

*“Help us develop the
right support and care
services for people living
in Hertfordshire”*

Market Position Statement for

**Adults with
Asperger’s and High Functioning Autism
2017/18**

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1. The market that we wish to facilitate

This market position statement has been titled Adults with Asperger's and High Functioning Autism 2017/18. However to be inclusive of all autism spectrum conditions on the basis of need, this Market Position Statement will refer to all adults with an autism spectrum condition without a learning disability. For adults with a learning disability please see the Market Position Statement for Learning Disabilities.

We want to encourage and engage with providers to consider ways in which they can effectively support people with autism spectrum conditions without a learning disability and their families and carers. This includes:

Focus on Early Help and Support	<ul style="list-style-type: none">•Developing appropriate services for adults with autism to meet identified needs and priorities•Developing a clear, consistent pathway for diagnosis in every area, which is followed by the offer of a personalised needs assessment•Improving on physical and mental wellbeing
Increase development of community activities	<ul style="list-style-type: none">•Promoting group support across the county•Providing therapeutic sessions•Providing rehabilitation services
Accessing Financial Information	<ul style="list-style-type: none">•People understand about what they are buying e.g support hours•That the service is best value for the person the local authority and NHS fund
Empowering People	<ul style="list-style-type: none">•People with autism spectrum conditions experience less stigma and discrimination•Helping adults with autism into work•Improving access to the services and support which adults with autism need to live independently within the community

2.0 What is an Autism Spectrum Condition?

Autism is a lifelong developmental disability that affects how people perceive the world and interact with others. Autistic people see, hear and feel the world differently to other people. If you are autistic, you are autistic for life; autism is not an illness or disease and cannot be 'cured'. Often people feel being autistic is a fundamental aspect of their identity.

Autism is a spectrum condition. All autistic people share certain difficulties, but being autistic will affect them in different ways. Some autistic people also have learning disabilities, mental health issues or other conditions, meaning people need different

levels of support. All people on the autism spectrum learn and develop. With the right sort of support, all can be helped to live a more fulfilling life of their own choosing. Autism, therefore, can be associated with severe disability necessitating coordinated health, education and social care approach, as well as with individuals who do not require ongoing or fulltime support but who may need only occasional or episodic support at certain times (based on National Autistic Society definition).

Hertfordshire County Council and partners have set up an All Age Autism Partnership Board, which will provide a clear framework for the development of services for all ages with autism spectrum conditions including 'pathways' for Children's services, Older people's services and Health partners. The All Age Autism Partnership Board has a strong commitment to partnership working to improve the support provided to all people living with autism in Hertfordshire to enable them to realise their potential at all stages of their lives. There are seven key strategic objectives which are being led by the Board and the relevant sub groups of the Board, these are;

- Strategic Objective 1: Increasing awareness and understanding of autism.
- Strategic Objective 2: Developing clear and consistent pathways for diagnosis, and for assessment of needs, including offers of support: the right support at the right time.
- Strategic Objective 3: Improving access to community, mainstream and specialist services and support for health and social care: the right support at the right time.
- Strategic Objective 4: Helping people with autism in Education, Transition to adulthood, Training and Work: Developing skills and independence and working to the best of my ability.
- Strategic Objective 5: Being an equal part of the local community: Social Inclusion, Housing, keeping safe.
- Strategic Objective 6: Involving and supporting carers and families of people with autism.
- Strategic Objective 7: Improving the way services for adults and children with autism are planned, prioritised, commissioned and monitored.

To date the Board have developed a governance structure and the relevant sub groups are now developing services to deliver on each of the above objectives.

