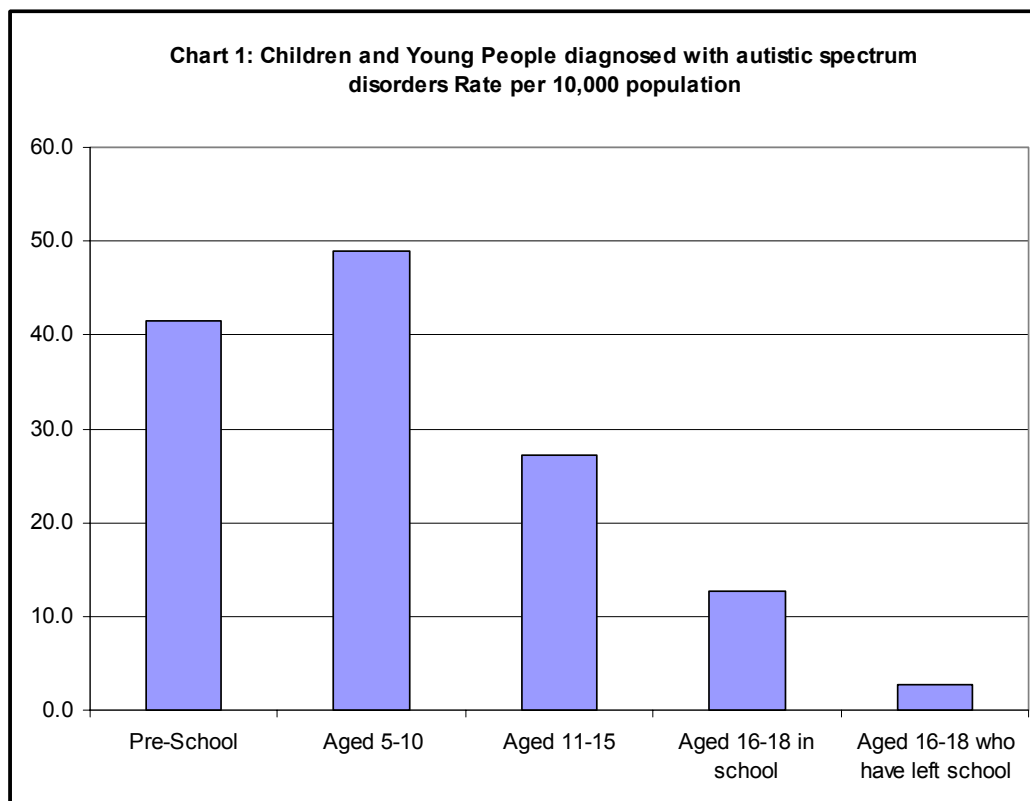
	Pre-School Rate per 10,000 population aged 3-4	Aged 5-10 Rate per 10,000 population aged 5-10	Aged 11-15 Rate per 10,000 population aged 11-15	Aged 16-18 in school Rate per 10,000 population aged 16-18	Aged 16-18 who have left school Rate per 10,000 population aged 16-18	Total Rate per 10,000 population aged 3-18
<b>NHS Board</b>						
Argyll & Clyde	23.7	35.7	25.1	7.4	4.9	26.3
Ayrshire & Arran	15.3	38.5	15.4	5.7	1.4	22.3
Borders	-	-	-	-	-	-
Dumfries & Galloway	29.1	53.0	27.2	-	-	32.0
Fife	59.7	80.6	21.1	1.5	-	43.3
Forth Valley	10.7	15.8	6.1	3.7	0.9	9.9
Grampian	15.6	24.0	19.6	11.2	3.8	19.9
Greater Glasgow	42.5	41.2	25.4	13.4	2.0	31.0
Highland	21.3	101.6	76.8	20.8	7.8	70.7
Lanarkshire	78.2	56.8	31.9	41.1	4.5	49.1
Lothian	45.8	69.8	29.5	3.3	0.7	41.7
Orkney	242.7	298.5	222.2	42.7	42.7	228.4
Shetland	38.1	0.0	66.8	12.0	12.0	31.2
Tayside	67.0	44.0	33.0	20.2	4.0	39.0
Western Isles	-	-	-	-	-	-
<b>SCOTLAND (excluding Borders and Western Isles)</b>	<b>41.6</b>	<b>48.9</b>	<b>27.2</b>	<b>12.8</b>	<b>2.8</b>	<b>35.3</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Notes:**

- 1) All figures in this table show rates per 10,000 population.
- 2) The population figures used in the denominator relate to the whole NHS Board area.

Chart 1 shows the rates per 10,000 population for each age group.



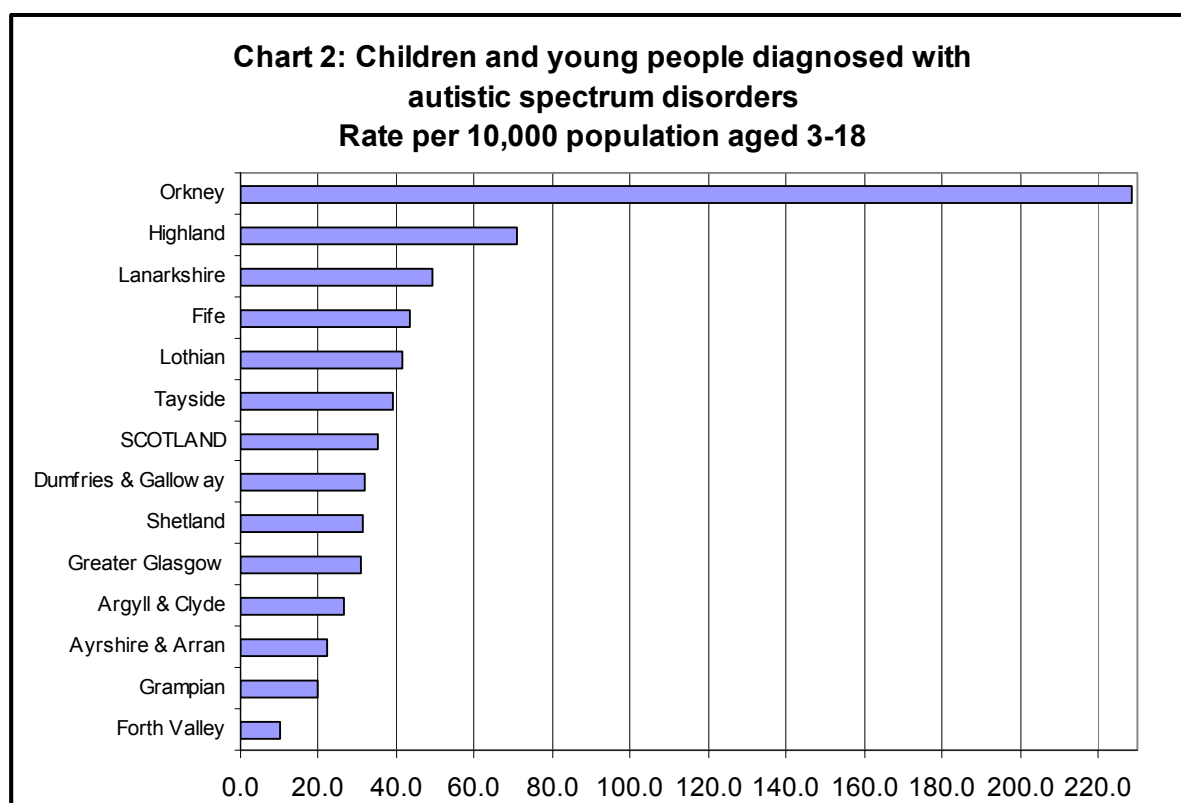
The highest rate is for the 5-10 age group where for Scotland there are 49 children and young people diagnosed per 10,000 population. Rates vary across NHS Boards from 16 in Forth Valley to 102 in Highland and 299 in Orkney.

For the 11-15 age group, there are 27 children and young people diagnosed per 10,000 population. This drops to 16 per 10,000 population for the 16-18 age group. (over four-fifths of these young people are still at school).

The higher rates for the 5-10 & pre-school age group is thought to be due to a combination of better reporting procedures and improved diagnosis in recent years.

The rate per 10,000 population for pre-school children at 42 is less than the rate for 5-10 year olds. Given the comments received from this audit, the pre-school data should be of equal or better quality than the 5-10 age group. However it should be noted that this category uses the population aged 3-4 and children will be diagnosed at different ages, some later than age 3.

Chart 2 shows the number of children and young people diagnosed with autistic spectrum disorders, per 10,000 population (aged 3-18) for each NHS Board. Orkney and Highland with rates of 228 and 71 respectively are well above the Scotland average of 35 and this may well be down to better reporting and diagnosis in these areas.



Other NHS Board areas show rates between 20 (Grampian) and 49 (Lanarkshire).

This excludes the lowest rate for Forth Valley which we know is an underestimate as it excludes Falkirk local authority.

## 2. Children and Young People with autistic spectrum disorders and other needs.

This question asked how many children and young people with autistic spectrum disorder also had needs relating to:

- Learning disabilities
- Physical disabilities
- Learning and physical disabilities
- Mental health problems
- Other behavioural or biomedical conditions

Many partnerships struggled to answer this question, either saying that this information was unknown or was not held on their current database. Some areas could say how many children were diagnosed with autistic spectrum disorders and had learning disabilities but the other categories were unknown.

Overall 6 NHS Board areas managed to complete this question, 5 partially completed it and 4 provided no information at all. Table 2 summarises the results:

**Table 2: How many children and young people with autistic spectrum disorders including Asperger syndrome have other needs?**

NHS Board	Learning disabilities	Physical disability	Learning and physical disabilities	Mental health problems	Other behavioural or biomedical conditions	Total all children with ASD from table 1
Argyll and Clyde	121	1	5	2	13	220
Ayrshire & Arran	83	2	3	1	4	163
Borders	-	-	-	-	-	-
Dumfries and Galloway	20	0	2	1	6	91
Fife	-	-	-	-	-	-
Forth Valley	40	0	0	0	4	40
Grampian	46	4	5	6	31	164
Greater Glasgow	10	0	5	0	0	42
Highland	11	-	-	-	-	294
Lanarkshire	344	1	0	1	0	561
Lothian	-	-	-	-	-	-
Orkney	14	2	3	2	0	91
Shetland	14	0	1	1	3	15
Tayside	117	2	0	0	0	289
Western Isles	-	-	-	-	-	-
Total	820	12	24	14	61	1,970
Percentage of all children	42%	1%	1%	1%	3%	

*Source: Audit of services for people with autistic spectrum disorders, 2003*

The results show that overall more than two-fifths of children with autistic spectrum disorders also have learning disabilities.

The number of children with physical disabilities, learning and physical disabilities, mental health problems and other behavioural or biomedical conditions were all very small. This may in part be due to these additional needs not being reported on or collected systematically.

### 3. Type of school attended by children with autistic spectrum disorders.

Overall, we received information on the type of school attended for two-thirds of the children identified in table 1. Some areas, namely the cities, Aberdeen, Glasgow and Edinburgh could not provide this.

Table 3 presents the results:

**Table 3: What type of schools do children with autistic spectrum disorders attend?**

NHS Board	Nursery	Mainstream Primary	Mainstream Secondary	Specialist Primary	Specialist Secondary	Specialist out of area schools	Total	% of children with ASD this information is provided for	
								Total all children with ASD from table 1	% of children with ASD this information is provided for
Argyll and Clyde	27	88	36	33	16	13	213	220	97%
Ayrshire & Arran	13	64	20	39	16	9	161	163	99%
Borders	-	-	-	-	-	-	-	-	-
Dumfries and Galloway	9	41	22	17	0	2	91	91	100%
Fife	47	156	21	50	28	2	304	304	100%
Forth Valley	12	11	5	16	2	7	53	56	95%
Grampian	13	41	25	24	21	10	134	202	66%
Greater Glasgow	1	6	6	10	14	6	43	522	8%
Highland	8	154	71	21	29	5	288	294	98%
Lanarkshire	96	79	27	202	102	24	530	561	94%
Lothian	20	57	22	27	19	6	151	604	25%
Orkney	9	48	18	4	4	0	83	91	91%
Shetland	2	8	4	9	1	1	25	15	167%
Tayside	39	78	40	21	12	8	198	289	69%
Western Isles	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>296</b>	<b>831</b>	<b>317</b>	<b>473</b>	<b>264</b>	<b>93</b>	<b>2,274</b>	<b>3,412</b>	<b>67%</b>
<b>Percentage of total</b>	<b>13%</b>	<b>37%</b>	<b>14%</b>	<b>21%</b>	<b>12%</b>	<b>4%</b>	<b>100%</b>		

Source: Audit of services for people with autistic spectrum disorders, 2003

The figures show that nearly two-thirds (64%) of children with autistic spectrum disorders in primary school attend mainstream schooling.

Also that over half (55%) of children with autistic spectrum disorders in secondary school attend mainstream schooling. However care should be taken when interpreting this as we also know that the figures for secondary school age children are less reliable than those for primary school age children. Partnerships are more likely to be aware of children in specialist schools which may skew this figure.

#### 4. Children and Young People specifically diagnosed as having Asperger Syndrome.

Table 4 shows the number of children in each NHS Board area diagnosed as having Asperger syndrome. We have compared this with the overall number of children with autistic spectrum disorders in order to calculate the percentage of children with autistic spectrum disorders and Asperger. This varies from area to area, from 13% in Tayside to 44% in Argyll and Clyde and 67% in Shetland.

**Table 4: How many children and young people are specifically diagnosed as having Asperger syndrome?**

<b>NHS Board</b>	<b>Number diagnosed with Asperger syndrome</b>	<b>Number with autistic spectrum disorders</b>	<b>% with Asperger syndrome</b>
Argyll and Clyde	87	196	44%
Ayrshire & Arran	41	117	35%
Borders	-	-	-
Dumfries and Galloway	20	91	22%
Fife	118	304	39%
Forth Valley	14	56	25%
Grampian	42	202	21%
Greater Glasgow	5	42	12%
Highland	0	-	-
Lanarkshire	171	561	30%
Lothian	64	161	40%
Orkney	39	91	43%
Shetland	10	15	67%
Tayside	19	142	13%
Western Isles	-	-	-
<b>Total</b>	<b>630</b>	<b>1,978</b>	<b>32%</b>

*Source: Audit of services for people with autistic spectrum disorders,*

Overall, around a third of children with autistic spectrum disorders were specifically diagnosed with Asperger syndrome. Once again information was patchy and where information is not shown, it was either not available or deemed so unreliable that we have excluded it from the table.

**5. Children and Young People with Asperger Syndrome and no learning disabilities.**

Partnerships were asked how many children diagnosed with Asperger Syndrome had no learning disabilities.

The results are shown in table 5.

**Table 5: How many children and young people with Asperger syndrome have no learning disabilities?**

<b>NHS Board</b>	<b>Number with Asperger syndrome and no learning disability</b>	<b>Number diagnosed with Asperger syndrome</b>	<b>% with no learning disabilities</b>
Argyll and Clyde	68	87	78%
Ayrshire & Arran	11	11	100%
Borders	-	-	-
Dumfries and Galloway	14	20	70%
Fife	-	-	-
Forth Valley	9	14	64%
Grampian	18	36	50%
Greater Glasgow	0	5	0%
Highland	-	-	-
Lanarkshire	0	171	0%
Lothian	43	64	67%
Orkney	39	39	100%
Shetland	8	10	80%
Tayside	17	19	89%
Western Isles	-	-	-
<b>Total</b>	<b>227</b>	<b>476</b>	<b>48%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*

Either partnerships have different interpretations of what constitutes learning disabilities and Asperger syndrome or they have interpreted this question incorrectly. Many areas answered all (i.e. all children with Asperger do not have learning disabilities) while other areas answered none (i.e. everyone with Asperger has a learning disability).

The wording of this question could lead to misinterpretation and this should be clarified for any future survey.

## ADULTS

### 6. Adults diagnosed as having an autistic spectrum disorder, including Asperger syndrome

Table 6A summarises the information received for adults diagnosed as having autistic spectrum disorders, including Asperger syndrome. Many partnerships found this table hard to complete and most noted that the adult figures were likely to significantly underestimate the true figures. Overall we have complete information for only 8 out of the 15 NHS Board areas, partial information for a further 3 and no information for 4 (including Glasgow).

**Table 6A: Adults diagnosed as having autistic spectrum disorders, including Asperger syndrome.**

NHS Board	18-24	24-49	50+	Total
Argyll and Clyde	17	27	0	44
Ayrshire & Arran	-	-	-	36
Borders	-	-	-	-
Dumfries and Galloway	0	15	1	16
Fife	4	37	3	44
Forth Valley	-	-	-	-
Grampian	37	53	5	97
Greater Glasgow	-	-	-	-
Highland	18	20	0	38
Lanarkshire	13	21	3	37
Lothian	30	174	61	265
Orkney	11	2	-	13
Shetland	3	5	1	9
Tayside	16	30	0	46
Western Isles	-	-	-	-
<b>Total</b>	<b>149</b>	<b>384</b>	<b>74</b>	<b>645</b>
<b>Percentage of total</b>	<b>24%</b>	<b>63%</b>	<b>12%</b>	<b>100%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*

Table 6A shows a total of 645 adults diagnosed with autistic spectrum disorders in Scotland. We know that this is a significant underestimate of the total number of adults with autistic spectrum disorders from the comments received with these figures and also the large amount of missing data in this table.

Overall we see that 24% of people are in the 18-24 age group, 63% are aged 25-49 and 12% are over 50 years of age.

Table 6B looks at the number of adults with autistic spectrum disorders per 10,000 population for each NHS Board area. The rate is highest for the 18-24 age group where for Scotland there are 5.1 people diagnosed per 10,000 population. This drops to 3.2 for the 25-49 age group and again to 0.6 for the 50+ age group. Again these lower rates probably reflect a combination of better reporting procedures and improved diagnosis over the years.

**Table 6B :Adults diagnosed as having autistic spectrum disorders, including Asperger syndrome. Rates per 10,000 population.**

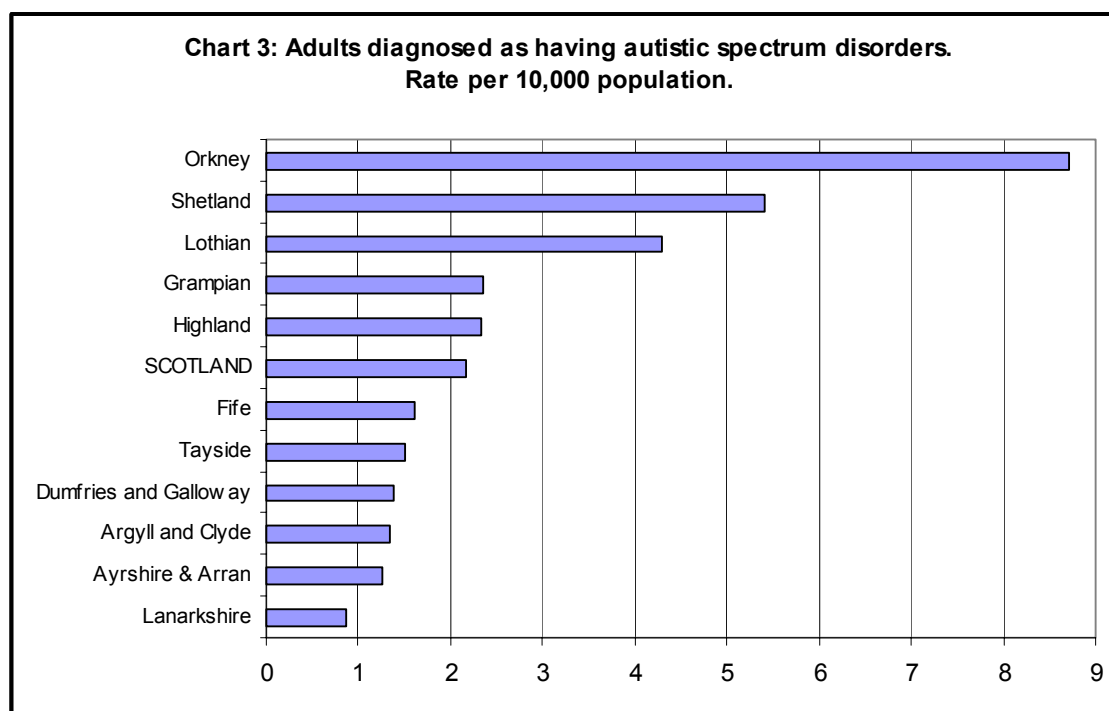
	18-24	25-49	50+	Total
	Rate per 10,000 population aged 18-24	Rate per 10,000 population aged 25-49	Rate per 10,000 population aged 50+	Rate per 10,000 population aged 18+
<b>NHS Board</b>				
Argyll and Clyde	5.1	1.8	0.0	1.3
Ayrshire & Arran	-	-	-	1.3
Borders	-	-	-	-
Dumfries and Galloway	0.0	3.1	0.2	1.4
Fife	1.3	3.1	0.2	1.6
Forth Valley	-	-	-	-
Grampian	7.9	2.8	0.3	2.4
Greater Glasgow	-	-	-	-
Highland	13.3	2.8	0.0	2.3
Lanarkshire	2.7	1.0	0.2	0.9
Lothian	3.8	5.9	2.5	4.3
Orkney	97.6	3.1	-	8.7
Shetland	19.8	6.4	1.4	5.4
Tayside	4.8	2.3	0.0	1.5
Western Isles	-	-	-	-
<b>SCOTLAND (excluding areas with no data)</b>	<b>5.1</b>	<b>3.2</b>	<b>0.6</b>	<b>2.2</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Notes:**

- 1) All figures in this table show rates per 10,000 population.
- 2) The population figures used in the denominator relate to the whole NHS Board area.

