

Brighton and Hove Adult Autism Strategy Action Plan

Actions that are relevant for all areas

We will make these things happen over the next 5 years:

- Inclusive adjustments made to universal services and development of specialist services where there are large gaps in provision.
- Staff proactively identify unpaid carers and signpost them to support.
- Decisions about information sharing are explained in ways that are clear and accessible to autistic people including the potential benefits of sharing information with unpaid carers and family members to inform safety planning and support.
- There are clear and accessible guidelines as to how to complain about services with information about advocacy services.
- Complaints are addressed through a restorative justice approach that provides a compassionate, respectful, and caring way of responding to the problem that aims to foster healing, restoration, and learning for all those affected.
- Individuals are told about how they can get involved in improving services if they wish and told how their complaint has led to a change in services.
- Training includes the intersectional experience of autism, particularly cultural sensitivities and how perceptions of ethnic and racial background, gender and sexuality can impact the ability of autistic people, and those who support them, to access services and support.



Actions - Relationships, feeling safe and part of the community

We will make these things happen over the next 5 years:



- The police, the justice system and the youth offending service co-produce a review with the Autism Partnership Board around how they can better support, and make inclusive adjustments for, autistic people.
- Develop accessible and inclusive peer support around: understanding healthy relationships, how to recognise abuse and exploring gender and sexual identity.
- Recognition of autistic people as a financially vulnerable group within policies to address the cost-of-living crisis and ensuring financial support has inclusive adjustments.
- Collaborate with the learning disability partnership board on the development their safe space scheme and have quiet times at different times of the day in cinemas, libraries, swimming pools, gyms, supermarkets, and shops.
- Specialist befriending and social prescribing for neurodivergent people
- Local public transport providers co-produce a review of how buses, train stations and taxi schemes can be more accessible for autistic people. This should include how people can seek support if they feel unsafe on public transport.
- Develop a map of safe sensory spaces to go when you are feeling overwhelmed and a neurodivergent community café.
- Services supporting people with domestic violence have knowledge and training to support, and make inclusive adjustments for, autistic and otherwise neurodivergent people as part of a trauma informed approach.
- The Autism Partnership Board work with local events, including Brighton and Hove Pride and Trans Pride, around how they can be more accessible to neurodivergent people. The Autism Partnership Board promote Autistic Pride.

Actions – Housing

We will make these things happen over the next 5 years:



- Housing teams, including the repairs and maintenance service, council housing staff, homeless prevention and housing providers, have training about autism and appropriate policies on how to make inclusive adjustments to support autistic people.
- Guidelines for new housing developments consider neurodivergent accessibility within their accessibility framework.
- Housing forms are accessible and there is clear and accessible information and advice on how to access housing support.
- There is accessible supported accommodation for autistic and otherwise neurodivergent people.
- Autistic people (whether they have a diagnosis or not) are recognised as a potentially vulnerable group in relation to housing. This is included within reviews of the housing strategy and allocations policy, discretionary housing payments and within homeless prevention.
- Occupational therapists have the skills to make recommendations about housing and environments that meets peoples' sensory needs.
- There is specialist support for autistic people to manage tenancies within the private rental sector and match people with housing that meets their needs.
- Raise the issue of autistic people receiving housing benefit under the age of 35 needing to share with others with the Local Government Association.

Actions – Mental health

We will make these things happen over the next 5 years:



- Primary and secondary mental health staff have training regarding how to support autistic people. This includes consideration of how being autistic might impact your experience of mental health and mental health interventions; and covers: autistic burnout, different experiences of medication and hormonal changes including menopause, and the impact of masking, sensory differences and intersectional autistic experiences. Staff have training on how to make inclusive adjustments.