For further details on Hertfordshire's Autism Strategy please follow this link;

<http://www.hertfordshire.gov.uk/docs/pdf/h/haaapbexecstrategy.pdf>

2.1 Prevalence and Population

Information on the numbers of people in Hertfordshire with autism spectrum conditions is limited. We know that national studies suggest that approximately 1% of the population have autism spectrum conditions. The national office for statistics has a population figure of 1,166,300 in Hertfordshire in 2015; this is approximately 11,663 people living with autism spectrum conditions in Hertfordshire. For further details on the population, wellbeing and health of people with autism spectrum conditions please refer to Hertfordshire County Council's Joint Strategic Needs Assessment, which outlines what we know about the differing health, and care needs of the people of Hertfordshire; follow the link for Autism Needs Assessment here: <http://jsna.herts.gov.uk/top/discondis/autism/>

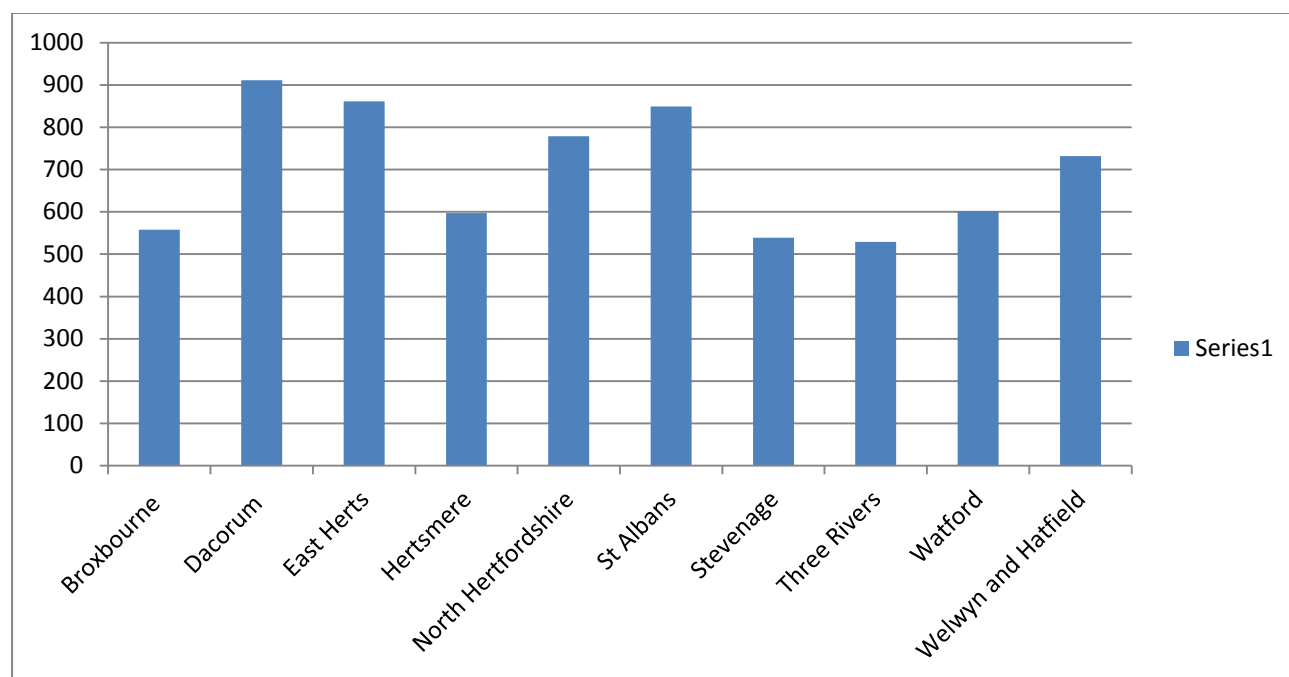
2.2 People aged 18-64 predicted to have autistic spectrum conditions, by age and gender, projected to 2030

The estimated prevalence of autistic spectrum conditions in adults for Hertfordshire in 2015 is 6,958. This is based on information from Oxford Brookes University's PANSI system (www.pansi.org.uk). Approximately 880 are aged 18 to 24 years, and these individuals may require access to transition services as they leave full-time education and contemplate the opportunities of adult life including training, higher education and employment. There may be between 1,277 people with autism who are approaching pensionable age and may also be transitioning from work to retirement.