As with the children’s data, the rates of diagnosis vary considerably between NHS Board areas. Chart 3 shows the number of adults diagnosed with autistic spectrum disorders per 10,000 population (aged 18+) for each NHS Board. Again Orkney has the highest rate – 8.7 people diagnosed per 10,000 population.



## 7. Adults with autistic spectrum disorders and other needs.

This question asked how many adults with autistic spectrum disorders also had needs relating to:

- Learning disabilities
- Physical disabilities
- Learning and physical disabilities
- Mental health problems
- Other behavioural or biomedical conditions

Again, many partnerships struggled to answer this question, either saying that this information was unknown or was not held on their current database.

Overall 6 NHS Board areas managed to complete this question, 3 partially completed it and 6 provided no information at all. Table 7 summarises the results:

**Table 7: How many adults with autistic spectrum disorders including Asperger syndrome have additional needs?**

NHS Board	Learning disabilities	Physical disabilities	Learning and physical disabilities	Mental health problems	Other behavioural or biomedical conditions	Total
Argyll and Clyde	6	0	1	1	0	8
Ayrshire & Arran	7	0	1	1	6	15
Borders	-	-	-	-	-	-
Dumfries and Galloway	15	1	0	0	0	16
Fife	-	-	-	-	-	-
Forth Valley	-	-	-	-	-	-
Grampian	78	1	8	2	12	101
Greater Glasgow	-	-	-	-	-	-
Highland	13	1	1	4	3	22
Lanarkshire	0	0	18	0	57	75
Lothian	-	-	-	-	-	-
Orkney	9	0	1	0	0	10
Shetland	5	1	0	1	0	7
Tayside	27	0	0	0	10	37
Western Isles	-	-	-	-	-	-
<b>Total</b>	<b>160</b>	<b>4</b>	<b>30</b>	<b>9</b>	<b>88</b>	<b>291</b>
<b>Percentage of all adults</b>	<b>55%</b>	<b>1%</b>	<b>10%</b>	<b>3%</b>	<b>30%</b>	<b>100%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*

The results show that overall more than half (55%) of the adults with autistic spectrum disorders known to partnerships also have learning disabilities.

In addition, nearly a third of these adults had other behavioural or biomedical conditions, 10% had learning and physical disabilities and 3% had mental health problems.

## 8. Adults specifically diagnosed as having Asperger Syndrome.

Table 8 shows the number of adults in each NHS Board area diagnosed as having Asperger syndrome. We have compared this with the overall number of adults with autistic spectrum disorder in order to calculate the percentage of adults with autistic spectrum disorder and Asperger. This varies from area to area, from 13% in Tayside to 44% in Argyll and Clyde and 67% in Shetland.

**Table 8: How many adults are diagnosed as having Asperger syndrome?**

NHS Board	Number diagnosed with Asperger syndrome	Number with autistic spectrum disorders	% with Asperger syndrome
Argyll and Clyde	13	44	30%
Ayrshire & Arran	13	36	36%
Borders	-	-	-
Dumfries and Galloway	1	16	6%
Fife	-	-	-
Forth Valley	-	-	-
Grampian	17	95	18%
Greater Glasgow	-	-	-
Highland	9	38	24%
Lanarkshire	0	37	0%
Lothian	18	265	7%
Orkney	2	13	15%
Shetland	5	9	56%
Tayside	8	46	17%
Western Isles	-	-	-
<b>Total</b>	<b>86</b>	<b>599</b>	<b>14%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

Overall, only 14% of adults with autistic spectrum disorders were specifically diagnosed with Asperger syndrome. This compares with around a third of children (see table 4). Once again information was patchy and the percentage of adults with Asperger syndrome varies greatly from area to area. Ongoing improvements in reporting and diagnosis may reduce the overall variance in these figures.

## 9. Adults with Asperger Syndrome and no learning disabilities.

Partnerships were asked how many children diagnosed with Asperger Syndrome had no learning disabilities.

The results are shown in table 9.

**Table 9: How many adults with Asperger syndrome have no learning disabilities?**

<b>NHS Board</b>	<b>Number with Asperger syndrome and no learning disability</b>	<b>Number with Asperger syndrome</b>	<b>% with no learning disabilities</b>
Argyll and Clyde	13	13	100%
Ayrshire & Arran	13	13	100%
Borders	-	-	-
Dumfries and Galloway	-	-	-
Fife	-	-	-
Forth Valley	-	-	-
Grampian	13	17	76%
Greater Glasgow	-	-	-
Highland	4	9	44%
Lanarkshire	-	-	-
Lothian	18	18	100%
Orkney	2	2	100%
Shetland	4	5	80%
Tayside	0	8	0%
Western Isles	-	-	-
<b>Total</b>	<b>67</b>	<b>85</b>	<b>79%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*

Four areas answered that all of the adults with Asperger do not have learning disabilities while one area reported that everyone with Asperger has a learning disability.

The wording of this question could lead to misinterpretation and this should be clarified for any future survey.

## ANNEX A : CHILDREN AND YOUNG PEOPLE WITH AUTISTIC SPECTRUM DISORDERS, INCLUDING ASPERGER SYNDROME.

Table 1A :Children and young people diagnosed as having autistic spectrum disorders, including Asperger syndrome.

NHS Board	Local Authority/ NHS Board	Pre-School	Aged 5-10	Aged 11-16	Aged 16-18 in school	Aged 16-18 who have left school	Total
Argyll & Clyde	<i>Argyll &amp; Bute</i>	8	38	23	5	5	79
	<i>Argyll and Clyde excluding Argyll and Bute</i>	13	62	36	3	3	117
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	1	9	10	4	0	24
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	4	52	11	3	0	70
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	3	28	10	4	1	46
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	5	23	17	1	1	47
Borders		-	-	-	-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	9	56	26	-	-	91
Fife	Fife	47	206	49	2	-	304
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	3	7	3	2	1	16
	<i>Stirling Council &amp; Forth Valley NHS</i>	4	26	8	2	0	40
Grampian	<i>Aberdeen City Council</i>	3	15	13	7	0	38
	<i>Aberdeenshire Council Grampian NHS Board <sup>3</sup></i>	15	75	52	13	7	162
	<i>Moray Council</i>	-	-	-	2	-	2
Greater Glasgow	<i>Glasgow Audit Final <sup>1</sup></i>	80	245	114	34	7	480
	<i>East Renfrewshire Greater Glasgow NHS</i>	1	6	23	12	0	42
Highland	Highland Council & NHS Highland	10	156	106	16	6	294
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire <sup>2</sup></i>	36	83	41	78	-	238
	<i>South Lanarkshire &amp; NHS Lanarkshire <sup>2</sup></i>	67	156	76	14	10	323
Lothian	<i>West Lothian <sup>1</sup></i>	17	87	46	9	2	161
	<i>Lothian - excluding West Lothian</i>	63	290	90	-	-	443
Orkney	Orkney Council SW & Education NHS Orkney	10	44	31	3	3	91
Shetland	Shetland Council & NHS Shetland	2	0	11	1	1	15
Tayside	<i>Angus</i>	3	21	18	3	3	48
	<i>Dundee Education</i>	21	46	30	4	-	101
	<i>Dundee Social Work</i>	13	0	19	11	3	46
	<i>Perth &amp; Kinross Council</i>	18	51	13	12	-	94
Western Isles		-	-	-	-	-	-
<b>Total</b>		456	1,782	876	245	53	3,412
Percentage of total		13%	52%	26%	7%	2%	100%

Source: Audit of services for people with autistic spectrum disorders, 2003

<sup>1</sup> Estimated split of 16-18 year olds at school and left school

<sup>2</sup> Estimated split for 5-10 years and 11-16 years

<sup>3</sup> 9 children diagnosed but with no information on age were allocated proportionally to each age group.

- indicates that information is unknown, unavailable or unreliable.

**Table 2: How many children and young people with autistic spectrum disorders including Asperger syndrome have other needs?**

<b>NHS Board</b>	<b>Local Authority/ NHS Board</b>	<b>Learning disabilities</b>	<b>Physical disability</b>	<b>Learning and physical disabilities</b>	<b>Mental health problems</b>	<b>Other behavioural or biomedical conditions</b>	<b>Total all children with ASD from table 1</b>
Argyll & Clyde	<i>Argyll &amp; Bute</i>	17	0	0	0	0	79
	<i>Argyll and Clyde excluding Argyll and Bute</i>	96	1	0	2	12	117
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	8	0	5	0	1	24
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	61	2	3	1	3	70
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	12	0	0	0	1	46
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	10	0	0	0	0	47
Borders		-	-	-	-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	20	0	2	1	6	91
Fife	Fife	-	-	-	-	-	-
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	-	-	-	-	-	-
	<i>Stirling Council &amp; Forth Valley NHS</i>	40	-	-	-	4	40
Grampian	<i>Aberdeen City Council</i>	-	-	-	-	-	-
	<i>Aberdeenshire Council Grampian NHS Board</i>	44	4	5	6	30	162
	<i>Moray Council</i>	2	-	-	-	1	2
Greater Glasgow	<i>Glasgow Audit Final</i>	-	-	-	-	-	-
	<i>East Renfrewshire Greater Glasgow NHS</i>	10	0	5	0	0	42
Highland	Highland Council & NHS Highland	11	-	-	-	-	294
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	228	1	-	1	-	238
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	116	-	-	-	-	323
Lothian	<i>West Lothian</i>	-	-	-	-	-	-
	<i>Lothian - excluding West Lothian</i>	-	-	-	-	-	-
Orkney	Orkney Council SW & Education NHS Orkney	14	2	3	2	0	91
Shetland	Shetland Council & NHS Shetland	14	0	1	1	3	15
Tayside	<i>Angus</i>	16	0	0	0	0	48
	<i>Dundee Education</i>	33	0	0	0	0	101
	<i>Dundee Social Work</i>	0	0	0	0	0	46
	<i>Perth &amp; Kinross Council</i>	68	2	0	0	0	94
Western Isles		-	-	-	-	-	-
<b>Total</b>		<b>820</b>	<b>12</b>	<b>24</b>	<b>14</b>	<b>61</b>	<b>1,970</b>
<b>Percentage of all children diagnosed with ASD</b>		<b>42%</b>	<b>0.6%</b>	<b>1%</b>	<b>1%</b>	<b>3%</b>	

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 3: What type of schools do children with autistic spectrum disorders attend?**

NHS Board	Local Authority/ NHS Board	Nursery	Mainstream	Mainstream	Specialist	Specialist	Specialist out of area schools	Total	Total all children with ASD from table 1	
			Primary	Secondary	Primary	Secondary				
Argyll & Clyde	<i>Argyll &amp; Bute</i>	8	29	20	5	5	6	<b>73</b>	79	
	<i>Argyll and Clyde excluding Argyll and Bute</i>	16	57	14	22	6	2	<b>117</b>	117	
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	3	2	2	6	5	5	<b>23</b>	24	
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	4	34	9	16	4	3	<b>70</b>	70	
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	4	12	4	18	2	4	<b>44</b>	46	
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	5	18	7	5	10	2	<b>47</b>	47	
Borders		-	-	-	-	-	-	-	-	
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	9	41	22	17	0	2	<b>91</b>	91	
Fife	Fife	47	156	21	50	28	2	<b>304</b>	304	
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	3	5	3	2	1	0	<b>14</b>	16	
	<i>Stirling Council &amp; Forth Valley NHS</i>	9	6	2	14	1	7	<b>39</b>	40	
Grampian	<i>Aberdeen City Council</i>		Children with ASD attend all of the above							38
	<i>Aberdeenshire Council Grampian NHS Board</i>	13	41	25	24	21	10	<b>134</b>	162	
	<i>Moray Council</i>								2	
Greater Glasgow	<i>Glasgow Audit Final</i>	-	-	-	-	-	-	-	480	
	<i>East Renfrewshire Greater Glasgow NHS</i>	1	6	6	10	14	6	<b>43</b>	42	
Highland	Highland Council & NHS Highland	8	154	71	21	29	5	<b>288</b>	294	
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	36	32	14	91	57	8	<b>238</b>	238	
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	60	47	13	111	45	16	<b>292</b>	323	
Lothian	<i>West Lothian</i>	20	57	22	27	19	6	<b>151</b>	161	
	<i>Lothian - excluding West Lothian</i>		Children with ASD attend all of the above							443
Orkney	Orkney Council SW & Education NHS Orkney	9	48	18	4	4	0	<b>83</b>	91	
Shetland	Shetland Council & NHS Shetland	2	8	4	9	1	1	<b>25</b>	15	
Tayside	<i>Angus</i>	3	21	15	0	0	6	<b>45</b>	48	
	<i>Dundee Education</i>	18	8	6	19	6	2	<b>59</b>	101	
	<i>Dundee Social Work</i>	0	0	0	0	0	0	<b>0</b>	46	
	<i>Perth &amp; Kinross Council</i>	18	49	19	2	6	Await info	<b>94</b>	94	
Western Isles		-	-	-	-	-	-	-	-	
<b>Total</b>		<b>296</b>	<b>831</b>	<b>317</b>	<b>473</b>	<b>264</b>	<b>93</b>	<b>2,274</b>	<b>3,412</b>	
Percentage of total		13%	37%	14%	21%	12%	4%	100%		

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 4: How many children and young people are specifically diagnosed as having Asperger syndrome?**

<b>NHS Board</b>	<b>Local Authority/ NHS Board</b>	<b>Number diagnosed with Asperger syndrome</b>	<b>Number with autistic spectrum disorders</b>	<b>% with Asperger syndrome</b>
Argyll & Clyde	<i>Argyll &amp; Bute</i>	39	79	49%
	<i>Argyll and Clyde excluding Argyll and Bute</i>	48	117	41%
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	0	-	-
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	30	70	43%
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>		-	-
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	11	47	23%
Borders		-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	20	91	22%
Fife	Fife	118	304	39%
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	9	16	56%
	<i>Stirling Council &amp; Forth Valley NHS</i>	5	40	13%
Grampian	<i>Aberdeen City Council</i>	6	38	16%
	<i>Aberdeenshire Council Grampian NHS Board</i>	35	162	22%
	<i>Moray Council</i>	1	2	50%
Greater Glasgow	<i>Glasgow Audit Final</i>		-	-
	<i>East Renfrewshire Greater Glasgow NHS</i>	5	42	12%
Highland	Highland Council & NHS Highland		-	-
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	79	238	33%
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	92	323	28%
Lothian	<i>West Lothian</i>	64	161	40%
	<i>Lothian - excluding West Lothian</i>		-	-
Orkney	Orkney Council SW & Education NHS Orkney	39	91	43%
Shetland			-	-
	Shetland Council & NHS Shetland	10	15	67%
Tayside	<i>Angus</i>	4	48	8%
	<i>Dundee Education</i>		-	-
	<i>Dundee Social Work</i>		-	-
	<i>Perth &amp; Kinross Council</i>	15	94	16%
Western Isles		-	-	-
<b>Total</b>		<b>630</b>	<b>1,978</b>	<b>32%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 5: How many children and young people with Asperger syndrome have no learning disabilities?**

<b>NHS Board</b>	<b>Local Authority/ NHS Board</b>	<b>Number with Asperger syndrome and no learning disability</b>	<b>Number diagnosed with Asperger syndrome</b>	<b>% with no learning disabilities</b>
Argyll & Clyde	<i>Argyll &amp; Bute</i>	39	39	100%
	<i>Argyll and Clyde excluding Argyll and Bute</i>	29	48	60%
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	0	0	0%
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	11	11	100%
Borders		-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	14	20	70%
Fife	Fife	-	-	-
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	9	9	100%
	<i>Stirling Council &amp; Forth Valley NHS</i>	0	5	0%
Grampian	<i>Aberdeen City Council</i>	-	-	-
	<i>Aberdeenshire Council Grampian NHS Board</i>	17	35	49%
	<i>Moray Council</i>	1	1	100%
Greater Glasgow	<i>Glasgow Audit Final</i>			
	<i>East Renfrewshire Greater Glasgow NHS</i>	0	5	0%
Highland	Highland Council & NHS Highland	-	-	-
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	0	79	0%
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	0	92	0%
Lothian	<i>West Lothian</i>	43	64	67%
	<i>Lothian - excluding West Lothian</i>	-	-	-
Orkney	Orkney Council SW & Education NHS Orkney	39	39	100%
Shetland	Shetland Council & NHS Shetland	8	10	80%
Tayside	<i>Angus</i>	2	4	50%
	<i>Dundee Education</i>	-	-	-
	<i>Dundee Social Work</i>	-	-	-
	<i>Perth &amp; Kinross Council</i>	15	15	100%
Western Isles		-	-	-
<b>Total</b>		<b>227</b>	<b>476</b>	<b>48%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

## ANNEX B : ADULTS WITH AUTISTIC SPECTRUM DISORDERS, INCLUDING ASPERGER SYNDROME.

**Table 6A: Adults diagnosed as having autistic spectrum disorders, including Asperger syndrome.**

NHS Board	Local Authority/ NHS Board	18-24	24-49	50+	Total
Argyll & Clyde	<i>Argyll &amp; Bute</i>	4	1	0	5
	<i>Argyll and Clyde excluding Argyll and Bute</i>	13	26	0	39
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	0	0	0	0
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-	14
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-	9
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-	13
Borders	Borders	-	-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	0	15	1	16
Fife	Fife	4	37	3	44
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	-	-	-	-
	<i>Stirling Council &amp; Forth Valley NHS</i>	-	-	-	-
Grampian	<i>Aberdeen City Council</i>	-	-	-	2
	<i>Aberdeenshire Council Grampian NHS Board</i>	30	39	2	71
	<i>Moray Council</i>	7	14	3	24
Greater Glasgow	<i>Glasgow Audit Final</i>	-	-	-	-
	<i>East Renfrewshire Greater Glasgow NHS</i>	0	0	0	0
Highland	Highland Council & NHS Highland	18	20	0	38
Lanarkshire	<i>North Lanark &amp; NHS Lanarkshire</i>	13	21	3	37
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>				0
Lothian	<i>NHS Lothian</i>	30	174	61	265
Orkney	Orkney Council SW & Education NHS Orkney	11	2	-	13
Shetland	Shetland Council & NHS Shetland	3	5	1	9
Tayside	<i>Angus</i>	4	3	0	7
	<i>Dundee</i>	0	16	0	16
	<i>Perth &amp; Kinross</i>	12	11	0	23
Western Isles	Western Isles	-	-	-	-
<b>Total</b>		<b>149</b>	<b>384</b>	<b>74</b>	<b>645</b>
<b>Percentage of total</b>		<b>24%</b>	<b>63%</b>	<b>12%</b>	<b>100%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 7: How many adults with autistic spectrum disorders including Asperger syndrome have additional needs?**

<b>NHS Board</b>	<b>Local Authority/ NHS Board</b>	<b>Learning disabilities</b>	<b>Physical disabilities</b>	<b>Learning and physical disabilities</b>	<b>Mental health problems</b>	<b>Other behavioural or biomedical conditions</b>	<b>Total</b>
Argyll & Clyde	<i>Argyll &amp; Bute</i>	1	0	1	0	0	2
	<i>Argyll and Clyde excluding Argyll and Bute</i>	5	0	0	1	0	6
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	0	0	0	0	0	0
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	7	0	1	1	6	15
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-	-	-	-
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	-	-	-	-	-	-
Borders	Borders	-	-	-	-	-	0
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	15	1	0	0	0	16
Fife	Fife	-	-	-	-	-	-
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	-	-	-	-	-	-
	<i>Stirling Council &amp; Forth Valley NHS</i>	-	-	-	-	-	-
Grampian	<i>Aberdeen City Council</i>	-	-	-	-	-	-
	<i>Aberdeenshire Council Grampian NHS Board</i>	50	0	3	0	12	65
	<i>Moray Council</i>	28	1	5	2	-	36
Greater Glasgow	<i>Glasgow Audit Final</i> <i>East Renfrewshire Greater Glasgow NHS</i>	0	0	0	0	0	0
Highland	Highland Council & NHS Highland	13	1	1	4	3	22
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	-	-	18	-	57	75
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	-	-	-	-	-	0
Lothian	<i>NHS Lothian</i>	-	-	-	-	-	-
Orkney	Orkney Council SW & Education NHS Orkney	9	0	1	0	0	10
Shetland	Shetland Council & NHS Shetland	5	1	0	1	0	7
Tayside	<i>Angus</i>	7	0	0	0	0	7
	<i>Dundee</i>	6	0	0	0	10	16
	<i>Perth &amp; Kinross</i>	14	0	0	0	0	14
Western Isles	Western Isles	-	-	-	-	-	-
<b>Total</b>		<b>160</b>	<b>4</b>	<b>30</b>	<b>9</b>	<b>88</b>	<b>291</b>
<b>Percentage of all adults diagnosed with ASD</b>		<b>55%</b>	<b>1%</b>	<b>10%</b>	<b>3%</b>	<b>30%</b>	<b>100%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 8: How many adults are diagnosed as having Asperger syndrome?**

