



West Yorkshire & Harrogate Joint Committee of Clinical Commissioning Groups

Summary report		
Date of meeting: 6 July 2021		Agenda item: 27/21
Report title:	All age autism assessment and diagnosis	
Joint Committee sponsor:	Helen Hirst, Chief Officer, Bradford District and Craven CCG	
Clinical Lead:	To be confirmed. Part of the Transforming Care Programme expression of interest is funding to support a clinical lead	
Author:	Jo Butterfield	
Presenter:	Helen Hirst	
Purpose of report: (why is this being brought to the Committee?)		
Decision	✓	Comment
Assurance		
Executive summary		
<p>Previously the Mental Health, Learning Disabilities and Autism Programme identified assessment and diagnosis of Autistic Spectrum Conditions (ASC) and Attention Deficit Hyperactivity Disorder (ADHD), across the full age range, as a priority area for the Partnership and an area to work on collectively. Each place has made some improvements but these still fall well short of meeting the demand in the system. In relation to Autism assessments we have increasing numbers of referrals (some places seeing 50% increase over the last couple of years, and 3000 people are waiting currently) and lengthy waiting times (500 people waiting over a year).</p> <p>As a Partnership, we work together across West Yorkshire when working at scale will achieve better outcomes for people; where there is benefit from sharing good practice; and when we have complex issues to resolve. The challenges faced in meeting the needs of our autistic population would suggest this to be one such area where there are huge benefits to collaboration. Including how we take a strategic approach to planning and securing the capacity required as well as achievement of consistent high quality outcomes for people.</p> <p>The Joint Committee is invited to support a collaborative approach to Autism assessment and diagnosis. This includes a clear expectation of a collaborative approach to strategic planning of assessment and diagnostic services in the future (this may include supporting our broader neurodiverse population including ADHD and individuals who present as neurodivergent but don't have a formal diagnosis). There is an opportunity through a Transforming Care Programme (TCP) non-recurrent funding source to utilize funding (new money) to develop our approach for the future including new ways of working.</p>		
Recommendations and next steps		
<p>The Joint Committee is recommended:</p> <ol style="list-style-type: none"> a) Support joint work on autism across West Yorkshire. b) Support the proposal to use the additional resources collaboratively to make the greatest impact in the short term and establish the basis of future collaboration. 		

Delivering outcomes: describe how the report supports the delivery of outcomes (Health and wellbeing, care and quality, finance and efficiency)

This report is concerned with achieving better outcomes for our autistic population through access to timely assessment and diagnosis and post diagnostic support.

Impact assessment (please provide a brief description, or refer to the main body of the report)

Clinical outcomes:	Securing high quality clinical outcomes for our autistic population requires timely diagnosis and assessment
Public involvement:	Recent and ongoing engagement with our autistic population and their families/carers both at regional and local level (including Healthwatch analysis) indicates a frustration at the long waiting times for assessment, variation in offer – including diagnostic conversion rate, and lack of specific support for this population.
Finance:	See report
Risk:	Without a clear strategy to meet the growing numbers of people needing assessment and diagnosis, waiting lists will continue to grow and waiting times will get longer. This will lead to poorer health, social and educational outcomes for people
Conflicts of interest:	None

West Yorkshire and Harrogate Joint Committee of CCGs
All age autism assessment and diagnosis
6th July 2021

Context

1. In 2018/19 the Mental Health, Learning Disabilities and Autism Programme identified assessment and diagnosis of Autistic Spectrum Conditions (ASC) and Attention Deficit Hyperactivity Disorder (ADHD), across the full age range, as a priority area for the partnership and an area to work on collectively. We see increasing numbers of referrals (further impacted by Covid) and lengthy waiting times as well as different offers in each place across the partnership together with varying outcomes.
2. Since 2018, each place has taken their own action to improve their autism diagnosis and assessment pathways and there have been some improvements. But currently we have around 3000 people waiting for autism diagnosis and assessment, 500 people waiting over a year with the longest wait being 3 years. We simply do not have sufficient capacity across West Yorkshire to meet current needs and do not have a clear shared strategy for the future. Current waiting times and varying diagnostic rates mean that patients and families are choosing alternatives including the private sector (some unregulated) and demand for second opinions is increasing, which sees people moving between our places/fragmentation in pathway.
3. As a partnership we work together across West Yorkshire when working at scale will achieve better outcomes for people; where there is benefit from sharing good practice; and when we have complex issues to resolve. The challenges faced in meeting the needs of those with autism would suggest this to be one such area where there are huge benefits to collaboration.
4. The purpose of this paper therefore is to review our collaborative approach to tackling these issues and the Joint Committee is invited to support a collaborative approach to Autism, with the clear expectation of a collaborative approach to strategic planning of assessment and diagnostic services in the future.

Funding Opportunity

5. The bid for non recurrent “new” specific funding through the Transforming Care Programme (TCP) provides us with an opportunity to both revisit this as a priority area for the wider West Yorkshire system as well testing out our commitment to collaboration through the way we align this funding to our top priorities.
6. The bid being developed will enable us to address common issues collectively. This will mean we bring together planning and design (certainly in terms of standardising outcomes, sharing and adopting good practice) as a system but continue to deliver services (in varying models/through various providers) in place ensuring appropriate alignment with local services.
7. This would be recognised as the ‘design once deliver five times’ in the commissioning futures strategy or a networked model in our ICS operating model narrative.

8. As a result we would expect to make improvements in our strategic planning approach, understanding the needs and capacity to meet those needs across West Yorkshire together with a consistent set of expectations for local services with common outcome measures.
9. The bid being developed includes proposals to address specific issues including:
 - Funding for a dedicated Autism ICS role (as well as an Autism clinical champion) to carry out detailed review of systems, processes and clinical practices (this will align with and build on the existing work being carried out through the ODN)
 - Addressing waiting times for the areas that have longest waits (utilising the specific funding available to be spent on this)
 - Developing opportunities to develop mental health practitioners skills around supporting people with Autism
 - Engagement work with GPs around awareness raising and ensuring appropriate referrals
 - Co design and co production of tools for families/carers who have CYP with neurodiverse needs
 - Scoping of respite/crisis services in place and determining whether specialist support is required or whether adjustments can be made to general crisis services to ensure that they are able to meet the needs of CYP with autism
10. The bid will have been submitted by the time of the meeting and is expected to be signed off through the Transforming Care governance arrangements.

Funding is available for one year under the following categories:

Category	WY 'fair share' £000
Waiting List initiative: Identifying children and young people whose needs may be escalating or reaching crisis whilst on waiting lists for mental health / autism assessments	173
Clinical Champions in Integrated Care Systems (Adult/CYP) to drive recovery and planning within ICS development (must be additional)	58
Short Break & Respite: Respite care provision in the community for children and young people who require intensive support or are in crisis (CYP)	148
Autism Pathway (CYP) - To help local services attempt innovations to their pathways for providing autism diagnostic assessments and post-diagnostic support to children and young people.	319
Autism Pathway (Adult) To help local services attempt an innovation to their pathways for providing autism diagnostic assessments and post-diagnostic support to adults.	119

Recommendation

The Joint Committee is recommended to:

- a) Support joint work on autism across West Yorkshire.
- b) Support the proposal to use the additional resources collaboratively to make the greatest impact in the short term and establish the basis of future collaboration.