Autism spectrum conditions - all people	2014	2015	2020	2025	2030
Show by gender					
People aged 18-24 predicted to have autism spectrum conditions	890	880	827	837	948
People aged 25-34 predicted to have autism spectrum conditions	1,477	1,488	1,562	1,542	1,479
People aged 35-44 predicted to have autism spectrum conditions	1,606	1,616	1,658	1,763	1,840
People aged 45-54 predicted to have autism spectrum conditions	1,688	1,697	1,665	1,633	1,693
People aged 55-64 predicted to have autism spectrum conditions	1,255	1,277	1,464	1,578	1,558
Total population aged 18-64 predicted to have autism spectrum conditions	6,915	6,958	7,175	7,352	7,518

2.3 Autism Spectrum Conditions - Prevalence by District

Number of People with Autism Spectrum Conditions by District in Hertfordshire 2015



3.0 What we do currently in Hertfordshire

A range of diagnostic and support services are provided for adults and for family carers, they are:

- Adults with autism without a learning disability have been supported by both the learning disability services and adult mental health service. In 2013, an Asperger's specific social care team was set up by Hertfordshire County Council. The Health and Community Service's 'Work Solutions' Team also currently provides advice, information & guidance supporting people to find open paid employment.
- From April 2016 a new team providing social care provision for 0-25 years is available for adults in transition.
- Health and Community Services (HCS), with the National Autistic Society (NAS), have developed a number of social groups for adults with High Functioning Autism across the County which have enabled vulnerable adults to meet and socialise in the local community.
- HCS has also worked closely with NAS since 2002, an organisation that is composed of family members and carers of people on the spectrum, who offer an advice line and sign-posting service for families and carers and have contributed significantly to planning and improving services.
- NAS in Hertfordshire also provide a range of community support services as well as information and advice.

- Hertfordshire Partnership NHS University Foundation Trust (HPFT) provides a diagnostic service for children and a specialist assessment service for some adults who may need a diagnostic service and relevant mental health services.
- Over 800 staff from all professions, in the NHS and social care, parents and carers and staff from the private and voluntary sector have received training in autism awareness. A one day awareness course has also been developed and is provided to all HCS staff as part of their induction, giving Hertfordshire a high level of trained staff with an understanding of autism.

Changes to services will be led through the all age autism board and the Local Implementation Groups of the CCG's. They will consider the whole range of support including support available through schools, children's services, adult social care, mental health services and elsewhere.

4. What we currently know about the impact of autism spectrum conditions in adults without a learning disability.

Autism is linked to poor mental and emotional health and people with autism are vulnerable to problems such as anxiety and depression, particularly in late adolescence and early adult life and severe cases of autism can limit an individual's ability to work or find employment due to the level of support needed. Families can experience significant stress and we know that housing is a very significant issue, especially general needs housing where there are currently insufficient housing options for people with autism spectrum conditions without a learning disability. The long term nature of and variation in severity of the impact that autism can have on a person means that accommodation needs for people with autism spectrum conditions are not directly comparable with people with other needs for care or support.

People with autism spectrum conditions and their families and carers have told us what they need including, a trained and skilled workforce, services that offer continuity and consistency of care, avoiding a high turnover in staff and an efficient and accessible diagnostic service. They consistently highlight the needs around housing, employment, meaningful day time opportunities, the aging carer population and more recently, the lack of seamlessness between children and adults.

5. Adult Social Care Spend

The Asperger's Social Care team is part of Hertfordshire county council pooled budget; this is contributed to by both health and social care funding. The current funding for the team is £4,050,000. This includes;

- Assessment & Care Management
- Community Services including Day-care - Spot Purchasing, Homecare and Direct Payments
- Community Services Total Long Stay Nursing / Residential Supported Living

- Residential Care

5.1 All Age Personalisation, Integrated Health and Social Care Budgets

Further work is being undertaken across both CCGs and Hertfordshire County Council to review personal health and social care budgets to form an integrated budget to support people to meet their needs.