<b>NHS Board</b>	<b>Local Authority/ NHS Board</b>	<b>Number diagnosed with Asperger syndrome</b>	<b>Number with autistic spectrum disorders</b>	<b>% with Asperger syndrome</b>
Argyll & Clyde	<i>Argyll &amp; Bute</i>	0	5	0%
	<i>Argyll and Clyde excluding Argyll and Bute</i>	13	39	33%
	<i>Argyll &amp; Clyde NHS and East Renfrewshire</i>	0	0	-
Ayrshire & Arran	<i>East Ayrshire Council Ayrshire &amp; Arran HB</i>	5	14	36%
	<i>North Ayrshire Council Ayrshire &amp; Arran HB</i>	6	9	67%
	<i>South Ayrshire Council Ayrshire &amp; Arran HB</i>	2	13	15%
Borders	Borders	-	-	-
Dumfries & Galloway	Dumfries and Galloway Council & NHS D&G	1	16	6%
Fife	Fife	-	-	-
Forth Valley	<i>Clackmannanshire Council &amp; Forth Valley NHS</i>	-	-	-
	<i>Stirling Council &amp; Forth Valley NHS</i>	-	-	-
Grampian	<i>Aberdeen City Council</i>	-	-	-
	<i>Aberdeenshire Council Grampian NHS Board</i>	10	71	14%
	<i>Moray Council</i>	7	24	29%
Greater Glasgow	<i>Glasgow Audit Final</i>	-	-	-
	<i>East Renfrewshire Greater Glasgow NHS</i>	0	0	-
Highland	Highland Council & NHS Highland	9	38	24%
Lanarkshire	<i>North Lanarkshire &amp; NHS Lanarkshire</i>	0	37	0%
	<i>South Lanarkshire &amp; NHS Lanarkshire</i>	-	-	-
Lothian	<i>NHS Lothian</i>	18	265	7%
Orkney	Orkney Council SW & Education NHS Orkney	2	13	15%
Shetland	Shetland Council & NHS Shetland	5	9	56%
Tayside	<i>Angus</i>	2	7	29%
	<i>Dundee</i>	0	16	0%
	<i>Perth &amp; Kinross</i>	6	23	26%
Western Isles	Western Isles	-	-	-
<b>Total</b>		<b>86</b>	<b>599</b>	<b>14%</b>

Source: Audit of services for people with autistic spectrum disorders, 2003

**Table 9: How many adults with Asperger syndrome have no learning disabilities?**

<b>NHS Board</b>	<b>Number with Asperger syndrome and no learning disability</b>	<b>Number with Asperger syndrome</b>	<b>% with no learning disabilities</b>
Argyll & Clyde	0	0	-
	13	13	100%
	0	0	-
Ayrshire & Arran	5	5	100%
	6	6	100%
	2	2	100%
Borders	-	-	-
Dumfries & Galloway	-	-	-
Fife	-	-	-
Forth Valley	-	-	-
	-	-	-
Grampian	-	-	-
	6	10	60%
	7	7	100%
Greater Glasgow	-	-	-
	0	0	-
Highland	4	9	44%
Lanarkshire	-	-	-
	-	-	-
Lothian	18	18	100%
Orkney	2	2	100%
Shetland	4	5	80%
Tayside	0	2	0%
	0	0	-
	0	6	0%
Western Isles	-	-	-
<b>Total</b>	<b>67</b>	<b>85</b>	<b>79%</b>

*Source: Audit of services for people with autistic spectrum disorders, 2003*



## **ANNEX C: WRITTEN QUESTIONS ASKED FOR IN AUDIT OF SERVICES FOR PEOPLE WITH AUTISTIC SPECTRUM DISORDERS.**

**10. Research tells us that prevalence rates of autistic spectrum disorder represent an underestimate. To what extent do you consider the numbers above to be an accurate reflection of all those who live in your area?**

### **ARGYLL AND CLYDE**

#### **Argyll & Bute Council**

It is believed that the figures represent a significant under-representation of those with ASD in Argyll and Bute. This was thought to be due to a historical under-diagnosis and the absence of clearly defined referral pathways and multi-agency assessment processes for adults.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Most likely a gross underestimate.

#### **East Renfrewshire Council, NHS A&C and Greater Glasgow NHS**

The above return represents an underestimate, for example three adults within East Renfrewshire Council learning disability resource centres are thought to have autistic spectrum disorders. Further, as a result of changing patterns of diagnosis over recent years there are likely to be substantial numbers of adults with ASD who are not known to services and are not diagnosed as having ASDs.

### **AYRSHIRE AND ARRAN**

The above numbers are without doubt a gross under-representation of the numbers of people in Ayrshire with Aspergers. It is apparent that information collection and collation for adults is almost non-existent. In order to answer many of the questions within this template we would require clinicians, practitioners and providers to manually trawl their records. This would require significant effort by front line staff and the information gathered would not be reliable with duplication, misdiagnosis, misinterpretation and gaps throughout the process.

### **DUMFRIES AND GALLOWAY**

There is little doubt that this number is far short of the actual number of adults in Dumfries & Galloway with ASD.

### **FIFE**

They are an underestimate for children as they are based on the cases known to Educational Psychologists.

### **FORTH VALLEY**

Difficult to quantify due to the lack of clarification regarding the diagnosis of ASD and Asperger.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Based on the fact that a number of people will not have been diagnosed and that data recording is incomplete any figures produced will be lower than the actual number.

#### **Aberdeenshire Council and NHS Grampian**

These numbers are an underestimate, as they do not include the figures for the whole of Aberdeenshire in relation to social work clients. Returns are still awaited from five area teams and from education, in order to cross reference the information. Unfortunately, the local health board - NHS Grampian were unable to provide numbers as specific data on autism and autistic spectrum disorders is not collated currently. However, an estimate of approximately 200 children and young people was provided for Aberdeen City and Aberdeenshire, hence giving an estimate of 80 children for Aberdeenshire alone. The figures provided by Social Work only include those children who have been specifically diagnosed and did not count those young people whom workers are in the process of trying to obtain a diagnosis for. Thus, the Social Work figures, although greater

than the estimate provided by the NHS, are also greatly underestimated. There is low diagnosis for long-standing clients, whom workers are aware have autism as well as a learning disability.

#### **Moray Council**

These figures are not likely to be at all accurate.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

We suspect the figures are significant, but unquantified under-estimate of the true position particularly in respect of people with Aspergers.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

The above return represents an underestimate, for example three adults within East Renfrewshire Council learning disability resource centres are thought to have autistic spectrum disorders. Further, as a result of changing patterns of diagnosis over recent years there are likely to be substantial numbers of adults with ASD who are not known to services and are not diagnosed as having ASDs.

### **HIGHLAND**

It is believed that these figures comprise a significant underestimate due to the lack of a diagnostic process particularly for adults. It is believed that the figures for younger children are accurate due to the development of diagnostic tools for children are accurate due to the development of diagnostic tools for children and the establishment of multi-disciplinary partnerships which include education.

### **LANARKSHIRE**

The estimated numbers provided for the pre-school and primary school ages are thought to be a reasonably accurate reflection of the true picture. However the estimated number of secondary school children is less accurate and the estimated number of adults with ASD is likely to be a considerable underestimate of the true prevalence, linked to the inadequacies of current information systems and variation in case definition, case ascertainment and awareness through time.

### **LOTHIAN**

It is certain that the available figures represent a huge underestimate. Many will not be known to Health or Social Services and data is not collected to facilitate accurate statements regarding prevalence.

### **ORKNEY**

Figures for children are an accurate representation of needs. One or two children may yet be diagnosed. Figures for adults are under estimated as diagnosis has not been made and access to specialists is variable.

### **SHETLAND**

High functioning Aspergers - 5-10% Remainder 40% accurate. Figures clearly represent a) an increase in detection of ASDs; b) broadening of analysis levels owing to the marked increase in numbers of clients < 16 in recent years.

### **TAYSIDE**

#### **Angus Council**

This represents only people who are current users of social work services and who have a known diagnosis. It is therefore not an accurate reflection of all those who live in Angus.

#### **Dundee City Council**

Expect figures to currently underestimate late PS/Secondary but becoming more accurate. Pre-school and early primary close to accurate.

#### **Perth & Kinross Council**

Figures for children/young people fall short of national prevalence rates, this is likely to be a result of either an understating of the true numbers affected and/or difficulties in collating accurate local information due to problems with data collection. Figures for adults reflect the national findings that the numbers known to

services/diagnosed represent a significant underestimate of those individuals likely to be affected. For example day centre managers locally consider a number of people to be on the spectrum who have had no formal diagnosis.

## **11. What changes are there in demand in the last 5 years? Are there increased numbers? If so, what do you attribute this to?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

It was felt that the behaviours presented by some adults previously categorised as being learning disabilities or mental health are now being categorised as having an ASD element. This does not however seem to translate into a significant increase in diagnosis.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Increased numbers for South of the Clyde. This has been attributed to the creation of a specialist service in Child Clinical Psychology since 2000. There is also an increase in parental influence which creates a subsequent demand for services.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Learning disability resource centres report several younger adults with suspected ASD accessing services in the last five years and staff within resource centres have undertaken additional training to respond to the needs of eservice users with ASDs.

### **AYRSHIRE & ARRAN**

There is anecdotal evidence of increased demand upon services, adult health services have not experienced this. Any increase could be attributed to greater public and staff awareness, improved diagnosis, better recording mechanisms within children's services and development of local third sector residential services.

### **DUMFRIES & GALLOWAY**

An increase of 9 fold, this due to a widening diagnostic net and more awareness of the condition.

### **FIFE**

Increased awareness has led to a threefold increase in identification.

### **FORTH VALLEY**

Increase in demand for respite care and jointly funded packages of home care.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The generally held view is that numbers have increased significantly over the past five years. It may be that there has been an actual increase, but a contributory factor is likely to be the increased level of awareness and improvements in our assessment and diagnostic processes.

#### **Aberdeenshire Council and NHS Grampian**

Increased demand for specialist services especially for people with Aspergers as their needs may not be best met in traditional service provision. There appears to be a much better diagnosis of young people and there is a much greater expectation of services and support provision by people and families. Education seem to be tailoring services much better to people who have been diagnosed with autism and parents expect similar made services in adult provision. This is often something we cannot provide.

#### **Moray Council**

There has been an increased demand and numbers. Likely factors for this include increased public awareness and professional awareness. Adults with learning disabilities were previously treated within institutional settings and regarded as having mental health problems or challenging behaviour. For those with borderline difficulties obtaining a diagnosis of ASD may be a route to improved services.

## **GREATER GLASGOW**

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Learning disability resource centres report several younger adults with suspected ASD accessing services in the last five years and staff within resource centres have undertaken additional training to respond to the needs of service users with ASDs.

## **HIGHLAND**

The diagnosis of autism has increased in the last five years, though no specific figures are available. This is due to better partnership working, the consistent use of assessment tools and raised awareness of ASD as distinct, especially from learning disabilities. There has been some corresponding demand for community nursing services.

## **LANARKSHIRE**

### **North Lanarkshire Council**

There is a general perception of increased numbers of children diagnosed with autistic spectrum disorders resulting in an increased demand for services. The number of children using family based short break services has doubled from 4 to 8 in the last 5 years. There has also been a slight increase in the numbers referred for residential school in the same period. This is largely attributed to overall growth in family and community based services (shared care) and perhaps better identification and diagnosis of condition.

### **South Lanarkshire Council**

There is a general perception of increased demand for services including demand for home programmes, school placements, residential placements and social work input. For example, there have been 5 new residential placements in the last 3 years at a cost of circa £500,000. There have been 6 requests in the last 5 years to fund 30 hours per week one to one input at home for under fives. Existing services are currently unable to support such models of care due to resource requirements.

## **LOTHIAN**

Increase in diagnosis due to raised awareness and understanding of "spectrum". Reclassification of some plus reduction of social tolerance to "odd behaviour".

## **ORKNEY**

More widespread awareness of the range and view of the spectrum and its many forms knowledge in schools assessing a need for further assessment. Increased numbers diagnosed.

## **SHETLAND**

Demand for diagnosis, therapy, respite and alternative treatments. Any increase in numbers is attributed to jungle/grape vine, internet, parent support group and media.

## **TAYSIDE**

### **Angus Council**

There is some increase in demand which we would attribute to clearer diagnosis.

### **Dundee City Council**

Indications are of an increase in early identification and diagnosis. Increases are seen as due to a greater awareness of ASD through the development of specialisms within services and a greater readiness to diagnose. The other side of this is that there may be an interim period of over diagnosis.

## **12. What structures, systems and procedures are there for diagnosis of both children and adults?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

There is a formalised diagnostic procedure in place for children. This is led by the Autism Assessment Team and supplemented by diagnosis outwith this process by community based Paediatrician/Speech and Language Therapist/ Educational Psychologist Networks. There is no similar formalised referral pathway for adults with ASD. Those adults who also have a learning disability are likely to be included within the learning disability networks.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

4 members of clinical psychology undertake assessments ( 2 Child) (2 Adult) for South of the Clyde. Have no formal structure or systems in place for adults however, there is input from Psychiatry, Psychology and the Autism Assessment team, at Yorkhill, for children.

### **AYRSHIRE & ARRAN**

Predominately diagnosis is informed by a range of contributions from the multidisciplinary team. The Clinical Psychologist, Speech and Language Therapist and the Community Paediatrician have central roles in the assessment and diagnostic process. A local ASD working group is currently mapping services and process for 0 to 5 and 5 to 19 age groups and are expected to report in August this year.

### **DUMFRIES & GALLOWAY**

Good interagency communication clinics provide robust mechanisms for diagnosis for children with ASD.

### **FIFE**

Children: A sub-group of child & Adolescent ASD Steering Group are currently developing care pathways for pre-school and school age children. This is not yet in operation.

### **FORTH VALLEY**

#### **Clackmannanshire Council And Forth Valley NHS**

Pre-5 SEN Service; Community early assessment team.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

For children there is a multi-agency approach to assessment, with diagnosis being the responsibility of the NHS Trust, Child Psychiatry and Clinical Psychology services. Raeden Centre offers assessment and support for young children and their families and 20-30 children are diagnosed with ASD per year. For adults, the picture is less clear. There is an expectation that diagnosis would have been made during childhood and a question in the minds of individuals, their families and professionals as to the benefit or the appropriateness of diagnosis in adult life. This is an area, which should be considered when developing the future plan.

#### **Aberdeenshire Council and NHS Grampian**

Following assessment, appropriate staff in relevant departments will make diagnosis.

#### **Moray Council**

MIDAS project, ASD project.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

**Yorkhill NHS Trust** – There is a specialist community autism team located within Community Child Health which consists of Community Paediatricians, Speech and Language Therapists and Occupational Therapists. Educational Psychology also provide an input to the team. The process of diagnosis is therefore conducted as a multi-disciplinary assessment. On-going management is also on a multi-disciplinary basis although therapy staff have the greatest input. Due to the length of wait for pre-school children (up to 9 months) to be assessed by the team, generic Child Development Centre staff (paediatricians and therapists) will see the child/family while they are waiting. All children referred to pre-school services should also have scheduled home visits from liaison nursery nurse. Where necessary, children will also be seen by a Clinical Psychologist (although there is no dedicated resource within this profession at present to support the work of the team).

**The Scottish Centre for Autism** – The SCA is part of the Child and Family Psychiatry Centre in Yorkhill NHS Trust. It offers a multi-disciplinary specialist second opinion assessment and diagnostic service for children and young people up to 18 years from throughout Scotland. The centre also offers early intervention in the form of pre-school parent's programme for children with a diagnosis of autism. This input is an adjunct to the child's pre-school educational placement and there is close liaison with these services.

**Primary Care NHS Trust** – The Trust has a number of diagnostic resources including: a Clinical Psychologist with significant interest in ASD offering an adult diagnostic service; the Learning Disability Team in adolescent psychiatry offers a range of services – diagnostic, interventions, liaison and support to other services/agencies. In the first 2 years of the team, 17% of the people using the service had ASD; a Complex Needs Support Team which is part of the Learning Disability Partnership offers a range of services including diagnosis, intervention, carer management, micro-commissioning and training. Over 60% of the clients using this service have ASD.

**Voluntary Sector** – There is co-operation with the Voluntary Sector which has an interest in this area: The National Autistic Society Development Team (National Co-ordinator and National Officer). The Scottish Society for Autism offers assessment of individuals with an emphasis on compatibility with potential service provisions.

## **HIGHLAND**

This falls within the umbrella of multi-disciplinary working between health, education, social work and the voluntary sector. For children, this will include Educational Psychology and Community Paediatrics. For all referrals Consultant Psychiatry and Speech and Language Therapy will be involved in contributing to assessment and diagnosis. Where the latter is unclear, a referral to the Central Communication Clinic will be made where further input from Clinical Psychology will be brought to bear. Outcomes for Children will include an Educational Plan, and for everyone, a Record of Need.

## **LANARKSHIRE**

### **North Lanarkshire Council**

The children are discussed at a local multi-disciplinary PRESCAT meeting. The Community Medical Officer liaises with the Educational Psychologist and Speech and Language Therapist to reach a diagnosis. Complex cases are referred to the Scottish Centre for Autism, Yorkhill.

Adults: the specialist learning disability team make diagnosis.

### **South Lanarkshire Council**

Children: Diagnostic Teams consisting of a Community Paediatrician and Speech and Language Therapist.

Adults: Diagnosis is made by the specialist learning disability Psychiatrist.

## **LOTHIAN**

W. Lothian - ASD assessment clinic for children (Dr. Ritchie), City of Edinburgh - Dr. A. O'Hare runs speech disorder elicitor for children. Lothian wide ICP for adults via CLDT regional service for complex causes.

**ORKNEY**

Referrals to Social Work Teams as appropriate. Multi disciplinary process 0-5years. 5+ psychologist, parent, teacher and sometimes health support. Referred on to other agencies where appropriate. Local Area Coordinator support.

**SHETLAND**

Children - CDI

Adults - GP, Psychology

**TAYSIDE****Dundee City Council**

There is a Pathways process in place modelled on the NAS Early Bird scheme. This continues to evolve and includes a care team of staff Grade Paediatrician, Speech & Language Therapist and Educational Psychologist - this is established in the pre-school sector. Referral to specialist health via GP.

**Perth & Kinross Council**

Within a medical/clinical system each discipline has its own procedures and duties. These would include referral protocols and duty to register. There is an emphasis locally to work closely together, sharing information and good practice.

### **13. Who is responsible for diagnosis?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist.

##### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Psychiatrist, Clinical Psychologist.

#### **AYRSHIRE & ARRAN**

Children – Community Paediatrician and occasionally clinical psychologist.

Adults – Clinical Psychologist.

#### **DUMFRIES & GALLOWAY**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist and Teacher.

#### **FIFE**

Psychiatrist, Acute and Community Paediatricians, Fife Autistic Spectrum Team (FAST).

#### **FORTH VALLEY**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist and Teacher.

#### **GRAMPIAN**

##### **Aberdeen City Council**

Child Psychiatrist and Child Psychologist (alone or as part of a team) and multi disciplinary team.

##### **Aberdeenshire Council and NHS Grampian**

Child Psychiatrist and Child Psychologist (alone or as part of a team) and multi disciplinary team.

##### **Moray Council**

Currently establishing multi-disciplinary team.

#### **GREATER GLASGOW**

##### **Glasgow City Council and Greater Glasgow NHS**

Multi-disciplinary team consisting of Community Paediatricians, Speech & Language Therapists and Occupational Therapists.

#### **HIGHLAND**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Community Paediatrician, Speech & Language Therapist and Teacher.

#### **LANARKSHIRE**

##### **North Lanarkshire Council**

Children - Educational Psychologist, Speech & Language Therapist and multi-disciplinary team.