- Mental health support staff (working both inside and outside of hospitals) are trained in how to support autistic people in neuro-affirmative ways and how to minimise restraint and restrictive practices.
- Mental health professionals and GPs receive mandatory training on autism. This includes: autism and gender diversity, the high suicide risk experienced by autistic people, autistic burnout, commonly occurring physical and mental health conditions, conditions that autistic people are commonly misdiagnosed with, and making inclusive adjustments. As a result, these professionals are proactive in referring people for autism assessments.



- Local universities co-produce a review about how they can better support the mental health and wellbeing of autistic students. This should include considering the accessibility of academic and communal environments.
- Mental health crisis services and helplines have training on working with autistic people, trans-inclusive practice, and introduce ways of seeking support in a crisis that are not based on using the phone.
- Services adapt mental health interventions so they are accessible and appropriate for autistic people and people who may be autistic.





- Mental health services are clear about their eligibility criteria including circumstances where they will and will not support autistic people. Data is collected regarding when mental health services decline to work with autistic people and when autistic people are discharged from services due to a lack of accessible provision.
- Services promote and use access needs plans based on the SPACE framework to enable inclusive adjustments (Doherty *et al.*, 2023). Services are flexible to meet people in the way that works for them.
- Therapeutic interventions other than cognitive behavioural therapy (CBT) are available and adapted to that take account of different communication styles. Adjustments may include an increase in the number of sessions. If an autistic person undergoes CBT it is adjusted and delivered by a professional that understands neurodivergence.
- There is a clear process if an individual is misdiagnosed with a mental health condition including how this will be addressed in their medical records. There is trauma-informed support available for people who have been misdiagnosed with a mental health condition, or have been refused treatment for mental health conditions, due to their autism
- Data is collected, where possible, regarding the number of autistic and neurodivergent people who die by suicide and autistic people are explicitly identified as high-risk groups in suicide prevention policy and clinical guidelines.
- Establishing a physical safe place that people can go in crisis that is not Accident and Emergency. Staff are trained to support autistic people and the space is accessible.
- There are community based mental health support services for autistic people experiencing mental health issues and/or autistic burnout.

Actions – Physical health

We will make these things happen over the next 5 years:



- When developing new clinical environments, the sensory needs of neurodivergent people are considered within equality impact assessments. Existing hospitals and clinical environments to explore innovative and creative ways of making environments more accessible.



- Co-produce a review with the autism partnership board of the environment and how people are supported at Accident and Emergency, so it is more accessible for autistic and otherwise neurodivergent people.

- Explore expansion of the brain and body clinic (bendy bodies) so it can be based on need rather than diagnosis and involvement with particular services.

- Guidelines and best practice for annual health checks for autistic people are developed in partnership with the Autism Partnership Board

- There are autism healthcare co-ordinators within primary care networks to support autistic people to access healthcare, take a holistic view of autistic healthcare and make appropriate referrals where necessary.

- Inclusive adjustments and access needs plans are proactively offered to autistic patients, particularly in unfamiliar environments and inpatient settings and are recorded via the reasonable adjustments digital flag.

- There are inclusive adjustments and clear and realistic communication in relation to expected waiting times and periods of uncertainty.





- Services that bulk buy items – such as continence aids – can make inclusive adjustments for people with sensory needs.
- The Sussex Gender Identity service is accessible to autistic people and assessment pathways for autistic people are clear and transparent.
- Primary and secondary healthcare staff and dental practices have training regarding how to make inclusive adjustments for autistic people. This includes consideration of how being autistic might impact your experience of physical health, tests and interventions – such as autistic burnout (how this presents and how it should be treated differently to mental illness), different experiences of pain, food and hydration, medication and hormonal changes including menopause, and the impact of masking, interoception and intersectional autistic experiences of discrimination.
- The Autism Partnership Board develop guidelines for a Neurodivergent friendly GP surgery award.
- There is an autism lead in PALS (the Patient Advice and Liaison Service) and accessible support if you complain.
- There are specialist staff within hospitals to support the inclusive adjustments needed to enable autistic people to access hospitals and clinics.
- Substance misuse services have the knowledge and training to support, and make inclusive adjustments for, autistic, and otherwise neurodivergent people.
- There is access to neurodivergent exercise sessions and inclusive sports groups.
- Services to support healthy eating and diabetes can deliver support adapted for autistic people that takes into account common differences that autistic people experience in relation to food and diet.