5.2 Housing Related Support:

Just over £1million is allocated to Housing Related Support in 2016/17 to provide support to people who have a mental health need and this allocation includes people with autism spectrum conditions, to find accommodation and to help them cope in maintaining their accommodation.

The Asperger's social care team support people in finding placements, either short term residential or more often supported living placements. For the last three years the number of people with autism spectrum conditions and the service they receive from the Asperger's social care team including housing support have received supported housing placements is detailed below;

Type of service provision	Count of Clients with Active Services in Period		
	2014 - 2015	2015 - 2016	2016 - 2017
Care and support plan	0	0	3
Community Support	3	23	32
Day Care/Day Opportunities	9	23	30
Direct Payment	10	24	61
Homecare	1	3	3
Long Stay	1	5	8
Outreach	4	8	12
Short stay	0	1	1
Supported Living	7	39	43
Transport	0	1	1

The caveat for this information is that it is a count per year for placements and service and does not differentiate between new and continued social care support and placements. From this therefore you can estimate that between 39 and 43 supported living placements have been required per year. The increase per year is 4 placements. The number of placements in 2014 – 2015 where only those recorded in the year when the team was in mobilisation and not all service users where transferred.

6. Future Commissioning Intentions & Development Opportunities

There are recognised gaps in the provision of services for people with autism spectrum conditions in Hertfordshire and we encourage providers to develop services that meet people's needs and help them to be as independent as possible in their communities, this includes:

6.1 Develop services to support people with autism spectrum conditions

Immediate / Short Term Key Priorities include;

- Develop integrated health and social care diagnostic services jointly with needs assessments and immediate post diagnostic support pathways for Children and Young People and adults in and, working alongside Clinical Commissioning Groups.
- To work with current providers to ensure crisis support pathways for service users and carers are identified in line with the priorities of the crisis care concordat.
- To work with probation, the police and courts, to ensure they have a better understanding of people with autism and to support adults with autism who may come into contact with the criminal justice system.
- Investment by health and social care in training and development in new ways of working in order to increase awareness and understanding of autism among frontline professionals.
- Support and promote employment pathway for people with autism spectrum conditions.
- To continue to work with parents and carers and ensure their knowledge of their son or daughter is taken in to account when looking at all aspects of their autism, including diagnosis, linking with the carer's strategy and MPS.
- To work towards groups of knowledgeable professionals in each of the key services that support people with autism and play a role in steering autism services.

Long Term Priorities

- Develop an enhanced brokerage service; to evaluate effectiveness and use the intelligence gained from brokerage services to be clearer about future commissioning.
- Supporting provider forums for organisations that offer services to people with autism spectrum conditions.
- To begin to develop joint health, housing and social care personal budgets.
- To develop a further autism training strategy over the next four years, that trains to differing levels, from basic awareness to a more advanced level of understanding.
- Work in partnership with NHS organisations and Children's Social Care teams to share data for all people with autism spectrum conditions.

- Working closely with our partners to develop employment opportunities for people within the county.
- Preventing provider failure by understanding your business and financial imperatives better.

6.2 Future development and better housing options for people with autism spectrum conditions

Immediate / Short Term Key Priorities

- To work with our housing providers and district councils to stimulate the market to encourage owner occupier, home ownership and alternative housing options like individual flats.
- To commission a county wide crisis accommodation service.
- To work directly with colleagues from property teams in HCC and utilise our internal housing stock in order to future proof properties.

Long Term Key Priorities

- Work with the private rented sector to secure affordable and sustainable tenancies for people with autism spectrum conditions without a learning disability.
- To work with housing providers and have a seamless void process to enable efficient and timely allocation, which matches the needs of clients.
- To work in partnership with planners to design future projects, this includes the availability of more supported living accommodation.