Adults – Psychiatrist.

##### **South Lanarkshire Council**

Children - Psychiatrist, Clinical Psychologist and multi-disciplinary team.

Adults – Psychiatrist.

#### **LOTHIAN**

Children - Psychiatrist, Community Paediatrician, Speech & Language Therapist and multi-disciplinary team,

Adults – Psychiatrist, Clinical Psychologist, Speech & Language Therapist and multi-disciplinary team.

**ORKNEY**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist, Teacher and multi-disciplinary team.

**SHETLAND**

Children - Multi-disciplinary team.  
Adults – Clinical Psychologist.

**TAYSIDE****Dundee City Council**

Psychiatrist.

**Perth & Kinross Council**

Psychiatrist.

## **14. Who makes the diagnosis?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

Psychiatrist, Educational Psychologist and Speech & Language Therapist.

### **AYRSHIRE & ARRAN**

Children – Community Paediatrician.

Adults – Clinical Psychologist.

### **DUMFRIES & GALLOWAY**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist and multi-disciplinary team.

### **FIFE**

Psychiatrist, Acute and Community Paediatricians.

### **FORTH VALLEY**

Psychiatrist.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Clinical psychology, Psychiatry, Consultant Community Paediatrician.

#### **Aberdeenshire Council and NHS Grampian**

Child Psychiatrist and Child Psychologist, Educational Psychologist, Speech & Language Therapist and Consultant Community Paediatrician.

#### **Moray Council**

Multi-disciplinary team.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

Multi-disciplinary team consisting of Community Paediatricians, Speech & Language Therapists and Occupational Therapists.

### **HIGHLAND**

Teams consisting of Psychiatrist, Clinical Psychologist, Educational Psychologist, Community Paediatrician and Speech & Language Therapist.

### **LANARKSHIRE**

#### **North Lanarkshire Council**

Children - Multi-disciplinary team.

Adults – Psychiatrist.

#### **South Lanarkshire Council**

Children - Psychiatrist, Clinical Psychologist and multi-disciplinary team.

Adults – Psychiatrist.

### **LOTHIAN**

Children - Community Paediatrician as part of a team.

Adults – Psychiatrist.

### **ORKNEY**

Psychiatrist, Clinical Psychologist and Educational Psychologist.

**SHETLAND**

Children - Multi-disciplinary team.  
Adults – Clinical Psychologist.

**TAYSIDE****Dundee City Council**

Psychiatrist.

**Perth & Kinross Council**

Consultant Psychiatrist with the involvement of a consultant paediatrician.

## **15. Which diagnostic tools are used?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

Children - ICD-10.

Adults - Psychometric assessments, observational data, ICD-10 criteria, developmental history.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Psychometric assessments, Observational data, ICD-10 criteria, Developmental history, CARS.

### **AYRSHIRE & ARRAN**

WISC, ASD checklist and WAIS III. Clinical judgement and the contribution of others play a crucial role in the diagnostic process and conclusion.

### **DUMFRIES & GALLOWAY**

A range of assessment tools pertaining to the contribution of participating professionals.

### **FIFE**

Children: ADOS -Autism Diagnostic Observation Schedule; ADI - Autism Diagnostic Interview; Parent interview developed specifically by FAST; WISC - III (Weschler Intelligence Scale for Children).

### **FORTH VALLEY**

CHAT utilised by health visitors.

### **GRAMPIAN**

#### **Aberdeen City Council**

Diagnosis: Autism Diagnostic Observation Schedule, Autism Diagnostic interview.

Screening: Attwood, Autism Screening Questionnaire, Questionnaire by Gilberg et al.

#### **Aberdeenshire Council and NHS Grampian**

Diagnosis: Autism Diagnostic Observation Schedule, Autism Diagnostic interview.

Screening: Attwood, Autism Screening Questionnaire, Questionnaire by Gilberg et al.

#### **Moray Council**

Assessments based on DSM IV, Australian scale for Asperger's syndrome.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

See answer to question 12.

### **HIGHLAND**

The ICD 10 and ADI (Autism Diagnostic Interview, and DSM 1V are the primary means. These are supplemented by examination of a detailed developmental history as well as observational assessments and physical examinations.

### **LANARKSHIRE**

#### **North Lanarkshire Council**

DISCO, ICD-10 ( in conjunction with clinical judgement).

#### **South Lanarkshire Council**

DISCO ADOS, M(CHAT).

### **LOTHIAN**

Children: ICDIO, Gilliam Autism Rating scale, child development questionnaire.

Adults: Clinical interview based on ICDIO/ DSM IV/ Developmental history/ ASPI/ Other ASD specific tools and PDD.

**ORKNEY**

Observation in social settings and home. Developmental history. Reports from teachers. Communication and interaction - ChAT, ADOS.

**SHETLAND**

Childhood Autism Rating Scale, ADOS.

**TAYSIDE**

**Dundee City Council**

Refer to medics and Speech & Language Therapy.

**Perth & Kinross Council**

No one tool proves to be better or more reliable and therefore clinical judgement is used.

## **16. What agencies are involved in assessment?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

Psychology, Education and Paediatric Services.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Psychology, Education and Paediatric Services.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire and Arran NHS**

Predominately health agencies. Local authority Social Work departments engage with client post diagnosis/referral. Continuous assessment management process from education pre and post diagnosis. This often involves Speech & Language Therapists.

#### **North Ayrshire Council and Ayrshire and Arran NHS**

Predominately health agencies. Local authority Social Work departments engage with client post diagnosis/referral.

### **DUMFRIES & GALLOWAY**

Psychiatrist, Clinical Psychologist, Educational Psychologist, Speech & Language Therapist and multi-disciplinary team.

### **FIFE**

Paediatrics, Social Work, Psychiatry, Educational Psychology, Clinical Psychology, Occupational Therapy, Educational Home Visit Service, Community Nurse Therapists, Speech & Language Therapy.

### **FORTH VALLEY**

#### **Clackmannanshire Council And Forth Valley NHS**

Psychiatry, Paediatrics, Psychologist, Teacher, Speech & Language Therapist. Occupational Therapy and Social Work.

#### **Stirling Council And Forth Valley NHS**

Health, Social Work and Education.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The following disciplines from statutory and voluntary sectors: Occupational Therapy, Psychiatry, Mental Health Outreach Service, Speech & Language Therapy, Psychology (have a dedicated Early Bird Programme with Speech Therapy for ASD), Specialist Worker in the voluntary sector for children with special needs, Education, Social Work, Physiotherapy, Raeden Centre.

#### **Aberdeenshire Council and NHS Grampian**

Social Work, Occupational Therapy, Psychiatry, Speech & Language Therapy, Physiotherapy, Psychology, Mental Health Psychology, Education, the Raeden Centre.

#### **Moray Council**

Psychology, Nursing and Social Work.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

A specialist community autism team.

### **HIGHLAND**

Education, Social Work and Health.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Psychology, specialist ASD nurseries, Speech & Language Therapy, Education and Community Medical Officer, Social Work.

### **South Lanarkshire Council**

Psychiatry, Clinical Psychology and multi-disciplinary team.

## **LOTHIAN**

Health and Social Work.

## **ORKNEY**

Health, Education, Children's Services, Specialist teachers (pre-school), local authority.

## **SHETLAND**

Health, Education and Social Care.

## **TAYSIDE**

### **Angus Council**

Social Work, Health and Education. In specific cases, involving people with complex needs, we have used the SSA to contribute to an assessment.

### **Dundee City Council**

Social Work.

### **Perth & Kinross Council**

Education, Children's Services, Social Work and Health.

## **17. Who carries out the assessment?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

Psychologist and Paediatrician.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Psychologist and Paediatrician.

### **AYRSHIRE & ARRAN**

Community Paediatrician and Clinical Psychologist as part of multi-disciplinary team.

### **DUMFRIES & GALLOWAY**

Social Worker, Psychologist, Health Professional and Teacher.

### **FIFE**

Social Worker, Psychologist, Health Professional, Teacher and FAST.

### **FORTH VALLEY**

#### **Clackmannanshire Council And Forth Valley NHS**

Social Worker, Psychologist, Health Professional and Teacher.

#### **Stirling Council And Forth Valley NHS**

Social Worker, Psychologist, Health Professional, Teacher and multi-disciplinary team.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The lead tends to be provided by the Health professional who would be responsible for the diagnosis, with support from those listed in question 16.

#### **Aberdeenshire Council and NHS Grampian**

Social Worker, Psychologist, Health professional, Teacher and multi-disciplinary team.

#### **Moray Council**

Multi-disciplinary team.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

A specialist community autism team.

### **HIGHLAND**

Social Worker, Psychologist, Health professional, Teacher and multi-disciplinary team.

### **LANARKSHIRE**

#### **North Lanarkshire Council**

Children - Social Worker, Psychologist, Health professional, Teacher and multi-disciplinary team.

Adults - Social Worker, Psychologist, Health professional and multi-disciplinary team.

#### **South Lanarkshire Council**

Social Worker, Psychologist, Health professional and multi-disciplinary team.

### **LOTHIAN**

Social Work and multi-disciplinary team.

**ORKNEY**

Social Worker, Psychologist, Health professional, Teacher and multi-disciplinary team.

**SHETLAND**

Social Worker.

**TAYSIDE****Angus Council**

Social Work, Psychologist, Health professional, Teacher.

**Dundee City Council**

Children - Social Workers.

Adults – Care managers.

**Perth & Kinross Council**

Multi-disciplinary team.

## **18. How many assessments were undertaken from April 2001 to March 2004?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

Children – 37

Adults - 2

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Children – 37

Adults -2

### **DUMFRIES & GALLOWAY**

Children – circa 35

Adults - 2

### **FORTH VALLEY**

#### **Clackmannanshire Council And Forth Valley NHS**

12

### **GRAMPIAN**

#### **Aberdeenshire Council and NHS Grampian**

Children – Unknown

Adults – 10

#### **Moray Council**

Children – 0

Adults - 3

### **HIGHLAND**

Children – 40

Adults -4

### **LOTHIAN**

Not available.

### **ORKNEY**

Children – 29

Adults - 6

### **TAYSIDE**

#### **Angus Council**

Children - 3

**19. What are the average times between:**

- a) Referral to diagnosis**
- b) Diagnosis to assessment**
- c) Assessment to service delivery**

**ARGYLL & CLYDE**

**Argyll & Bute Council**

- a) 2-3 months
- b) 2-3 months
- c) Variable dependent upon need

**NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

- a) 2-3 months
- b) 2-3 months
- c) Variable dependent upon need

**AYRSHIRE & ARRAN**

- a) Not available
- b) Not available
- c) Not available

**DUMFRIES & GALLOWAY**

- a) Unknown
- b) Unknown
- c) Unknown

**FIFE**

- a) Can't quantify – different referral paths
- b) Can't quantify – usually more than one referral
- c) Can't quantify – different kinds of services

**FORTH VALLEY**

- a) Unknown
- b) Unknown
- c) Unknown

**GRAMPIAN**

**Aberdeen City Council and NHS Grampian**

- a) Unknown
- b) Unknown
- c) Unknown

**Aberdeenshire Council and NHS Grampian**

- a) 3 months
- b) 2 weeks
- c) 4 weeks

**Moray Council**

- a) Unknown
- b) Unknown
- c) Unknown

**GREATER GLASGOW**

**Glasgow City Council and Greater Glasgow NHS**

- a) Unknown

- b) Unknown
- c) Unknown

#### **HIGHLAND**

- a) Unclear as process is not linear
- b) Different for each individual
- c) Different for each individual

#### **LANARKSHIRE**

##### **North Lanarkshire Council**

- a) Variable
- b) Unknown
- c) Service delivery begins at the time of referral

##### **South Lanarkshire Council**

- a) Unknown
- b) Unknown
- c) Unknown

#### **LOTHIAN**

- a) Not Available
- b) Not Available
- c) Not Available

#### **ORKNEY**

- a) Sometimes years as development, 2 month baseline assessment
- b) Varies according to need
- c) Varies according to need

#### **SHETLAND**

- a) Not Available
- b) Not Available
- c) Not Available

#### **TAYSIDE**

- a) Unknown
- b) Unknown
- c) Unknown

## **20. What plans do you have to develop a single shared assessment tool (SSA) for ASD?**

### **ARGYLL & CLYDE**

At discussion stage in Children's Services. Will be developed as part of existing SSA being implemented in 2003.

### **AYRSHIRE & ARRAN**

Locally Children's Services are developing an Integrated Pan Ayrshire Joint Assessment. Development in line with Joint Future recommendations and would cover this client group.

### **DUMFRIES & GALLOWAY**

Under active consideration.

### **FIFE**

Plans currently in process to develop shared assessment tool led by ASD Steering Group.

### **FORTH VALLEY**

CHAT assessment tool rolled out across Forth Valley utilised by Health Visitors. A service re-design project is developing a multi-disciplinary assessment of ASD.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The development of the single shared assessment as part of the Joint Future agenda is well advanced and it is expected that a similar approach will be adopted for ASD.

#### **Aberdeenshire Council and NHS Grampian**

An SSA tool is being piloted. It will include people with ASD.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

Glasgow has developed and is in the process of implementing a single shared assessment tool for all children and young people. Specific training has been provided to enable staff to use this tool effectively for children affected by disability. The sensitivity of this tool to the needs of people with ASD will be examined and appropriate action taken.

### **HIGHLAND**

This is in hand, awaiting further guidance from the Executive on SSA. However, at this time it is unlikely that SSA will specifically be developed for ASD; SSA is the first assessment for all persons requiring services leading to more specialised assessment where required.

### **LANARKSHIRE**

#### **North Lanarkshire Council**

A single shared assessment tool for Learning Disabilities as a whole is currently being developed as part of the implementation of Joint Futures. Person Centred Plans, which focus on each person rather than their diagnosis will increasingly identify the needs more accurately and facilitate appropriate responses. This approach will be as appropriate for adults as it will be for children.

#### **South Lanarkshire Council**

A single shared assessment tool for Learning Disabilities as a whole is currently being developed as part of the implementation of Joint Futures. The development of a more specific tool for ASD may follow on from this work. There is a locally developed multi-agency approach for children.

### **LOTHIAN**

No plans for ASD specific tool. Single shared assessment for all clients with learning disabilities/mental health problems, part of Joint Futures agenda.

**ORKNEY**

Developing single shared assessment. Under discussion. Consideration to developing an appropriate tool . Guidelines have been developed to underpin assessment.

**SHETLAND**

No plans.

**TAYSIDE****Angus Council**

None. We will develop a single shared assessment tool for learning disability service users, in line with Joint Future requirements, but we have no plans to develop tools unique specific conditions.

**Dundee City Council**

Planning at initial stages. Ongoing discussion as to whether to adopt a generic or a specialist tool. Commitment to produce and implement with locally agreed timescales taking account of key issues such as training and IT.

**Perth & Kinross Council**

Planning at initial stages. Ongoing discussion as to whether to adopt a generic or a specialist tool. Commitment to produce and implement with locally agreed timescales, taking account of key issues such as training and IT.

## **21. How is information on assessment gathered for planning purposes?**

### **ARGYLL & CLYDE**

Via Partnership in Practice processes. Distributed by Clinical Psychology when required.

### **DUMFRIES & GALLOWAY**

Through Child Locality Teams.

### **FIFE**

Currently developing pre school community teams and school based teams with key workers for each child who will co-ordinate assessments for planning purposes.

### **FORTH VALLEY**

A manual record search through professional staff case records.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Within the social work service there is a Special Projects Officer who maintains a database, which includes information for planning purposes from Future Needs Assessment etc. The education service maintains a database that provides information for planning purposes. Where we have difficulty is that we do not have multi-agency strategic plan, which ensures a truly co-ordinated approach.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

The single shared assessment tool and the introduction of the client management information system 'Carefirst' will allow the collection and analysis of need information for planning purposes.

### **HIGHLAND**

For children, needs are recorded through area teams accessing school reports and feedback from school liaison groups. Where children are looked after this would come through care planning and the review process, as is the case with adults. A Resource Allocation panel will log requests for services or direct payments. Health supports will be monitored by LHCCs and services delivered by members.

### **LANARKSHIRE**

#### **North Lanarkshire Council**

Information in relation to children is shared and used to plan the development of Children's Services. The Education Department databases and PRESCAT minutes are used to plan services. Education, Social Work and Health are moving towards computability of ICT systems.

For adults, the work towards Joint Futures and development of a single shared assessment and shared information system will improve information on assessment.

#### **South Lanarkshire Council**

Information in relation to children is shared and used to plan the development of Children's Services. For adults, the arrangements are less well developed due to the inadequacies of current information systems. The work towards Joint Futures will address this by developing a single shared assessment and a shared information system.

### **LOTHIAN**

Not currently gathered. Specific to ASD across the region. Joint databases for LD being planned. Local management groups involved in planning. CLDT's have a diagnostic database based referrals only.

### **ORKNEY**

Pre-school child development team. Profile of developmental need. Resource implications. Parents contribution. School meetings to determine action plan – IEPs, FNA process.

**SHETLAND**

Not gathered yet.

**TAYSIDE****Angus Council**

Information is not collated as a matter of routine for planning purposes. Specific planning task groups will collate information relevant to the particular objective and task they are working on.

**Dundee City Council**

Via client index system. Via specific database information based on those involved with Future Needs Assessments. Via information direct from social work and care management teams.

**Perth & Kinross Council**

On going monitoring will detect any changes in demand for specific services and this should be reflected within the local authority's service plan.

## **22. How do you foresee these systems linking with the national database for people with learning disabilities?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

A sub system which could easily be exploited if correct diagnosis is entered in database initially.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

A sub system which could easily be exploited if correct diagnosis is entered in database initially.

### **AYRSHIRE & ARRAN**

There are no jointly integrated information systems between local authorities or Health. Neither is there a common dataset. Would require clarity about what a national dataset would look like and how locally we would gather data complemented this.

### **DUMFRIES & GALLOWAY**

For children and young people this should not be a problem.

### **FIFE**

Don't know. Soon after the "Same as You" National Review Report was launched a SAY Project Team was set up in Fife to facilitate implementation of all 29 recommendations. A multi-agency planning group was convened to decide how best to set up a Register. However there were a number of concerns being raised by family members and service users about the potential use of a register. The group was suspended pending the national conference to be set up by the Scottish Executive. Following this and a seminar run in Fife, the planning group have reconvened and an action plan to set one up is currently being developed.

### **FORTH VALLEY**

Possible read coded on GPASS.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The problem with current data collect is that various agencies tend to collect data for their own purposes and that the data collected is often incomplete. It is expected that in developing a local plan the issue of data collection will be resolved.

#### **Aberdeenshire Council and NHS Grampian**

Not clear at present as individual's inclusion in national database is optional.

#### **Moray Council**

Possible read coded on GPASS.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

The ASD Development Team will consider the most effective way of identifying and recording details of people with ASD. This is likely to be through a refinement of Glasgow's existing learning disability database. The Team will also ensure linkages with national databases.

### **HIGHLAND**

Services have been criticised in the UK for slotting people with ASD into services for people with learning disabilities meaning that needs may go unmet of adults suspect as having ASD go undiagnosed. It is encouraging that the Executive are now working to raise the profile of ASD but this determination might have distinguished itself at the point of the commissioning of 'The Same as You'. For these reasons, it may be unhelpful for ASD to share a database with learning disabilities. There are also issues to be resolved, such as the Executive's guidance on whether children with disabilities are include in the 'looked after' category in the future.

## **LANARKSHIRE**

### **North Lanarkshire Council**

The Joint Planning Partners foresee continued development of management information systems locally which will have the potential to provide anonymised information into any future national database giving a national system which is derived for locally sensitive, needs based information.

### **South Lanarkshire Council**

The Joint Planning Partners foresee the development of local databases which will in turn feed anonymised information into any future national database giving a national system which is derived for locally, sensitive needs based information.

## **LOTHIAN**

With difficulty unless there is a clear directive from the centre regarding software compatibility and programmes confidentiality.

## **ORKNEY**

One Stop Shop. Issues under discussion.

## **TAYSIDE**

### **Angus Council**

It depends what information is to be collected by the national database.

### **Dundee City Council**

Work currently underway locally to incorporate all the above mentioned information sources on the local Learning Disability database / National Learning Disability database. All information held by SWD is being combined with information held by local health and education systems.

### **Perth & Kinross Council**

Needs further clarification on a Tayside wide basis.