Actions – Social care

We will make these things happen over the next 5 years:



- Development of an integrated health and social care team to support autistic people whose needs are not suitably met by other services. Including staff such as social workers, occupational therapists, speech and language therapists, physiotherapists, psychologists, housing link workers and nurses. Autistic and otherwise neurodivergent people should be encouraged to apply for these roles.



- Clear and co-produced guidelines and pathways to support autistic young people without a learning disability and their families and carers in the transition between Childrens' and Adult Services with an emphasis on transition planning as early as possible.

- Co-produce a review with the autism partnership board of the social care financial assessment process including inclusive adjustments, information and advice, disability related expenses and updates to practice in line with recent case law.

- Co-produce a review of the accessibility of the Care Act assessment process for autistic and otherwise neurodivergent people. This review will include and improve: information and advice and how the screening and triage process considers neurodivergent needs and communication differences.



- Social care staff in both Childrens' services and Adult Social Care have up to date training that enables them to support a wide and diverse range of autistic people appropriately. This should include: how to support inclusive adjustments and respect autistic culture, communication and values, autistic burnout, inertia and interoception, co-presentations and autistic profiles including PDA and hyperempathy.



- Social care occupational therapists can use an enablement approach where it is identified and agreed with the individual that a short term intervention will help them develop skills and coping strategies based on their personal goals and preferences (as seen in Bushell *et al.*, 2017).



- All social care support providers have the knowledge and skills to support autistic people. These knowledge and skills will enable them to recognise where these skills will be useful even where someone does not have a formal diagnosis or does not identify as an autistic person.



- Develop specialist social care service providers that can support autistic people, including those with mental and physical health needs. Autistic people are involved in choosing which providers are on the Council's framework. Service providers provide support with behaviours that challenge using a neuro-affirmative, trauma-informed and person-centred approach.

- Develop accessible family and relationship therapy for autistic adults living in environments with other people to prevent relationship breakdown. This will take into account potential cultural sensitivities associated with supporting people from culturally and ethnically diverse communities.

- Inclusive adjustments are made to support and assessments with autistic parents. Advocacy is available for neurodivergent parents who need support to participate fully and effectively in child protection proceedings.



- A review co-produced with the Autism Partnership Board about how Childrens' services can work with autistic parents in neuro-affirmative, creative and flexible ways. This will include and improve: listening and learning from lived experience, parent carer assessments, information and advice, organisational culture, and pathways for support including links with Care Act assessments with disabled parents

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Actions - Neurodevelopmental assessment and support

We will make these things happen over the next 5 years:



- Development of peer support around topics such as: understanding neurodivergent identity, neuro-affirmative life skills, understanding autistic burnout and masking, sensory needs, how to assert needs for reasonable adjustments, interoception and identifying emotions, menopause and perimenopause and parenting.



- Increased access to assessment to help people understand their autistic strengths and needs.
- Development of a co-ordinated point of access in order to give information and advice and signpost to services. This service should be led and developed by neurodivergent people. This service will develop relationships with existing ethnically and culturally diverse community groups, media outlets and platforms to help expand the opportunities for people to access support.



- Staff across services are proactive in identifying unpaid carers and signposting them to support.
- Statutory and voluntary sector support services build relationships with existing culturally and ethnically diverse community groups to ensure there is a consistent, comprehensive, and broad approach to identifying and addressing cultural sensitivities in service provision.



- Consideration of how autistic parents can be prioritised (particularly those involved with Childrens' Services) for neurodevelopmental assessment and support.
- Clear information about the steps of accessing support and/or assessment, and what is involved available online. Exploration of how people can be supported whilst they are waiting for services.