6.3 Promoting innovation and better outcomes

Immediate / Short Term Key Priorities

- Developing outcomes focussed and co-produced service specification for new services where that is appropriate.
- Promoting and improving on healthy eating, supporting and reducing their feelings of social isolation, and improving self-worth. Making sure there is access and provision for people with autism spectrum conditions to have their voice heard.
- Increase the use of integrated personal budgets to allow people to purchase services via direct payments for example buddying or mentoring services including services where people are expert by experience to support people with autism spectrum conditions.
- Developing family support groups across all ages.

Long Term Key Priorities

- Development of day and leisure time activities.
- To provide a range of day time opportunities for people with autism with the use of personal assistants who can provide a variety of options.

- Auditing practice and getting feedback from service users and carers.
- Use and expand further education colleges, training and education opportunities that lead to meaningful employment.

We are seeking innovation from the market in how we design and deliver services. We also recognise, in the spirit of localism, that services may look different across parts of Hertfordshire.

We will work to Think Local Act Personal Principles¹ which ensure people have greater independence and choice enabling enhanced wellbeing within stronger and more resilient communities.

7.0 Case Examples

Client A presented to homeless shelter in St Albans, diagnosed with Asperger syndrome, interviewed and universal assessment undertaken, low level support required to enable him to progress, found flat and employment in Stevenage, 2 hour care package per week, now reduced to zero, success story. In this case there was a small Personal Budget to pay for 2 hours support per week (approx. £32) for a three month period.

Client B diagnosed with Asperger syndrome, ADHD and Mental Health issues, came to attention of team after transfer from HPFT, initial visits had to be undertaken by two workers as service users very volatile, had presented in an aggressive manner previously. Complex case with diagnosis varying from mental health issues and his Asperger and ADHD, this had led to conflicts with neighbours and other members of the public. Took long time to build rapport with new workers, preferred contact via text messages, however, this led to issues with text being of a very concerning nature. Joined work with HPFT and Asperger team enabled a joined up approach and positive results for him. Regular contact still being maintained and further work to be undertaken regarding anger management, relationships and social integration, but joint work had meant input and service requirements have reduced. In this case there was a personal budget for £125 per week, some of which was used for private therapies and courses dealing with anger management, which has been for a long term period.

Both examples show the importance of personal support that can be provided to assist the service user. One-to-one personal support like this can be provided by a range of voluntary sector organisations and which can be funded using Personal Budgets.

¹ http://www.thinklocalactpersonal.org.uk/_library/Resources/Personalisation/TLAP/MakingItReal.pdf

8.0 Personalisation

Hertfordshire County Council is committed to ensuring that vulnerable people living with autism spectrum conditions have choice and control over the care and support they need. We want providers to apply the principles of personalisation and develop innovative solutions in supporting people, ensuring their services are accessible, have expertise, are informed, flexible, caring and understanding in supporting an individual.

9.0 Physical Health Matters

We recognise that people with autism spectrum conditions may need assistance accessing health care from primary care services (getting and attending GP appointments, help getting, understanding and taking medications) and hospital visits or hospital admissions. This also includes support to access community health resources such as community dentistry, chiropody, physiotherapy and OT support.

We would like service providers to consider the development of hybrid workers who could deliver both social and health care which is particularly relevant for individuals who have a long term medical condition, where workers need to be able to support the individual manage all their health and social care needs.

10.0 Personal Support

Personal support services are needed to ensure individuals can successfully organise their daily lives, such as clothes washing, wearing appropriate clothes, and keeping safe at home and support people to look and apply for, (help with completing application forms / use computers etc.) and retain jobs (ensuring good time-keeping etc.).

11.0 Crisis Support

We want to develop appropriate and effective services for people who are in a crisis. These services would offer practical help and support for people in crisis, to speedily resolve the immediate issues and prevent hospital admission or the need for other high expense forms of intervention. Support would cover aspects such as housing, financial issues and benefits advice, drug or alcohol dependency, relationships, legal issues, dealing with employers.

There is a need for support groups and other self-help resources, such as online social networking with levels of appropriate professional support for guidance to help sustain them. Self-sustaining and self-led groups of peers should be developed, where people can learn about different services and help run services according to people's interests and needs.