## **23. Describe the range of services provided in your area.**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

A range of services is available within Argyll and Bute. These services involve all the statutory agencies as well as a significant contribution from the voluntary sector. The services range from leisure and recreational activities, through home based family support to a small number of intensive 24 hour support packages. Given the dispersed rural nature of Argyll and Bute a key feature has been the need to balance costs against the generic nature of services. This means that those staff who provide services to children and adults with ASD are unlikely to be specialists and will be involved in services to other client groups. This need for genericism is perhaps less apparent in some schools where the concentration in numbers can allow more specialist approaches. Within Argyll and Bute we are well served by the voluntary sector with local organisations such as Autism Argyll, Argyll and Bute befrienders, and Homestart all contributing to the range of advice and support services available. In addition an element of the Better Neighbourhood Services Fund is geared towards services for children affected by disability. Adult Services include an ability to respond in an autism appropriate manner, for example through total communication work within the learning disability network and PCP within Resource Centres.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Pre 5 Panda Centre, Education through both special school and mainstream education. RAAG (parents support group), Befriending scheme, colleges, day services, supported living. Clinical Psychology, A& T services - adult and child. Limited housing support. Support packages for teachers/auxiliaries pre school. Specialist unit within a primary school which includes some pre school children. Special school for primary and secondary children. Social Work disability team supports parents. Liaison with Yorkhill Trust. 'More than words programme'.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Mainstream Services: Mainstream educational provision, SEN staff, PRESCAT, Occupational Therapy, Princess Royal Carers Project, log-in internet café providing community leisure, health and rights information primarily for young people. Future Needs Assessment, general Social Work support, throughcare support. Specialist Services: Chavey Down specialist residential respite facility, Isobel Mair School (45 pupils), Carlibar Communications Centre (27 pupils), playschemes, New Opportunities Fund Out of School/Holiday provision, transitions team.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

Health Services do not provide dedicated services. Service users would have normal access to all NHS services within the locality. The learning disability service does contain staff with specialist knowledge and expertise on ASD and Aspergers. With respect to local authority services there are increasingly steps being taken to ensure supports and services are planned around the individual. It is anticipated that supports will facilitate inclusion to any services.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

Health services do not provide dedicated services. Service users would have normal access to all NHS services within the locality. The Learning Disability Service does contain staff with specialist knowledge and expertise on ASD and Aspergers. Similarly with North Ayrshire Social Services, service users would have normal access to a range of residential and community based services. This would be dependent on the assessed needs of the individual involving the service user and their carers in the process.

### **DUMFRIES & GALLOWAY**

For children and young people: Educational Psychology, Clinical Psychology, Occupational Therapy, Speech & Language Therapy, Social Services dedicated teams, Psychiatry and respite care.

#### **FIFE**

Children's services: Paediatric assessment; information/support (FAA, PHAD, Education, Social Work, Health); awareness raising (FAA); one-to-one support (PHAD); speech and language therapy including training

for other professionals; in-patient assessment (Health); community nurse therapy (Health); psychology (clinical for non school – educational for school); 3 Community Learning Disability Teams (including psychology, nurse, speech & language therapy, psychiatry) provide support plus assessment/diagnosis and future planning; FAST provide assessment diagnosis information and has a key worker system; Education Home Visiting Service (for information, emotional support, birth to nursery age helping transition to pre-school); respite care (Social Work); outreach service (Aberlour Trust); careers service helps with transition from school; Fife Employability Team assists those with high functioning autistic disorders to find suitable work and provides one-to-one support in the work place as well as awareness raising and training for employers; Roving Autism Resource Library.

Adults services: day service (Social Work including outreach and SSA); respite care (Social Work unit though not autism specific and SSA); befriending scheme.

## **FORTH VALLEY**

### **Clackmannanshire Council And Forth Valley NHS**

Children's Services: Individual package of support provided for each child individual ABA programmes (at home and in school) 'Teach' approach.

## **GRAMPIAN**

### **Aberdeen City Council and NHS Grampian**

As a result of the inclusive approach taken by agencies many children and adults are able to access generic services. In terms of specialist provision a number of key examples are:

**Health Services:** Occupational Therapy - assessment and treatment of children with ASD; Children and Family Psychiatry – Lowit Intensive Treatment and outreach service provides assessment and treatment services for children with ASD; Psychology – in conjunction with Speech Therapy, a specialist Early Birds programme is provided. In addition, group work is provided for siblings of children with ASD. Services are provided to Grampian, Orkney and Shetland. For children aged 5-18 years, assessment and ongoing work is provided for children with ASD, including children with learning disabilities; Raeden Centre – provides pre-school multi-disciplinary assessment. Raeden provides assessment for the majority of children with complex developmental disorders, including ASD. Sibling support group also provide by Clinical Psychology.

**Local Authority Services:** Education - policy of mainstream schooling, including the development of SEN Bases within mainstream schools; Educational Psychology services based in schools; a specialist unit has been developed for 8 children with ASD at Dyce Academy and another similar unit is planned; outreach service established to support teachers in providing education for children with ASD.

**Social Work:** Social Work and Care Management services are provided at various locations including GP practices, Children's Hospital, Maternity Hospital and for as long as is necessary at Woodland's Hospital, which is subject to re-provisioning. A range of services, including day services, residential and housing with support services, respite care services, employment initiatives and access to Direct Payments are available to people with ASD.

**Voluntary Sector:** A Development Officer Post for people with special needs has been established with funding from Carers Strategy. The Scottish Autistic Society has established an Advisory and Counselling service for an initial three year period with funding from Aberdeenshire Council. Grampian Autistic Society provides weekend and holiday play schemes for children with ASD, In addition, the Society provides a one-to-one day service and an outreach service for a number of clients.

**Careers Scotland:** Link Worker Scheme with the focus this year on individuals with ASD.

### **Aberdeenshire Council and NHS Grampian**

1:1 support from specialist workers to look at employment, accommodation, social skills etc. Day services in a range of local authorities. and other settings. Residential and supported living arrangements. Both home-based respite and residential respite, home from home and local support groups for parents or adults diagnosed with an autistic spectrum disorder, counselling and benefit advice groups. Specialist assessment and family support service. These examples are provided by either the Local Authority or voluntary agencies. They are not all available across Aberdeenshire. Many of the areas only have one or two providers at most in relation to

provision for children and most of the area teams now have to purchase in tailor made packages to meet specific needs.

### **Moray Council**

Social work, Psychiatry, Occupational Therapy, SALT, Psychology, Nursing Residential unit with 24 hr staffing for 3 individuals with ASD and adjoining flat for an individual with Asperger' syndrome. Package provided through service brokerage. Individual 1:1 day services packages. Access to mainstream learning disability day services. Respite services. 1:1 package for individual in own tenancy. Plan to have ASD unit in a day service which is being rebuilt.

## **GREATER GLASGOW**

### **Glasgow**

**Information & Advice:** A number of independent organisations provide a useful first point of contact and provide information and advice across a range of issues: The SSA provides a range of consultancy services to voluntary/statutory agencies and practical advice or emotional support to families and carers; the NAS has established a NAS Glasgow branch which is developing activities including the provision of information and advice; the Strathclyde Autistic Society (SAS) provides a full range of information and advice linking into the other two mentioned above.

**Education:** There are currently 10 schools run by Glasgow City Council offering a total of 158 places for children with ASD – 3 primary aged units (mainstream), 4 primary aged units (SEN), 2 secondary aged units (mainstream), 1 all through residential school (SEN), 10 placements in independent SEN schools, approximately 19 full-time SEN auxiliaries (mainstream); a unit for up to 24 primary aged pupils and a unit for up to 40 secondary aged pupils (both located within mainstream schools); the College of Nautical Studies offer a Further Education TRANSITIONS programme for young people with Asperger Syndrome.

**Employment:** Prospects, run by the National Autistic Society, is a specialised employment service offering work preparation, job finding and support in work; post-school support through career keyworkers.

**Social Support & Community Activities:** Strathclyde Autistic Society –Aspereger Social Group, Holiday Play Scheme for 5 to 12 year olds, Buddies Club offers a number of activities for 5 to 18 year olds including After School Club, Sunday Club, Evening Youth Club, Outreach Work and Toddler Support Group for 0 to 5 year olds.

National Autistic Society – Befriending service in Glasgow, recruits and trains volunteer befrienders, NAS Out of School Care project offers advice and consultancy as well as the facility to set up and run out of school care provision, including playschemes, teenage clubs etc.

Other – Collusion Theatre Company runs drama groups in Newtown Mearns Collaborate, one of which is for young people with Aspergers. Projectability Glasgow, a visual arts organisation runs workshops for autistic children.

**Support to Carers:** Supported respite (holiday breaks) are provided by the SSA to individuals on referral; there are 9 carer centres and projects in Glasgow offering a range of services for all carers including income maximisation, information and advice, short breaks, emotional support and training. They also have a responsibility to provide tailored support to young carers; Glasgow spends approximately £1.5 million/annum on a range of residential and non-residential short break services for people with a learning disability and their carers.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

**Mainstream Services:** Mainstream educational provision, SEN staff, PRESCAT, Occupational Therapy, Princess Royal Carers Project, log-in internet café providing community leisure, health and rights information primarily for young people. Future Needs Assessment, general Social Work support, throughcare support.

**Specialist Services:** Chavey Down specialist residential respite facility, Isobel Mair School (45 pupils), Carlubar Communications Centre (27 pupils), playschemes, New Opportunities Fund Out of School/Holiday provision, transitions team.

## HIGHLAND

These are extensive across Highland. Pan-Highland services include the Education Autism Outreach Team, a 35 place special needs School, the LOVAAS pilot for families, Care Management, multi-disciplinary teams (including Speech and Language Therapy) and day services . Areas of Highland have additional services including CEYAC Special Education Unit (Caithness), Scottish Society for Autism social workers, Sure Start, Pre-School home visiting, Family First, Parents Support and Information Groups including Children in the Highlands (C.H.E.S.S), Service for Children with Special Needs (F.A.C.E.S.), Area Learning Supports, Carers Scotland and supported employment, Support Workers, Specialist ASD Social Work (2 Areas), respite care/Short Breaks and Family Keyworkers. Some secondary schools are resourced to facilitate inclusion and access to the mainstream curriculum.

## LANARKSHIRE

### North Lanarkshire Council

**Pre-school children:** Pre 5 Learning Support Team for children with special needs including those with ASD, specialist ASD and mainstream nursery provision (with peripatetic support), Early Bird programme, Hanen programme.

**Primary school aged children:** home visiting teacher, primary school Autistic Spectrum Base – Outreach Service, specialist ASD specific primary units with support from mainstream schools from both teaching and speech and language therapy, generic special schools with staff trained in ASD, support groups for teachers of ASD pupil in mainstream education.

**Secondary school aged pupils:** specialist ASD specific secondary units, Educational Psychology.

**Health:** Community Paediatrics NHS Lanarkshire – Cumbernauld/Kilsyth has a designated multi-disciplinary diagnostic service comprising Community Paediatrician, Speech and Language Therapist and Educational Psychologist. Speech and Language Therapy Service provides assessment and treatment for children with ASD in partnership with the parents and other agencies. ASD children with a functional difficulty can be referred to the Occupational Therapy Dept for assessment. Specialist Services for Learning Disability – community teams, specialist staff currently based in hospital, due to move to the community as part of hospital reprovisioning. Child and Adolescent Mental Health Service (CAMHS).

**Social Work (Children's Services):** Assessment and care management for children adults and families. Each Area Team has a designated care manager for children with and affected by disabilities who provide this direct service to families. There are two specialist teams at HQ (children & families) – Shared Care Team to develop family based support, including befriending and the Transitional Planning Team to support the planning for children and young people into adult life. Home Care support. Short breaks and holidays – this provides approximately 108 children with a form of respite care outwith their family home. Out of School Care and Holiday Play Schemes – Social Work Department contracts with voluntary organisations to provide support to over 100 disabled children (5-12 years) and 35 children (13+) including children with ASD in a range of inclusive and small intensive play schemes during school holidays. 12 children supported in out of school care. Direct Payments are offered to families of children as well as adults with a wide range of support needs. Advocacy – Social Work Department has funded one post to continue to expand its advocacy work in SEN schools with children with learning disabilities.

**Social Work (Adult's Services):** Individualised person centred planning – targets are identified to ensure that all adults with a learning disability will have, if they wish, a person-centred plan. Carers assessment – information/advice/guidance. Home Care Support – including Neighbourhood Networks. Shared Care. Holidays and short breaks. Day opportunities – a range are available to adults with leaning disabilities including those with ASD. Person centred planning informs the choice the person makes about what type of day opportunities they wish to explore and participate in. Direct Payments are offered to adults with a learning disability. Advocacy – two different forms of advocacy are available to individuals.

### South Lanarkshire Council

**Pre-school children:** Early Years Specialist Support Teachers for children with special needs including those with ASD.

**Primary school aged children:** Autistic Spectrum Base Chatelherault Primary School. Primary school Autistic Spectrum Base – Outreach Service. New Stevenson Unit.

**Secondary school ages children:** Educational Psychology.

**Health:** Community Paediatrics NHS Lanarkshire Cumbernauld/Kilsyth has a designated multi-disciplinary diagnostic service comprising Community Paediatrician, Speech and Language Therapist and Educational Psychologist. Speech and Language Therapy Service provides assessment and treatment for children with ASD in partnership with the parents and other agencies. ASD children with a functional difficulty can be referred to the Occupational Therapy Dept for assessment. Specialist Services for Learning Disability – community teams, specialist staff currently based in hospital, due to move to the community as part of hospital reprovisioning. Child and Adolescent Mental Health Service (CAMHS).

## **LOTHIAN**

Detail not available for children.

For adults: regional diagnostic service. Clients access a range of generic learning disability services/ individual packages.

## **ORKNEY**

Support Teacher - Autistic Spectrum. Crossroads/Share the Care/Family Focus/Children's Services Short Break provision provide short breaks. Placement at language unit (3-8yrs). Summer Play schemes. Classroom support/learning support. Liaise with college provision, Careers Scotland and employment agencies. Breaks for adults. Advocacy support. LAC support. Development of specific nursery provision. Specialist equipment from Occupational Therapy.

## **SHETLAND**

Speech & Language Therapy, Occupational Therapy, Social & Health, Educational Psychologist, visiting Clinical Psychologist and Psychiatrist, Community/Consultant Paediatrician, Moving on Project, Joining in Project, respite provision - Social Care, day services - Eric Gray Resource Centre, Disability Shetland, Community Opportunities and Participation in Employment (COPE).

## **TAYSIDE**

### **Angus Council**

**Education:** 3 special needs nursery schools and one special unit within a primary school as well as special needs support teachers working in mainstream education provision.

**Social Work:** No specialist provision only for children or adults with ASD.

**Children:** Range of early years support services for families; a specific team to support families with children with a disability; respite care provision, incorporating residential and day respite; a special Playscheme providing day activities during holiday periods. A service is also commissioned from PAMIS and some general home care support is purchased from crossroads.

**Adults:** Care management team for adults with learning disabilities; short break provision to provide respite for carers; range of accommodation with varying supports for all adults with a learning disability; range of home care services provide directly and commissioned from the voluntary and private sector; specific posts to develop employment and recreational opportunities for any adult with a learning disability.

### **Dundee City Council**

**Education:** range of provision from mainstream and resourced location to special school across age sectors. Post-diagnosis parent support workshops. Specialists in pre-school Home Visiting Service, Speech & Language Therapy, Dundee Educational Psychology Service and Health. Local authority programme of staff developmental inter professional training. Local NAS branch out of school clubs. Spectrum summer play school. Inclusion group. Post 16/Adult life awareness raising conference 2003.

**Children's services:** Child & Family Centres (Social Work), Frances Wright Nursery School, Special Educational Units in mainstream schools, Kingspark Special Needs School, Child Health team (Social Work), Barnardos (voluntary organisation), Enabling provision (Capability), Enabler/school link package (SSAC) (purchased for one individual), short breaks (individually purchased).

**Adult services:** Learning Disability Care Management Team (Social Work & seconded nurses), CLDN team, Stepping Forward 2 (specialist day opportunity/opening 2003), Douglas House (specialist respite service),

Enabling services (commissioned and spot purchased for individuals), short breaks (individually purchased), sitting service (individually purchased), Hawkhill Day Hospital (TPCT - for adults with challenging behaviours).

**Perth & Kinross Council**

Whilst there are a range of services available these are not considered sufficient to meet existing and growing need and demand. Services include; pre- school visiting, a new specialist nursery about to offer places, services from allied Health professionals, special interest within Educational Psychology, an autistic base within a mainstream primary, improving special school provision, development of secondary provision, a wide range of support for families, children, young people and adults within the voluntary sector, some supported living schemes, supported employment.

## **24. How are those services addressing needs at different life stages, particularly the transition from children's to adult services?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

It was felt that the most critical interface remains the transition from childhood to adulthood. There are a number of examples of good practice within this transition evident in Argyll & Bute, and these are being built on by the appointment of Local Area Co-ordinators. These, however, tend to be resource intensive and there will be funding implications as and when these approaches are rolled out across the cohort of children with ASD. The FNA process is clearly very important within this transition and it was envisaged that the deployment of Local Area Co-ordinators along with other recommendations from "The Same as You" will assist in ensuring that this is robust.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Clinical Psychology head of service covers both child and adult. Attends Future Needs Assessments and is aware of all cases in the NHS Argyll and Clyde South. Council and Health partners are developing a strategy for young people in transition including people with ASD. It is generally agreed that this area requires improvement.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

A transitions team working with young people with disabilities from 14 years onwards has been established, funded through Changing Children's Services Fund, to ensure continuity of service in the period between child and adulthood.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

A transition service is provided by the Autistic Society in East Ayrshire. The services is accessed by service users from across the country with very little access being made from Ayrshire residents. NHS services for people with Aspergers fall somewhere between learning disability services and mental health. The most appropriate service is decided upon based on the needs of the individual. A specific team of social work staff are employed for children affected by disability and have responsibility for the transition process between Children and Adult Services.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

A transition service is provided by the Autistic Society in East Ayrshire. The services is accessed by service users from across the country with very little access being made from Ayrshire residents. NHS services for people with Aspergers fall somewhere between learning disability services and mental health. The most appropriate service is decided upon based on the needs of the individual. North Ayrshire Council Social Services have appointed a Transition Development Officer for children which includes those within the autistic spectrum. A local area co-ordinator post has been created within Audit Services within the specific remit of transition planning. This would also include people within the autistic spectrum.

### **DUMFRIES & GALLOWAY**

Through a co-ordinated approach to planning and delivering Children's Services. At transition to adulthood the Future Needs Assessment would be used as an assessment vehicle.

### **FIFE**

Education Home Visiting Service helps with the transition into pre-school and from pre-school to primary. Early Bird provides support to parents to help their pre-school child. Careers Service – future needs assessments in schools and help with transition from school. Fife Employability Team has an autism-specific post to assist those aged 16+ with high functioning ASD to find suitable employment. Community Learning Disability Teams to be set up. Post-16 Planning Group.

### **FORTH VALLEY**

Future Needs process used to facilitate transition to Adult Services. Monitored through use of IFD's.

## **GRAMPIAN**

### **Aberdeen City Council and NHS Grampian**

Further work needs to be done to ensure that services are better co-ordinated and one of the main objectives in developing the plan will be to address this issue. Aberdeen Children and Young People's Strategic Planning Group, which has responsibility for the Joint Children's Services Plan, has established a Children with Disability in Transition Sub-Group. The remit of this group is to consider the vital period between childhood and adulthood and children and young people ASD will be included in the work of this group.

### **Aberdeenshire Council and NHS Grampian**

Service development on working on ways to improve transition between Children's and Adult Services is ongoing. Major problem is trying to attract health care support as specialist learning disability team accept referrals based on I.Q and do not always work with Social Work to support individuals.

### **Moray Council**

Traditionally, we have not been good at this and diagnosis has been poor until recently. Would hope that we might start looking at providing better services, for example if school are having to provide 1 to 1 care, could this be done by a provider that could continue into Adult Services.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

See answer to question 23.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

A Transitions Team working with young people with disabilities from 14 years onwards has been established, funded through Changing Children's Services Fund, to ensure continuity of service in the period between child and adulthood.

## **HIGHLAND**

In Children's Services, early years and early intervention are targeted. In particular Autism Outreach Education Services provide ongoing training and support throughout the school career. Particular support is also being developed for older children through social skills groups. Recruitment to family key workers posts throughout Highland is intended to improve planning, preparation and support at transition into adulthood. A multi-agency transitions group is developing a strategy to back this up at senior management level with an action plan. This is reinforced by a 30-strong membership reference group comprising representatives from autism specific services. In addition, there are Children's and Adult Strategic ASD Groups, also comprising carers and service users which are tracking service pathways, using evidence-based research and planning services. The Children's Group is planning a new school/centre of excellence for children with ASD and both groups are dealing with the transition.

## **LANARKSHIRE**

### **North Lanarkshire Council**

North Lanarkshire Council has a transition service jointly funded by Social Work, Education and Health. The services provide appropriate education to meet the specific educational needs of ASD pupils. The Early Bird and Home Visiting Services provide support to parents. Person Centred Plans which bridges the gap between child and adult services. The Council Careers service is involved in joint planning.