Further Information

For further details of this market position statement please contact the Integrated Health Care Commissioning Team at joint.commissioning@hertfordshire.gov.uk

Equality Impact Assessment (EqIA)

STEP 1: Responsibility and involvement

Title of proposal/ project/strategy/ procurement/policy	Adults with Autism Spectrum Condition- Market Position Statement	Head of Service or Business Manager	Simon Pattison
Names of those involved in completing the EqIA:	Emma Dwyer Matthew Peirce	Lead officer contact details:	Emma Dwyer/ Simon Pattison
Date completed:	01/03/2017	Review date:	18 months

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

Proposal objectives: – what you want to achieve – intended outcomes – purpose and need	<p>We want to encourage and engage with providers to consider ways in which they can effectively support people with Aspergers /High Functioning Autism and their families and carers. (Aspergers / High Functioning Autism will be replaced throughout this document as Adults with Autism Spectrum Condition with the agreement with the decision from the All Age Autism Board).. This includes:</p> <p>Focus on Prevention</p> <ul style="list-style-type: none"> • Developing appropriate services for adults with autism to meet identified needs and priorities • Developing a clear, consistent pathway for diagnosis in every area, which is followed by the offer of a personalised needs assessment • Improving on physical and mental wellbeing <p>Increase development of community activities</p> <ul style="list-style-type: none"> • Promoting group support across the county • Providing therapeutic sessions • Providing rehabilitation services <p>Accessing Financial Information</p> <ul style="list-style-type: none"> • People understand about what they are buying e.g. support hours • That the service is best value for the person the local authority and NHS provide or arrange <p>Empowering People</p> <ul style="list-style-type: none"> • People with an Autism Spectrum Condition experience less stigma and discrimination • Helping adults with autism into work • Improving access to the services and support which adults with autism need to live independently within the community <p>As a result of the Market Position Statement (MPS), Hertfordshire wishes to facilitate a thriving marketplace for Adults with Autism Spectrum Condition to exercise control over their recovery, through use of personal budgets and direct</p>
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Equality Impact Assessment (EqIA)

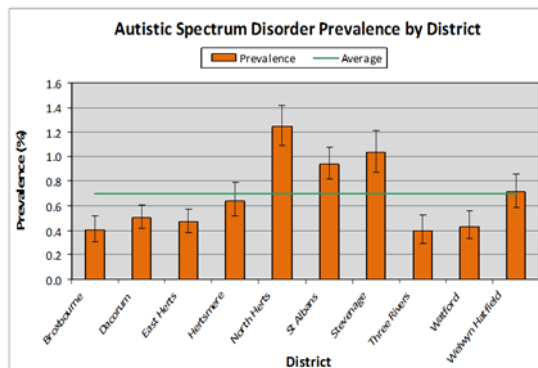
	<p>payments.</p> <p>The MPS therefore highlights a range of strategic objectives as well as detail as to what is needed in terms of the quality of services, providing market intelligence to new and existing providers. The MPS aims to assist providers, in line with the Care Act (2014), to have a clear understanding of what is needed in terms of care and accommodation services to better meet the needs of Adults with Autism Spectrum Condition living in Hertfordshire. It also aims to ensure its duties with regards to market shaping and provider failure are met as outlined in the Care Act.</p>
<p>Stakeholders: Who will be affected: the public, partners, staff, service users, local Member etc</p>	<ul style="list-style-type: none"> • Current providers of Adults with Autism Spectrum Condition services in Hertfordshire • Health and social care providers who are interested in developing services in Adults with Autism Spectrum Condition • Service users and Carers • Hertfordshire's citizens, with Adults with Autism Spectrum Condition • Hertfordshire County Council • Hertfordshire Partnership University NHS Foundation Trust

STEP 3: Available data and monitoring information

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Equality Impact Assessment (EqIA)

2,800 are children or young people (ages 0-19 years), and 5,300 to 8,100 are adults (20+ years). Approximately 450 to 690 are ages 15-19 years, and there may be between 400 and 600 individuals with autism who are approaching pensionable age.