### **South Lanarkshire Council**

The future needs process supports planning of this transition. There is also active multi-agency work including careers service.

## **LOTHIAN**

Generally in an ad hoc manner. There is a lack of clarity regarding responsibility for adolescents within health. For those without learning disabilities there are virtually no services once out of Children's Services.

**ORKNEY**

Individual needs identified. Specialist further education provided. LAC included at FNA. Discussions/training offered to college staff. Liaison with Careers and Employment agencies.

**SHETLAND**

Most services are based around primary and pre-school. Starting to plan more for primary to secondary transition. Further work required for transition from secondary to adulthood.

**TAYSIDE****Angus Council**

We have future needs co-ordinators who become involved with young people at the stage where future needs assessments are being undertaken.

**Dundee City Council**

Enablers services, short break services, small specialist day opportunity, Douglas House, are all targeting young people at the transition and young adult stage. These are all recently developed resources which aim to provide more person centred solutions to individual identified needs.

**Perth & Kinross Council**

These services address needs at different stages but are insufficient. The transition from Children's to Adult Services has been improved through the appointment of a transition worker.

## **25. How are housing support needs for those with ASD including Asperger Syndrome met in your area?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

There are examples of housing support strategies being put in place for those with ASD using THB/Supporting People as a template. This approach has again emphasised the training implications for those staff involved in providing support.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Through mainstream housing.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

The Supporting People Team have identified a number of people with ASD in need of housing support.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

As with any Community Care group, housing needs are identified on an individual basis. Good liaison and joint working between the LA Housing and Social Work Departments and Communities Scotland facilities individual and appropriate housing solutions.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

There are no specific services for people with ASD. People would be assessed on an individual basis and application made to Supporting People monies/Social Services, as appropriate.

### **DUMFRIES & GALLOWAY**

On an individual basis. Sheltered housing is available on a group and individual basis and adults with ASD are accommodated through agreed selection protocols.

### **FIFE**

Mixture of staffed group homes and increasingly via Supporting People arrangements.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The needs of people with ASD and Asperger Syndrome have been included in the local Housing Strategy. Two housing with support developments are being built, which will offer a total of 39 places for people with ASD and/or challenging behaviour.

#### **Aberdeenshire Council and NHS Grampian**

Allocation to housing department. Regular meetings with Social Work/Health/Housing and Supporting People to look at local need and potential networks. This is taken forward with individuals to try to meet need. Specialist residential places followed up by Social Work if this is seen to meet the need best.

#### **Moray Council**

Specialist packages are put together on individual basis.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

Glasgow has established a community care accommodation strategy which details how agencies will respond to the housing needs of vulnerable people including those with ASD.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

The Supporting People Team have identified a number of people with ASD in need of housing support.

## **HIGHLAND**

Working with Supporting People. As with other vulnerable people, housing and support has been and will continue to be commissioned and allocated on the basis of need. There is no specific process differential for those with ASD.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Housing support needs are met via Social Work Services through either direct provision or individually commissioned support packages. Person-centred planning takes place to ensure that the supports and services the person requires are delivered in line with the wishes of the that individual.

### **South Lanarkshire Council**

The housing needs are met via Adult Services.

## **LOTHIAN**

Generally not well managed unless accommodated within mainstream learning disabilities. Some success, but few and far between.

## **ORKNEY**

Social Worker Housing, LAC Co-ordinator, Home Care Services.

## **SHETLAND**

The same as the rest of the population.

## **TAYSIDE**

### **Angus Council**

We have completed an exercise to maximise transitional housing benefit being claimed by all existing service users, to maximise tenancy support. Housing support needs are assessed as part of the care management task and tenancy supports are provided to individuals by a range of providers.

### **Dundee City Council**

A number of small residential services, previously registered as care homes have been de-registered. These will be registered as Housing with Support services. All planned new developments, where accommodation is part of the resource, are planned as individual housing with associated support provision.

### **Perth & Kinross Council**

No specialist provision is available, however, some people with ASD have benefited from transitional housing benefits and have moved into their own tenancies with support.

## **26. How many children and adults are cared for in the community and how many in residential settings and in hospitals?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

There are 6 children currently in a residential provision and 73 within the community. Two adults are in further education provision and two in the community.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

2 adults and one child are currently residing in Merchiston Hospital. 3 adults are supported through social care and provision. 6 adults cared for in the community (adult day services, local authority respite, local authority and voluntary sector). 2 children in residential setting.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

A very small number of children with disabilities are cared for in long-term care settings, the majority of provision for children and young people is community based. A Joint Best Value Review of Services for Children with Disabilities concluded that further community-based service provision should be developed including more flexible home-based respite. Services for adults are predominantly community-based with low levels of residential provision. Hospital resettlement for adults with learning disabilities has been achieved through the provision of accommodation with support and an existing residential facility has recently been re-provided as accommodation with support.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

The only information available is listed in sections 1 to 4. Locally we have 7 service users with AF in health resource centres. In residential settings there are 4 children and 5 adults being cared for. 62 children and 8 adults are supported to live in the community.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

Approximate figures from Social Services are: 20 children and 15 adults living in the community. 3 children live in residential services. Within North Ayrshire individuals with ASD can access a range of resources including education, day services and respite (both community and residential). These services are provided by the local authority and by the voluntary and independent sectors. Health services have 7 individuals with ASD in health resource centres.

### **DUMFRIES & GALLOWAY**

At present there are 2 children in alternative care provisions. There are none placed residentially at the moment. 2 adults in Steiner adult residential communities.

### **FIFE**

3 in Fife residential settings and 3 out of Fife in residential settings.

### **FORTH VALLEY**

14 children cared for in the community. None in residential settings.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Work is ongoing in an attempt to provide figures from a variety of sources.

#### **Aberdeenshire Council and NHS Grampian**

Adults – 8 in the community and 24 in a residential setting. This information was not available for children but we estimate that 90% are cared for within the community and 10% are in residential settings. Day service provided by local authority and specialist day service provided on a 1 to 1 basis from the autistic society. Residential places in voluntary or private agencies.

### **Moray Council**

2 currently in hospital. 13 in staffed residential units in the community. 4 at home. Respite is provided in the Learning Disability Unit when no other clients are using it. Very limited due to lack of time when Unit is available. Day services provided by learning disability provides who also access local authority bases and centres.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

Whilst there are no formal records available, the number of people in residential and hospital settings will be minimal as Glasgow has implemented a major long stay hospital closure programme and has invested in community care services designed to support people in their own homes and communities.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

A very small number of children with disabilities are cared for in long-term care settings, the majority of provision for children and young people is community based. A Joint Best Value Review of Services for Children with Disabilities concluded that further community-based service provision should be developed including more flexible home-based respite. Services for adults are predominantly community-based with low levels of residential provision. Hospital resettlement for adults with learning disabilities has been achieved through the provision of accommodation with support and an existing residential facility has recently been re-provided as accommodation with support.

## **HIGHLAND**

There are 2 children in local authority residential care and 1 in foster care. Approximately 280 children live at home. None in hospital.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Children –there are 5 pupils in Residential provision. There are 12 children with ASD who receive residential respite on a planned and regular basis. No child with ASD is in Residential Units. 30+ children receive play scheme/out of school care support. The numbers who receive Home Care Service and Social Work Support require further collation and will be forwarded.

Adults - As part of both the National and local strategy there are now less than fifty people with a learning disability, whom North Lanarkshire has responsibility for discharging from Kirklands Hospital. The target date to complete this specific area of work is 2005.

### **South Lanarkshire Council**

Children - There are 8 children from the South Lanarkshire Council Area cared for in residential schools. There are no children from this area cared for in hospital.

Adults - A small number of adults with learning disabilities remain in Kirklands Hospital but are part of an active and on-going re-provisioning programme. A number of this group may have ASD. The data are being collected manually (see Question 6).

## **LOTHIAN**

Figures not available. Range of services providers in voluntary sector (residential/respite/day care) plus statutory agencies (Social Work/Education/Health) in varying amounts.

## **ORKNEY**

4 in supported accommodation, 1 in residential accommodation. Resources available are education, day services, direct payments and Aurrída House.

## **SHETLAND**

All but 2 are cared for in the community.

## **TAYSIDE**

### **Angus Council**

18 children and 7 adults in the community. For resources, see question 23.

### **Dundee City Council**

4 children in specialist residential school and 4 adults in residential placements, 6 adults in housing with support.

### **Perth & Kinross Council**

Education for children is mainly provided in mainstream settings with a number of places provided in the independent sector and special schools. A range of community based services are available for children including residential respite, family based respite, playschemes and activity days. These are provided by the voluntary and private sector. Day services for adults are provided in three centres within the area (two Perth based, one rural), these are local authority run. Respite for adults is provided by a combination of local authority and independent sector provision with an emerging direct payments scheme offering further possibilities.

## **27. Where are children and adults located when their needs cannot be met locally?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

8 out of the area: Daldorch/Clanalba (4), Ochil Tower (1), Brechenborough School (1), F.E Provision North England/Glasgow (2).

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

6 out of the area: 3 adults in Scotland and England, Daldorch (1), Struan House (1).

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

3 out of area: college and residential resources.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

3 children out of area, in independent residential schools.

### **DUMFRIES & GALLOWAY**

See question 26.

### **FIFE**

3 children out of area: Camphill (2), Ochil Tower (1). 9 adults in Alloa and Lanark.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Detailed information regarding the placement of children and adults outwith the area is being prepared. It is known that a variety of services are accessed throughout the UK. A number of developments are planned that will ensure that some of the people placed outwith the area can be supported locally.

#### **Aberdeenshire Council and NHS Grampian**

6 children and 11 children out of area: Wales, Bristol and Central Scotland.

#### **Moray Council**

Currently delayed discharge and out of area placement figure in the discussions around the provision for 1 individual. In the past children were placed in more specialised schools in the neighbouring area.

### **HIGHLAND**

7 out of area: Sunderland, Southlands, Camphill, Northampton (hospital).

### **LANARKSHIRE**

#### **North Lanarkshire Council**

8 children are out of area in independent residential schools.

#### **South Lanarkshire Council**

11 children out of area in independent, residential schools and 1 adult in a residential, NHS provision in England.

### **LOTHIAN**

4 out of area, 1 on delayed discharge from hospital and 2 in a health care facility.

### **ORKNEY**

3 out of area, and 1 located in another provision.

### **SHETLAND**

2 out of area. 1 in hospital in Banff, 1 in residential school in Dundee.

## **TAYSIDE**

### **Angus Council**

3 children out of area in specialist residential education facilities.

### **Dundee City Council**

4 children out of area: Daldorch, Linmoor and Camphill. 4 adults out of area: Camphill, SSAC, Milbury resources.

### **Perth & Kinross Council**

8 adults out of area in various locations eg. Steiner establishments, SSA Alloa.

## **28. How are people with autistic spectrum disorders and their family carers involved in the planning and delivery of services?**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

The involvement of service users is now well established in planning and shaping services in both Children's and Adult Services. This is both at an individual case level and at a more strategic service planning level.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Very little structured involvement. Mainly through individual service design. Parents group do have involvement in Renfrewshire area.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

At an individual level through assessment, care planning and review process facilitated by specifically trained and experienced staff as well as at the strategic level through the Children's Services planning process and through specific consultation in Best Value service reviews, such as the Joint Best Value Review of Services for Children with Disabilities where Scottish Human Services facilitated focus group consultation and parents were consulted via questionnaire.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

Within Health, carers are engaged in a redesign network and a parents support group at Rainbow House. There is no mechanism in place for service users beyond individual care planning. Consultations with carers and existing service users inform service development within the local authority.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

Within Health, carers are engaged in a redesign network and a parents support group at Rainbow House. There is no mechanism in place for service users beyond individual care planning. Within North Ayrshire Council Social Services, use is made of person centred planning. Carers and Service User group consultation and forums. A strategic review of learning disabilities services has begun, which will last approximately 12 months and will include extensive involvement with service users and carers and will include people with ASD.

### **DUMFRIES & GALLOWAY**

For children, there is a Standing Group which involves all the relevant professionals and 3 parent representatives. There is also an independent Parent's Forum (SEN).

### **FIFE**

Recently carried out detailed survey of families views. Recommendations were fed back to ASD Steering Group and are now being used to help develop care pathways. Parents and carers involved in ASD Steering Group for children. Local parent groups participate in a number of Council planning groups. PHAD represented on theme group as part of Children's Services Planning process.

### **FORTH VALLEY**

Parents involved in Local Working Group referred to previously.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

People with ASD and their families have the opportunity to be involved in planning at a strategic level through the development of the Joint Community Care Plan, Joint Future Local Partnership Agreement, Joint Children's Services Plan, Carers Strategy etc. In terms of specialist ASD projects, individuals and families are consulted in the design and commissioning process. Partner agencies have policies that require that service users and carers are involved in the delivery of services. The Social Work Service has an officer responsible for service user and carer involvement. Children and families are fully involved in the assessment and diagnosis stages.

### **Aberdeenshire Council and NHS Grampian**

Fully involved in assessment process. Service provision discussed, people encouraged to visit resources, meet with providers and assist in making decisions about frequency etc of service and take this forward in partnership with Social Work.

### **Moray Council**

Autism Steering Group, MIDAS project Group, ASD Steering Group, Locality Group.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

The ASD Task Force was established by the Joint Community Care Committee in Glasgow with a remit to identify the needs of people with ASD and their families and to make proposals for the development and improvement of service provision. The Task Force has included active representations from service users and carers as well as representatives from all the key voluntary organisations i.e. the Scottish Society for Autism, the National Autistic Society and the Strathclyde Autistic Society. As new planning structures and services emerge, there is a commitment in principle to work in partnership with people with ASD and their families.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

At an individual level through assessment, care planning and review process facilitated by specifically trained and experienced staff as well as at the strategic level through the Children's Services planning process and through specific consultation in Best Value service reviews, such as the Joint Best Value Review of Services for Children with Disabilities where Scottish Human Services facilitated focus group consultation and parents were consulted via questionnaire.

## **HIGHLAND**

On a strategic basis, people with ASD and their carers are members of the Adult and the Children's ASD Strategy Groups. The latter was established in November 2001 in partnership with families through a range of consultative and involvement processes. The outcome for children and adults is substantial service development which continues to be monitored and influenced by a multi-agency reference group including inputs from users and carers. These may also have influence on the work.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Residents and relatives' support/liaison services, and advocacy have been funded as part of the hospital re-provisioning programme. Parents attend all planning meetings e.g. PRESCAT and annual reviews of Record of Needs where delivery of service and needs are discussed. All families are consulted when any self-assessment and care plan is undertaken (families are given signed copies) – young people centrally involved in transitional planning process. In Adult Services planning takes place on an individual basis with the person and their carers at the centre of the process. North Lanarkshire Council has a well-developed carer's strategy in which carers and carers groups are involved in the development and planning of services for carers and children & adults. These groups meet on a regular basis.

### **South Lanarkshire Council**

The review process always includes users/parents/ carers. A multi-agency planning forum exists for ASD and has carer representation. Residents and relatives support/liaison services, and advocacy, have been funded as part of the hospital re-provisioning programme. Carers of People with Learning Disabilities carers group meets bi-monthly with statutory agencies.

## **LOTHIAN**

Involved in assessment and primary care planning as appropriate within existing mechanisms.

## **ORKNEY**

IEP, Needs Assessment, involved in all meetings and discussions, support to be included as is possible for the individual, person-centred plans, explaining to young people how autism affects them.

**SHETLAND**

In most cases, the family are very involved and, where appropriate, the person with ASD is also concerned.

**TAYSIDE****Angus Council**

People are involved in the planning and delivery of individual care services through their involvement in care management assessment and reviewing process.

**Dundee City Council**

Involved as part of individual assessment process. Individual families and carers are also part of the planned developments.

**Perth & Kinross Council**

Planning structures vary between Adult and Children's Services. There is a considerable commitment to involvement at all levels and this has been realised over the last year, for example in developing the Partnership in Practice Agreement, involvement in the planning of specific developments such as secondary school provision, and close co-operation and working between the main family support organisation and local authority and health partners.

**29. What developments in working with children and adults with autistic spectrum disorders do you consider are particularly successful in your area? E.g. multi-agency working.**

**ARGYLL & CLYDE**

**Argyll & Bute Council**

There are a number of successful service development in within Argyll & Bute, including: The Autism Assessment Team. Information packs developed by Autism Argyll (distributed to parents/carers at the time of diagnosis, and for a small charge, to professionals working with people with ASD). Awareness raising training for Health Visitors. A small number of 24 hour support packages for parents caring for children with ASD. The ASD multi-agency planning group.

**NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Specialist assessment and treatment service but this is under resourced. Some multi-professional agency working with Paediatricians, Clinical Psychology and Health visitors. Parent support group to improve social communication. Flexi-care project has a designated worker.

**East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Transitions team.

**AYRSHIRE & ARRAN**

**East Ayrshire Council and Ayrshire & Arran NHS**

Local ASD group working across organisational boundaries to good effect, improving communication, understanding and service delivery. Effective partnership working within multi-agency/multi-disciplinary teams.

**North Ayrshire Council and Ayrshire & Arran NHS**

Local ASD group working across organisational boundaries to good effect, improving communication, understanding and service delivery. Effective partnership working within multi-agency/multi-disciplinary teams. Within North Ayrshire both Children & Families Service and Adult Services operate a multi-agency referral system for services which is felt to illustrate effective working partnership working.

**DUMFRIES & GALLOWAY**

The two groups previously mentioned work very well, for example the Standing Group recently submitted a successful Innovations bid to the Executive in partnership with National Autistic Society. Also the Group commissioned the joint training of 17 professionals and parents on the Strathclyde Certificate in ASD studies.

**FIFE**

Support for teachers in schools. FAST – multi-agency diagnostic team which has input from Psychiatrist, Clinical Psychologist, Speech and Language Therapist, Occupational Therapist and Paediatrician. Provides diagnosis after half day session. This requires expanding as the waiting list is growing. Early Bird training programme for parents offered by Clinical Psychology and Speech and Language Therapy. Schools which have implemented the Council framework and have created an autism-friendly environment along with monitoring and review process. Local developments and networks where staff skills and expertise across sectors have been shared eg. Netwest.

**FORTH VALLEY**

For young children, the Community Early Assessment Team. Also, the pre-5 SEN service (including specialists service).

## **GRAMPIAN**

### **Aberdeen City Council and NHS Grampian**

The specialist ASD unit at Dyce Academy. The specialist ASD outreach service in support of teachers. The Joint Training Strategy for ASD. The Scottish Autistic Society Advisory and Counselling Service. The Joint Working arrangements in terms of service development and planning.

### **Aberdeenshire Council and NHS Grampian**

The Early Bird project is seen as a very successful project now being funded by the Changing Children's Service Fund. Evaluation of this project has been very positive and it is hoped that permanent funding will be found for this. Any newly developed or expanded service which provides a respite resource are particularly successful as this plugs part of the existing gaps in relation to a combination of respite resources e.g. local DIY Club for day care respite provision at weekends. Adult multi-agency working.

### **Moray Council**

Autism Steering Group, MIDAS project Group, ASD Steering Group, Locality Group.

## **GREATER GLASGOW**

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Transitions team.

## **HIGHLAND**

The multi-agency approach to children's supports in parts of Highland, including the Early Years Centre, which promotes the inclusion of children in their local primary school. The Central Team will soon include Social Work and Dietetics and lead the development of standards for multi-agency provision. The Pathway Approach is facilitating the integration of services around the child and their family.

## **LANARKSHIRE**

### **North Lanarkshire Council**

There has been an increase in resources for adults with learning disabilities, the number of consultants and junior staff has increased. In addition one of the learning disability consultants works jointly with the CAMHS team for 1 session per week. Joint approach to service re-design consequent upon Specialist Healthcare Needs Assessment and hospital re-provisioning programme. Emerging "Joint Futures" work, single shared assessment, single information systems. Multi-agency working at PRESCAT and Future Needs stages. Support groups for mainstream teachers, help to raise awareness of the specific needs of ASD pupils in mainstream Education. The establishment of the transition team to support young people moving from children's services into adult services. Individualised planning with the person and individualised service planning. The establishment of Supported Living Services. The establishment of Supported Employment service. The establishment of Neighbourhood Networks. The establishment of dedicated care manger posts in each area team, specifically for adults with a learning disability. Development of Shared Care and Befriending Services. Development of inclusive Play Schemes and out of school care support. Advocacy work in school.

### **South Lanarkshire Council**

There has been an increase in NHS resources for adults with learning disabilities. The number of consultants and junior staff has increased. In addition one of the learning disability consultants works jointly with the CAMHS team for 1 session per week. Multi-agency planning forums. Joint approach to service re-design consequent upon Specialist Healthcare Needs Assessment and hospital re-provisioning programme. Emerging "Joint Futures" work-single shared assessment, single information systems.

## **LOTHIAN**

Multi-agency working across the region with specific clients has been successful. The development of a specific post within Learning Disabilities Health services of Autism Co-ordinator for adults. The organisation of training for all staff including non-health staff. Establishment of regional diagnostic and advice service.

**ORKNEY**

Close multi-agency working between Education, working closely with Social Work and Health Services is seen as a strength. Guidelines for understanding the impact of ASD, multi-agency training, care training and new community schools.

**SHETLAND**

Introduction of pre-school adviser, Parent Support Group, CDI.

**TAYSIDE****Dundee City Council**

Person centred assessment. Packages commissioned on individual needs. Small specialist services which actively focus on inclusion into mainstream provision eg. Enablers.

**Perth & Kinross Council**

Recognition of needs for additional provision within education and willingness to adopt a more pro-active role in anticipating and meeting those needs. Recognition of the contribution of voluntary sector. Improvements in multi-agency working and recognition that a co-ordinated integrated approach is required based on good planning, information and understanding.

### **30. What are the gaps in services?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute Council**

The main gaps in service were felt to be: the need for continuity of personal pre; peri; post diagnosis in providing support advice and information to parents. The need to increase and formalise home support provision for children and to ensure staff involved are appropriately trained and supervised and provide a quality service. Additional local resources at the time of transition to adulthood – particularly an increased awareness and ability to respond from local further education provision are needed. Increased speech and language therapy provision needed.

##### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Multi-agency assessment team. Specialised residential and respite provision, parent and sibling support groups. Lack of robust services, staff knowledge and training. No specialist secondary provision for autism, currently working with parents to develop this.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Gaps in service were identified through the Joint Best Value Review. It indicated that: While a broad range of services has been established for children with disabilities, there was considerable scope for improving the provision of information about these services. Communication and information sharing between professionals, service users, parents and carers could be improved. Community-based resources are highly valued but the flexibility and range of services available could be improved. Better co-ordination of services, especially review systems, could reduce duplication, smooth transitions and ensure a more joined-up approach to service delivery.

#### **AYRSHIRE & ARRAN**

There are significant gaps in the collection, collation and use of information on needs across all services. There is a significant change in service response between Children's and Adult Services. For people with Aspergers, we find that service configurations do not respond as well as they could to their needs. We believe there to be gaps in early intervention strategies, demand on clinical time, ongoing support diagnosis and respite/short breaks.

#### **DUMFRIES & GALLOWAY**

Adult Services are not differentiated for ASD. For children, we need better respite care and post diagnostic support.

#### **FIFE**

Main gaps are: long waiting lists for assessment and diagnosis, lack of respite (autism specific, which is affordable) and lack of support for parents beyond pre-school.

#### **FORTH VALLEY**

Lack of multi-disciplinary teams working with older children. Lack of co-ordination in the assessment of ASD and Aspergers. Lack of information available to patients, carers and individuals with ASD or Aspergers. Lack of information systems that allows data about prevalence and associated diagnoses to feed into such an audit. Lack of services for children with learning disabilities and mental health problems. Lack of dedicated services and trained staff focusing on the particular, and at times, the unique needs of those with ASD or Aspergers.

#### **GRAMPIAN**

##### **Aberdeen City Council and NHS Grampian**

Not having a joint strategic plan for people with ASD. The lack of co-ordinated and/or shared data collection. The difficulty in keeping pace with increasing demand means that there is a lack of suitable placements across services. Parents report that the lack of support during weekends and school holidays periods can be particularly difficult. The co-ordination of transition from child to adult services needs to be improved. The lack of appropriate housing and support staff with ASD experience is a problem.

### **Aberdeenshire Council and NHS Grampian**

Lack of specialist day services. Poor input from specialist health team who don't provide a service for people with Aspergers if of average, or better than average, IQ. Services are under-resources overall. There is little co-ordinated, specialised support and treatment available after diagnosis for children and young people, and their parents. Lack of variety of respite provision. Need for soft play facilities.

### **Moray Council**

The only specialised services are Inchbroom, MIDAS, ASD and employment Support Service. This leaves many gaps.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

A common complaint from families is that they do not receive the right information at the right time and right place. A review and consolidation of information is required along with clear procedures guaranteeing access to appropriate information at various stages. The process of receiving a formal diagnosis is often a long, slow and fragmented experience. As this is such a crucial issue for families there is a need to offer clear pathways to a well managed and resourced diagnostic service that can assist families within a reasonable time frame. Dealing with a range of services and workers is often a confusing and daunting task. Many parents commented that it would be extremely helpful to have an allocated care manager. Service staff coming into contact with people with ASD often have a limited understanding of the condition and are consequently unable to offer appropriate support.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Gaps in service were identified through the Joint Best Value Review. It indicated that: While a broad range of services has been established for children with disabilities, there was considerable scope for improving the provision of information about these services. Communication and information sharing between professionals, service users, parents and carers could be improved. Community-based resources are highly valued but the flexibility and range of services available could be improved. Better co-ordination of services, especially review systems, could reduce duplication, smooth transitions and ensure a more joined-up approach to service delivery.

## **HIGHLAND**

There is work to be done in terms of audit of populations and needs, the provision of more accurate planning information, including statistics. Better information for users and carers in accessible formats and locations. Lack of respite/short breaks including after school clubs and playschemes as well as services which support people into leisure, learning and employment. Intensive support to manage crisis needs further development. Recruitment difficulties present a challenge in delivering sustainable and accessible services.

## **LANARKSHIRE**

### **North Lanarkshire Council**

There is a general need for improved information and IT to allow accurate data collection, which will in turn inform the planning of services. The Learning Disability Team is aware of the need for multi-disciplinary outreach for all individuals with learning disabilities including those with ASD. Accordingly, the specialist Learning Disability services are currently being redeveloped in line with the recent Lanarkshire wide Needs Assessment of Specialist Healthcare for people with learning disabilities, which included those individuals with learning disabilities, who also have ASD. There is a need for Specialist Outreach Support Teachers for ASD for children of Primary and Secondary school age. Out of school and holiday clubs suitable for young people with ASD are not widely available. The need for more flexible supports to families on an emergency basis. Multi-agency training for all staff levels working with children and adults with autism. Expansion of existing community based supports such as play schemes, shared care services etc –develop and provide services – Better access to information on services.

### **South Lanarkshire Council**

There is a general need for improved information and IT to allow accurate data collection, which will in turn inform the planning of services. Increased demand placed on the SLT service means that the current level of provision requires to be monitored closely. There is a need for Autism Advisors to provide support for families and for a general increase in the Educational Psychology input to the diagnostic teams. The Learning Disability Team is aware of the need for multi-disciplinary outreach for all individuals with learning disabilities including

those with ASD. Accordingly, the specialist learning disability services are currently being redeveloped in line with the recent Lanarkshire wide Needs Assessment of Specialist Healthcare for people with learning disabilities which included those individuals with learning disabilities who also have ASD. Increased numbers of children with complex needs and the balance between enabling access to mainstream education while minimising the impact on the rest of the class.

#### **LOTHIAN**

Services for people with Aspergers. Services for adolescents with ASD. Residential and day services for those with ASD/learning disabilities and challenging behaviour. Specialist IP services for assessment and treatment for very challenging behaviour and ASD/offending behaviour.

#### **ORKNEY**

Appropriate individual adult services, lack of short break support for adults. Autistic specific nursery environment being developed. Need for a Consultant Paediatrician Special Needs Post and also visiting specialist consultants. Gaps in knowledge and support for Housing Support staff.

#### **SHETLAND**

CDI – follow up is 3 weeks after, no autism outreach worker, lack of specialist awareness from professionals ie. GP's, nurses and teachers.

#### **TAYSIDE**

##### **Angus Council**

No specialist secondary school provision in Angus. No specialist day care provision for children or adults. No specialist skill and knowledge base within staff teams in care management, home care, day and residential provision.

##### **Dundee City Council**

Additional supports needed to promote and facilitate use of mainstream resources. Support resources require to provide trained, skilled staff. Finance required to purchase enough of these resources.

##### **Perth & Kinross Council**

Children/young people have limited early intervention services, residential respite, outreach services, services/supports specific to Aspergers, out-of-school care, education and rural provisions. Adults have limited employment support, day services, respite/short breaks. Aspergers/high functioning ASD needs not being met within existing services, therefore, new individually responsive approaches required. Overall, many gaps over all service areas either through limited resources/capacity or through the need to develop new or redesigned services. Health resources also limited in certain areas, such as AHP's Community Learning Disability Nurses, Clinical Psychology.

## **31. What types and levels of training on autistic spectrum disorders do you provide for:**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

All school staff are offered training on working with children and young people with ASD. Some care staff have accessed training in working with children and young people with ASD. This training includes awareness of ASD; implementing autism specific strategies and structures and managing ASD associated features, for example behaviours. Authority staff, voluntary organisations or professionals specialising in ASD provide training. Teaching staff have the opportunity to participate in accredited training in ASD. In addition, a lead teacher on ASD provides in-school staff development to complement external training. The voluntary sector primarily through Autism Argyll has provided a range of training events.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Flexicare and NAS offer ongoing ASD for all interested parties. Senior and frontline staff receive mainstream support and attend conferences on ASD.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Senior commissioners, senior and frontline staff receive training from the Scottish Autistic Society.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

Frontline staff receive in house training by a Clinical Psychologist.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

Frontline staff receive in house training by a Clinical Psychologist. Raising awareness training provided by NAS.

### **DUMFRIES & GALLOWAY**

Frontline staff receive joint training on Strathclyde ASD Certificate. Care providers, users and carers are all given awareness training.

### **FIFE**

Service commissioners receive centrally provided training. Contextual training to schools is provided by Psychological Service and ASSIST. Senior and frontline staff are to receive specialist ASD training by a Clinical Psychologist.

### **FORTH VALLEY**

A variety of courses are made available to senior and frontline staff.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

Service commissioners have access to a variety of training on ASD, trends analysis and commissioning. The Commissioning Team participated in a training programme on commissioning run by Manchester University. Senior staff have access to the full range of ASD training. Frontline staff and care providers have access to a joint training programme, which was produced by the Joint Learning Disability Training Strategy ASD Sub-Group. Users and carers also have access to this training programme, as well opportunities provided by the Carers Strategy.

#### **Aberdeenshire Council and NHS Grampian**

Senior and frontline staff, as well as care providers all receive autism awareness and management training. Users and carers receive training in management of ASD at home.

#### **Moray Council**

Some basic awareness training is given to carers.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

The University of Strathclyde offers the only multi-professional postgraduate courses in autism in Scotland. In Glasgow the Raising Awareness module, Certificate, Diploma and Masters in Autism are all available at Jordanhill campus and are open to suitably qualified professionals from Health, Education, Social Work, care services and voluntary sector. The course is also open to parents who meet the entry requirements. Two members of the course team have a research grant to investigate training for autism in Scotland and to develop a National Training Framework. The course team also offers a variety of in-service and continuing professional development opportunities, often in collaboration with other providers.

NAS give Autism Awareness Training to Social Work staff, as well as training for families and professionals in communication skills. NAS also run a series of events, covering a range of topical issues for families.

The SSA provide Autism Awareness training at a local level.

The SCA offers training placements in the diagnosis of ASD to adequately qualified medical staff. The Centre also offers parent training in early intervention.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Senior commissioners, senior and frontline staff all receive training from the Scottish Autistic Society.

## **HIGHLAND**

All staff receive training from NAS and SSA as well as TEACHH and attending national conferences. All this training is open to parents.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Service commissioners have meetings and training seminars. The specialist services for people with learning disabilities provide a large number of training courses and events for staff at all level, ranging from ongoing generic training to more specific areas including ASD. Carers and provider organisations are also catered for. A number of NHS professionals have developed a "specialist interest" in ASD and are supported to do this. Frontline staff participates in CPD, in-service training and the Facilitation of Support Groups. Basis foundation raising awareness training course is made available to all front line staff. Training in Values including social role valorisation and person centred planning are made available to all frontline staff. The Early Bird and Hanen programmes provide training for care providers. Parents' Groups in Schools provide training for users and carers.

### **South Lanarkshire Council**

Service commissioners have meetings and training seminars. The specialist services for people with learning disabilities provide a large number of training courses and events for staff at all level, ranging from ongoing generic training to more specific areas including ASD. Carers and provider organisations are also catered for. A number of NHS professionals have developed a "specialist interest" in ASD and are supported to do this. There have been exploratory discussions with a local college regarding the development of joint training.

## **LOTHIAN**

Autism awareness training is available to all staff members as well as care providers, users and carers.

## **ORKNEY**

Ongoing multi-agency training is available to all staff members as well as care providers, users and carers.

## **SHETLAND**

Independent and NHS training available to frontline staff, care providers, users and carers.

**TAYSIDE**

No training is given to service commissioners or senior staff. Frontline staff and care providers have had awareness training sessions facilitated by the NAS.

## **32. Describe any significant good practice and any gaps in autistic spectrum disorders training.**

### **ARGYLL & CLYDE**

#### **Argyll & Bute Council**

For children, joint training has been provided for Education, Health, Social Work services staff and parents. Two training conferences have taken place led by Gary Mesibov, Director of Division TEACHH. One conference focussed on supporting children and young people with autism while the other focussed on supporting children and young people with Asperger Syndrome. There has been limited training for those working with adults, although in 2002 the NAS undertook a series of roadshows across Argyll & Bute.

#### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

There is a requirement to provide intensive training for a wide range of care providers within Health, Social Care and provider organisations. Although most front line staff will have basic knowledge on ASD, there is a requirement to increase the level of skill in this area. SAS have provided on site training. Mainstream support groups provide training for all teachers and auxiliaries. Advocacy services available.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Frontline staff attended innovative training by the Scottish Autistic Society. The training was led by Peter Vemeulen and was two-fold: introducing people to autism or 'autistic thinking' and developing good communication strategies for practitioners. Training was offered on a joint basis to local Social Work, Health and voluntary sector providers.

### **AYRSHIRE & ARRAN**

#### **East Ayrshire Council and Ayrshire & Arran NHS**

Training delivers to all frontline NHS LDS staff on communication, challenging behaviour and an overview of ASD and Aspergers.

#### **North Ayrshire Council and Ayrshire & Arran NHS**

Training delivers to all frontline NHS LDS staff on communication, challenging behaviour and an overview of ASD and Aspergers. Intention to roll out the Raising Awareness training referred to above and provide more in-depth training for staff. This has been identified as a gap within the training programme.

### **DUMFRIES & GALLOWAY**

Strathclyde Certificate course is proving to be very valuable – shared training leads to shared practice. However, we do need more planned and accessible regular training for all parties.

### **GRAMPIAN**

#### **Aberdeen City Council and NHS Grampian**

The Joint Training Strategy and the ASD Training Programme are examples of good practice. The involvement of service users and carers both as providers and recipients of training could be improved.

#### **Aberdeenshire Council and NHS Grampian**

The variety of ASD training available. Social Work professionals involved with children feel that there is a lack of training for people after diagnosis, to help them with aiding their child to communicate in a more positive way. It was also felt that multi-agency and multi-disciplinary training was lacking.

#### **Moray Council**

Not enough training is available for staff or families.

## **GREATER GLASGOW**

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Frontline staff attended innovative training by the Scottish Autistic Society. The training was led by Peter Vemeulen and was two-fold: introducing people to autism or 'autistic thinking' and developing good communication strategies for practitioners. Training was offered on a joint basis to local Social Work, Health and voluntary sector providers.

## **HIGHLAND**

Multi-agency delivery of training, including parents and ambassadors – young adults with Asperger syndrome. Users and Carers can indirectly commission training funded by the Change Fund and all courses are open to them. Training is provided directly to education staff from the AOES. The SSA are hoping to roll out a programme of training which will start with basic autism awareness. There is scope to further improve dissemination of biomedical information on research and on health promotion.

## **LANARKSHIRE**

### **North Lanarkshire Council**

The recruitment of trained experienced staff for the specialist units can prove difficult. The in-service training from local staff or independent providers is an example of good practice, which is widely available.

### **South Lanarkshire Council**

Diploma qualification. Joint training for Speech and Language Therapy at nursery level.

## **LOTHIAN**

Autism awareness delivered on a multi-agency basis.

Gaps are: input for non learning disability health professionals for autism and Aspergers. Limited time available from Autism Co-ordinator – we need more trainers. Recognition of importance sadly lacking in many areas.

## **ORKNEY**

Good practice – multi-agency events, a Psychologist and Support teacher provide autism awareness training, needs identification/self analysis and follow up. Specific training, eg, PECS/social stories across agency provision.

Gaps exist when it comes to higher level training, eg, Dip SEN.

## **SHETLAND**

Good Practice – training can be multi-agency.

Gaps – more specialist training would be advantageous.

## **TAYSIDE**

### **Dundee City Council**

NAS awareness raising programme.

### **Perth & Kinross Council**

Insufficient training available at all levels from basic awareness to specific interventions.

### **33. What joint funding arrangements are there between local partners?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute Council**

For children, there are formal joint funding arrangements between Education and Social Work focussing specialist placements and intensive support arrangements. Specialist placement funding has included health in one instance. A joint approach using Children Change Fund monies will contribute towards joint development in this area. Joint funding of placements is less well developed between health and social work for adults. However, the joint futures agenda means that joint provision for adults will be more of a feature in the future.

##### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Taken on individual service design basis. Jointly funded out of area placements. Nil for adults.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Joint funding between Education and Social Work.

#### **AYRSHIRE & ARRAN**

##### **East Ayrshire Council and Ayrshire & Arran NHS**

Residential children's respite services are jointly funded across Ayrshire.

##### **North Ayrshire Council and Ayrshire & Arran NHS**

Residential children's respite services are jointly funded across Ayrshire. Education Services and Social Services also jointly fund residential provision for children.

#### **DUMFRIES & GALLOWAY**

Shared training budget for Children's Services.

#### **FIFE**

Changing Children's Services Fund. Change fund for adults, but not autism specific. No existing resource used in joint way.

#### **FORTH VALLEY**

##### **Clackmannanshire Council And Forth Valley NHS**

Residential school placements would be joint Education/Social Work funded. Respite care is joint Social Work/Health funded (sometimes). Community Early Assessment Team is joint local authority/health board funded (ratio 2:1).

##### **Stirling Council And Forth Valley NHS**

Combined packages of care between Health, Social Services and Education are negotiated on an individual basis.

#### **GRAMPIAN**

##### **Aberdeen City Council and NHS Grampian**

The Joint Training Strategy is funded jointly by the three local authorities in Grampian and NHS Grampian. The development of housing with support is being jointly funded by Aberdeen City Council, NHS Grampian and Communities Scotland.

##### **Aberdeenshire Council and NHS Grampian**

Joint Funding through Change has employed an Autism Advisor through the Scottish Society for Autism. Some residential placements for children are jointly funded within the local authority, between Social Work and Education.

### **Moray Council**

MIDAS and Employment Support Services are funded through Change Fund money. Packages are funded by the local authority but, but staff support and training etc is provided by the health team. Have not yet achieved joint funding with education for transitional packages.

### **GREATER GLASGOW**

#### **Glasgow City Council and Greater Glasgow NHS**

Whilst elements of joint funding exist within community care and children and family services, there is an acknowledged need to review and develop funding arrangements in relation to ASD services.

#### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Joint finding between Education and Social Work.

### **HIGHLAND**

The Transitions Group can address strategic funding, and the Children's and Adult ASD Groups have the capacity to pool money and resources where this makes sense. For children, 'Changing Children's Services' funding is available. The Learning Disabilities Change Fund is accessible to service developments for people with ASD. In addition the Lead and Chief Officers Groups can further develop pooled and joint funding and commissioning arrangements. Membership comprises Health, Social Work, Education and Housing.

### **LANARKSHIRE**

The rollout of the Joint Futures agenda includes the development of joint funding arrangements between the local partners. In the meantime, a case by case approach is being examined in relation to people with complex needs leaving hospital. Social Work and Education operate resources collaboratively and there is an "exceptional cases" system for community cases involving NHS, Social Work and Education.

### **LOTHIAN**

None at present as far as staff are concerned. Some joint funding of individual care packages agreed on an ad hoc basis.

### **ORKNEY**

Triple fund, Resource Transfer fund and joint funding NHS and OIC specific posts.

### **SHETLAND**

There are currently no pooled budgets specially for ASD services.

### **TAYSIDE**

#### **Angus Council**

No specific joint funding arrangement in relation to ASD.

#### **Dundee City Council**

Joint Social Work/Education budget for placements at residential schools. 1 adult is part jointly funded by Health and Social Work.

#### **Perth & Kinross Council**

Joint funding is currently through resource transfer and through the mechanism being introduced by Care Together which delivers health and community care services via a single organisational structure.

### **34. What mechanisms are there in place to resolve any funding disputes?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute Council**

There are no formal arrangements for adults, this would be undertaken on an individual basis.

**NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**  
None.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Joint meetings between operational Heads of Service in Education and Social Work.

#### **AYRSHIRE & ARRAN**

There are a range of interagency planning and decision making forums where issues relating to joint funding can be discussed as appropriate.

#### **DUMFRIES & GALLOWAY**

For children, this would be addressed by the Standing Group.

#### **FORTH VALLEY**

Cases taken on an individual basis.

#### **GRAMPIAN**

##### **Aberdeen City Council and NHS Grampian**

A Joint Forum has been established, which can deal with funding disputes.

##### **Aberdeenshire Council and NHS Grampian**

Through the Aberdeenshire Partnership for Health and Social Care and the Partnership in Practice Agreement.

##### **Moray Council**

None.

#### **GREATER GLASGOW**

##### **Glasgow City Council and Greater Glasgow NHS**

See answer to question 33.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

Joint meetings between operational Heads of Service in Education and Social Work.

#### **HIGHLAND**

The fora described in question 33.

#### **LANARKSHIRE**

There are clear joint planning structures, which provide a mechanism in which to resolve any funding disputes.

#### **LOTHIAN**

Ultimately the Medical Director and Nursing Director of Primary Care Trust would arbitrate regarding requests for health funding for adults. Presume that a similar situation would arise for children involving the relevant personnel. No formal multi-agency mechanisms.

#### **ORKNEY**

JMT and partnership management meetings with Health and Education.

#### **SHETLAND**

N/A.

## **TAYSIDE**

### **Angus Council**

No formal mechanisms. On an individual case by case basis there would be discussions between relevant line manager and social work, where appropriate.

### **Dundee City Council**

Children – Residential Resource Monitoring Group (Social Work/Education).

Adults: Joint & Community Care Management Group (Health/Social Work/Housing).

### **Perth & Kinross Council**

Any funding disputes (where possible) would be dealt with by the provider and the commissioning service through formal discussion and agreement. Where agreements cannot be made there is a funding panel who can look at the situation and make a formal judgement.

### **35. What forward planning takes place about funding from children as they move on to adult services?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute Council**

Forward planning is in place in respect of high profile/high cost arrangements but is less well developed for more standard provision..

##### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Transitional budget planning is being progressed.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

At an individual level, through multi-agency meetings where the current and future needs of children are reviewed. At a strategic level, through Children's Services planning process where transitional issues are addressed and service responses, such as the establishment of a transitional team using monies for the Changing Children's Services Fund, are jointly developed between planning partners in Social Work, Education, the NHS and voluntary sector.

#### **AYRSHIRE & ARRAN**

##### **East Ayrshire Council and Ayrshire & Arran NHS**

The transition planning process within the local authority should identify care plan costs for young people and secured agreement for funding from adult budgets prior to the plans being implemented.

##### **North Ayrshire Council and Ayrshire & Arran NHS**

There is consultation between Children's Services and Adult Services within North Ayrshire Council in relation to agreeing the funding of care packages. There are no similar mechanisms in place between Social Services and Education Services or with Health Services.

#### **DUMFRIES & GALLOWAY**

Future Needs Assessment process would apply here.

#### **FORTH VALLEY**

Future Needs system. Adult Social Services are involved at least 9 months before child leaves school.

#### **GRAMPIAN**

##### **Aberdeen City Council and NHS Grampian**

A Joint Project Group has been established with the intention of developing services based on identified need. The project group is supported by a Housing Procurement Group, which has responsibility for securing sites for building or suitable properties capable of adaptation. Financial planning is a key element in the work of the Joint Project Group.

##### **Aberdeenshire Council and NHS Grampian**

There is a close liaison between children's and adult services during the transition phase, including adult services being involved in the review of the child's care plan prior to the child making the transition to adult services.

##### **Moray Council**

Community Services meet with Education Psychology annually to look at children in high school. Assessment of Needs have been carried out in three specific areas looking at needs of children in high school who will transfer to adult services. Several groups are looking at different ways to improve transitional services/information.

## **GREATER GLASGOW**

### **Glasgow City Council and Greater Glasgow NHS**

See answer to question 33.

### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

At an individual level, through multi-agency meetings where the current and future needs of children are reviewed. At a strategic level, through Children's Services planning process where transitional issues are addressed and service responses, such as the establishment of a transitional team using monies for the Changing Children's Services Fund, are jointly developed between planning partners in Social Work, Education, the NHS and voluntary sector.

## **HIGHLAND**

The Transitions Group and Lead and Chief Officers and Joint Chief Officers Strategy Groups will respond to need for services generated from Future Needs Assessments and Reviews. Future Needs Assessments continue to pave the way for individuals. On a wider level, key decisions are informed by the Joint Committee for Action in Community Care and there are plans to strengthen it's role and remit.

## **LANARKSHIRE**

### **North Lanarkshire Council**

Previous forward planning with regards to funding provided a base line to determine projected funding requirements for the future. This requires appropriate financial projections, which are in turn influenced by individualised specifications based on individualised planning.

## **LOTHIAN**

Assessment at transition leads to identification of funding need. No mechanism for identifying and committing future funds at an earlier stage. Funding depends on need/priority/availability of resources etc.

## **ORKNEY**

LAC, Community Care team and specific management teams.

## **SHETLAND**

Services are planned for all children with learning disabilities, services for children with ASD will be planned on an individual basis, funding for ASD clients is not separated from learning disabilities budget.

## **TAYSIDE**

### **Angus Council**

Forward planning including identifying issues, would be undertaken through the completion of future needs assessments.

### **Dundee City Council**

Work in Progress in Social Work department: Young Peoples Transitions and Planning Group. This group has collected information about all local children and young people with disabilities. The group is attempting to estimate future need, resource requirements and potential cost implications.

### **Perth & Kinross Council**

This is centred on the Future Needs Assessment process. With broad indication of the cost of future services required placed with general costing bands eg. £10-20, 000 per annum.

**36. Can you provide cost estimate for young people in transition, based on your planning assumptions. Please provide details.**

**ARGYLL & CLYDE**

**Argyll & Bute Council**

Cost estimates are available for those young people in high profile out of authority placements when an intensive level of funding will be required.

**NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

No, although we can predict that packages will be in excess of £150, 000 for a small number of young people who are currently known to the service.

**East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

East Renfrewshire's Partnership in Practice Agreement, in response to the Scottish Executive 'The Same as You?', identified 36 individuals with disabilities in the transition period between Children and Adult Services. This includes all people with disabilities known to services, a significant proportion being people with ASDs. East Renfrewshire's Partnership in Practice Agreement aims to develop more integrated and responsive services and this is underlined by the development of the transitions team using Changing Children's Services Fund money. We cannot estimate a cost.

**AYRSHIRE & ARRAN**

The NHS cannot provide these cost estimates.

**FIFE**

Cost of purchased Outreach: £12.24 per hour. Cost of purchased Day Care: £602 p/w 1 to 1, £388 p/w for 1 to 2, £316p/w for 1 to 3. Cost of residential places: £1542 p/w per place.

**GRAMPIAN**

**Moray Council**

Current cost of one 24-49 year old is £2097 per week.

**GREATER GLASGOW**

**Glasgow City Council and Greater Glasgow NHS**

See answer to question 33.

**East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

East Renfrewshire's Partnership in Practice Agreement, in response to the Scottish Executive 'The Same as You?', identified 36 individuals with disabilities in the transition period between Children and Adult Services. This includes all people with disabilities known to services, a significant proportion being people with ASDs. East Renfrewshire's Partnership in Practice Agreement aims to develop more integrated and responsive services and this is underlined by the development of the Transitions Team using Changing Children's Services Fund money. We cannot estimate a cost.

**LANARKSHIRE**

**North Lanarkshire Council**

The number of young people leaving school each year in North Lanarkshire, with a record of need, varies between 50-70. The estimated costs for supports range from good quality planning with no recurring revenue implications, to individual support arrangements of around £60,000 per year. Clearly there are only a few people leaving school each year with needs at such a level.

## **TAYSIDE**

### **Dundee City Council**

Provision of accommodation with support (£700 per person/per week) and care (£700 per person/per week) and day opportunities (£1000 per person/per week).

### **Perth & Kinross Council**

This is not possible s assumptions can change significantly as the young person reaches school leaving age.

### **37. Do you have or are you developing joint planning structures with Joint Future with a specific emphasis on ASD?**

#### **ARGYLL & CLYDE**

##### **Argyll & Bute Council**

Joint futures planning structures are now coming on stream, but as yet do not have specific emphasis on ASD.

##### **NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

ASD will be part of the wider agenda. Currently ASD Joint forum meets quarterly in Children's Services. A sub-group is investigating joint working in there-5 group in Renfrewshire.

##### **East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

East Renfrewshire's joint planning structure flows from a high level Community Planning Steering Group, through four themed Policy Groups reflecting the areas within the Council's Community Plan. The Caring and Healthy Communities Policy Group is the high level partnership body responsible for taking forward the Joint Future agenda as well as other joint planning requirements. The Children's Service Planning process is overseen by the Caring and Healthy Communities Policy Group and sub-groups within the Children's Services Planning structure report to this high-level partnership body. All joint strategies for taking forward integration services, including those for children with additional support needs come under this Policy Group structure.

#### **AYRSHIRE & ARRAN**

Joint Future is being progressed locally with the involvement of all partners. There is no specific focus now or intended, to apply a specific emphasis to ASD.

#### **DUMFRIES & GALLOWAY**

Not specifically for ASD.

#### **FIFE**

Not yet.

#### **FORTH VALLEY**

Nothing specific related to ASD.

#### **GRAMPIAN**

##### **Aberdeen City Council and NHS Grampian**

Existing joint planning structures for learning disability, including ASD are being linked into Joint Future planning.

##### **Aberdeenshire Council and NHS Grampian**

Developing joint management arrangements for services for people with learning disabilities but have not separated off ASD for specific emphasis so far.

##### **Moray Council**

No.

#### **GREATER GLASGOW**

##### **Glasgow City Council and Greater Glasgow NHS**

The Joint Community Care Committee in Glasgow has established an ASD Task Force to identify the needs of people with ASD and their families and to develop proposals for an improved service and better practice. The Task Force submitted an interim report in May which included a proposal to establish an ASD Planning Group as an integral part of the joint planning structure in Glasgow. The findings and proposals of the Task Force will undergo wide consultation with a range of interests including service users and carers over the summer and a final report submitted in September. The Task Force has been successful in bringing together all key interests into a productive working partnership and we would commend this model to others.

**East Renfrewshire, Council, NHS A&C and Greater Glasgow NHS**

East Renfrewshire's joint planning structure flows from a high level Community Planning Steering Group, through four themed Policy Groups reflecting the areas within the Council's Community Plan. The Caring and Health Communities Policy Group is the high level partnership body responsible for taking forward the Joint Future agenda as well as other joint planning requirements. The Children's Service Planning process is overseen by the Caring and Healthy Communities Policy Group and sub-groups within the Children's Services Planning structure report to this high-level partnership body. All joint strategies for taking forward integration services, including those for children with additional support needs come under this Policy Group structure.

**HIGHLAND**

No, but its conceivable that these will emerge as Joint Future is fully realised.

**LANARKSHIRE**

Joint planning structures within Joint Future are being developed for Learning Disabilities as a whole rather than a specific planning structure for ASD.

**LOTHIAN**

No, contained within planning for learning disabilities service generally for adults.

**ORKNEY**

No, joint managers in place who have an integrated perspective on current and future needs.

**SHETLAND**

No.

**TAYSIDE**

**Angus Council**

Not with a specific emphasis on ASD, but within joint future we already have established integrated community mental health teams and are moving to establish integrated community learning disability teams.

**Dundee City Council**

Planning structures will continue to incorporate a range of needs ie. learning disabilities.

**Perth & Kinross Council**

Yes, however, it is at an early stage of development.

**38. Do you have joint commissioning structures involving health and local authorities? Are plans in place to develop appropriate accommodation and support, day services, respite services and continuing care structures?**

**ARGYLL & CLYDE**

**Argyll & Bute Council**

Similarly joint futures commissioning structures are coming into operation. As yet, there are no plans in place to develop specific services for adults with ASD. For children, there are a number of planning groups involving health, the local authority and the voluntary sector, some of which have led to the development of plans for support services which include children with ASD.

**NHS Argyll and Clyde, Renfrewshire Council, Inverclyde Council, West Dunbartonshire Council**

Jointly funded and commissioned Primary Care posts. People with ASD should access mainstream resources with support.

**AYRSHIRE & ARRAN**

Joint planning and decision making structures are in place, however, there are no local arrangements for joint commissioning. Agencies do come together to jointly commission services to meet specific needs are required, usually this might take the form of addressing an individual complex care package that cannot be addressed locally, or the delivery of residential children's respite services.

**DUMFRIES & GALLOWAY**

Yes, for Adult Services.

**FORTH VALLEY**

Forth Valley Partnership in Practice Group.

**GRAMPIAN**

**Aberdeen City Council and NHS Grampian**

There are joint commissioning structures and plans in place for a number of developments. The difficulty is that without the "plan", these approaches can be uncoordinated.

**Aberdeenshire Council and NHS Grampian**

All our commissioning is done on a joint basis although the local authority takes the lead on the actual process and employs the contracts officer who monitors the service agreement.

**Moray Council**

Planning and commissioning unit is jointly funded by Health and Social Work. Specialist Day Unit is being planned. Individual providers are developing specialist knowledge. Respite services for ASD are being considered as part of the respite review.

**GREATER GLASGOW**

Glasgow has established a Learning Disability Partnership headed by a Joint General Manager which has brought a large degree of co-ordination and integration into service planning, commissioning and management. It is working towards the creation of a single structure for learning disability services which would entail a pooled budget and single managerial framework. As noted above, the Task Force is to present proposals that would create an ASD Development Team which would establish a work plan out of a strategy designed to ensure access to appropriate accommodation and support, day services, respite services and continuing care structures.

**HIGHLAND**

Yes, to all. Services via planning fora, LHCC's and local implementation groups.

## **LANARKSHIRE**

Formal joint commissioning structures have not been established. There is, however, emerging practice linked to the hospital re-provisioning programme, which is addressing this on a case by case basis. This experience will help to inform the development of wider and more formal approaches to joint commissioning.

## **LOTHIAN**

Structures in the planning stage in some areas of Lothian, and established in others. There are no first regional plans at present, East Lothian has specific plans and a regional seminar is planned to take the process further.

## **ORKNEY**

No.

## **TAYSIDE**

### **Angus Council**

Yes. No specific plans to look at ASD at present.

### **Dundee City Council**

Children's Services Strategic Planning Group (multi-disciplinary), Learning Disabilities Strategic Planning Group (multi-disciplinary), Learning Disability Strategic Review (health led review of Tayside resources), Dundee Partnership in Practice Agreement. Plans in place to develop 4 specialist day resources for young adults with challenging behaviour and ASD. 5 person housing with support cluster (specialist staff provider) for young people with challenging behaviour and ASD. Enabler services to facilitate moves away from traditional adult resource centre.

### **Perth & Kinross Council**

All joint commissioning should be developed initially through the Learning Disabilities Task Group with recommendations for the types of service required to meet the needs of people with ASD. The commissioning process would then involve the input of the Care Together Contracts Officer who would pull together the relevant information and develop a tender for the services to be developed. This would be the case with regard to all relevant services.

## ANNEX D – LOCAL AUTHORITY CONTACT LIST

<b>Local Authority</b>	<b>Contact Details</b>
<b>Aberdeen City Council</b>	<p>Alistair Baird  Social Work Manager (Research and Development)  Social Work Services  Aberdeen City Council  St Nicholas House  Broad Street  Aberdeen  AB10 1BY</p> <p>Tel: 01224 522 802</p> <p>E-mail: abaird@socialwork.aberdeen.net</p>
<b>Aberdeenshire Council</b> <b>Grampian NHS Board</b>	<p>Anne Sutherland – Strategic Development Manager  (Community Care)  Elaine Dickson – Strategic Development Officer  (Childcare)  Aberdeenshire Council  Woodhill House  Westburn Road  Aberdeen  AB16 5GB</p>
<b>Angus Council</b>	<p>Ian Cairns  Social Work Department  Angus Council  County Buildings  Market Street  Forfar  DD8 1BX</p>
<b>Argyll &amp; Bute Council</b>	<p>Douglas Dunlop  Head of Children &amp; Families  Argyll &amp; Bute Council  Dalraida House  Lochnell Street  Lochgilphead  PA31 8RT</p>
<b>NHS Argyll &amp; Clyde</b>	<p>Alistair Matheson  Clinical Project Manager  Merchiston Hospital  Brookfield  PA5 8TY</p>



<b>East Ayrshire</b>	Alison Findlay Service Unit Manager (Adults) Civic Centre John Dickie Street Kilmarnock, KA1 1BY
<b>East Dunbartonshire</b>	See NHS Argyll & Clyde
<b>East Lothian</b>	See NHS Lothian
<b>Renfrewshire Council</b>	Erik Sutherland Senior Policy and Research Officer East Renfrewshire Council Social Work Department Eastwood Park Rouken Glen Road G46 6UG  E-mail:erik.sutherland@eastrenfrewshire.gov.uk
<b>NHS Lothian</b>	Dr Ros Lyall Clinical Director Learning Disabilities Service Lothian Primary Care Trust 65 Morningside Drive Edinburgh EH10 5NQ
<b>Forth Valley NHS Board</b>	Joe McGhee Senior Planning and Development Officer FV NHS Board 33 Spittal Street Stirling FK8 1DX
<b>Stirling Council</b>	Carole McMillan Service Manager Planning and Commissioning Stirling Council
<b>Fife Council</b>  <b>NHS Fife</b>	Chris Solly Performance and Evaluation Officer Fife Council Social Work Service Fife House North Street Glenrothes KY7 5LT

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<p><b>Glasgow City Council</b>   <b>NHS Greater Glasgow</b></p>	<p>Neil Carmichael  Senior Officer – Planning  Social Work Services  Nye Bevan House  20 India Street  Glasgow  G2 4PF</p> <p>Tel: 0141 287 8786  E-mail: <a href="mailto:neil.carmichael@sw.glasgow.gov.uk">neil.carmichael@sw.glasgow.gov.uk</a></p>
<p><b>Highland</b></p>	<p>Project Manager – Learning Disabilities  Social Work HQ  Leachkin Road  Inverness  IV3 8NN</p> <p>Tel: 01463 703 456  E-mail: <a href="mailto:stephen.porter@highland.gov.uk">stephen.porter@highland.gov.uk</a></p>
<p><b>Inverclyde</b></p>	<p>See NHS Argyll &amp; Clyde</p>
<p><b>Midlothian</b></p>	<p>See NHS Lothian</p>
<p><b>Moray Council</b>   <b>Moray Council Community Learning Disability Team</b></p>	<p>Lesley Graham  Planning &amp; Commissioning  11 North Guildry Street  Elgin  IV30 1JR</p> <p>Anne Slee/Maria Dawson  CLDT  Highfield House  Northfield Terrace  Elgin  IV30 1NE</p> <p>Tel: 01343 562 111</p>
<p><b>North Ayrshire Council</b></p>	<p>See NHS Ayrshire &amp; Arran</p>

<p><b>North Lanarkshire Council</b></p>	<p>Morag Dendy Development Co-ordinator Learning Disability 73-77 Merry Street Motherwell ML1 1JE</p> <p>Tel: 01698 332 072 Email: <a href="mailto:dendym@northlan.gov.uk">dendym@northlan.gov.uk</a></p>
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<p><b>Perth &amp; Kinross</b></p>	<p>Alex Vannart Planning Officer Care Together 35 Kinnoull Street Perth</p>
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## **Glossary**

ADI – Autism Diagnosis Interview  
ADOS – Autism Diagnosis Observation Schedule  
ADI – Autism Diagnosis Interview  
AOES –  
ASD – Autistic Spectrum Disorder  
CAMHS – Child and Adolescent Mental Health Service  
CARS – Childhood Autism Rating Scale  
CDI –  
CHAT – Checklist for Autism in Toddlers  
CLDT – Community Learning Disability Team  
COPE – Community Opportunities and Participation in Employment  
DSM – Diagnostic and Statistical  
FAA – Fife Action on Autism  
FAST – Fife Autistic Spectrum Team  
FNA –  
ICD – International Classification of Diseases  
IEP –  
IFD –  
JMT –  
LAS –  
MIDAS – Moray Interagency Development Assessment Support  
NAS – National Autistic Society  
OIC –  
PDD – Pervasive Developmental Disorders  
PHAD – People with High-functioning Autistic Disorder  
PHIS – Public Health Institute of Scotland  
PRESCAT – Pre-school Community Assessment Team  
SALT –  
SEN – Special Educational Needs  
SSA – Scottish Society for Autism  
SAS – Strathclyde Autistic Society  
TEACHH –

THB –

TPCT –

WISC – Weschlers Intelligence Scale for Children