Ethnicity

81% of Hertfordshire's population is White British which is similar to England, but the proportions of other ethnic groups vary considerably between districts. This has increased by 8% since 2001.

Watford, Welwyn Hatfield and Hertsmere have some of the highest proportions of people from other ethnic groups; there are also relatively high proportions of "White Other" in Three Rivers, Stevenage and Broxbourne (i.e. non UK European Union).

In Broxbourne, Stevenage, Welwyn Hatfield, Hertsmere and Watford, over 2% of the population is African; St. Albans district has the highest proportion of Bangladeshi people in Hertfordshire (1.9%).

In 2015/16, 74% of hate crimes reported to the Police in Hertfordshire were due to a person's perceived race or ethnic background. On average 100 such crimes are committed in Hertfordshire each month with the highest district rate being in Watford (22 per month)

Almost 150,000 people in Hertfordshire (13%) were born outside of the UK, with

National evidence suggests that people from BME communities are often mis-represented in Autism Spectrum Condition - providers are expected to monitor the number of people using services and ensure that their needs are met in the least restrictive way possible

The proportion of people from minority ethnic groups living in Hertfordshire has increased over the past decade. The JSNA refers to BME school pupils being 20% less likely to be recorded with a primary needs of Autism Spectrum Condition compared to white pupils. What this may mean for services is under recognised prevalence/identification and under diagnoses issues. Numbers vary considerably across different areas of Hertfordshire and this has implications for the design and delivery of services according to various communication and cultural needs. District tenders will need to represent the cultural diversity of the local community and have capacity to meet a range of cultural, religious and language needs in delivery of care. Hertfordshire do not currently commission cultural specific providers, but providers in all areas will need to ensure its workforce either reflect the needs of the local community or demonstrates cultural competency to deliver effective, compassionate and culturally sensitive care.

Equality Impact Assessment (EqIA)

the highest proportions being in Watford (25%), Welwyn Hatfield (17%) and Hertsmere (17%).

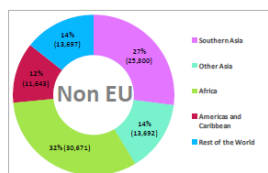
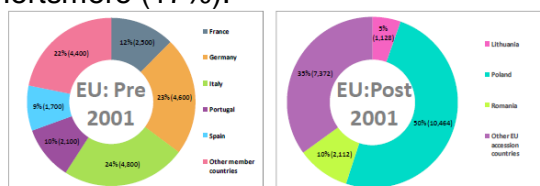


Figure 7 Breakdowns of non uk birth country

Gender

49% of the population is male, compared to 51% female, this differs from the national position. This variance continues into older age.

Transgender

If the rate of 20 per 100,000 people estimated for the UK is applied to Hertfordshire for those aged 15 or over, it would mean there were around 183 transgendered people in the County.

Language

The top three languages in spoken in Hertfordshire are English, Urdu and Polish.

Religion

After Christians, Hindu, Muslim and Jewish are the largest religious groups in Hertfordshire. Those who identified themselves as Christian has fallen by 10%.

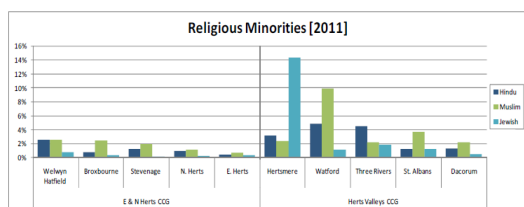


Figure 11 Proportions of principle religious minorities in districts

Sexual Orientation

0.70% of people Living in a couple (civil partnership or co-habiting) are in a same sex relationship compared to the national average of 0.88%

The JSNA does refer to significantly more male school pupils receiving support for autism and suggests males more likely to develop ASCs than females.

Transgendered people would be considered at greater risk of mental health problems, particularly anxiety and depression, as a result of social stigma and bullying.

No meaningful local data is held on the languages spoken by adults with Autism Spectrum Conditions.

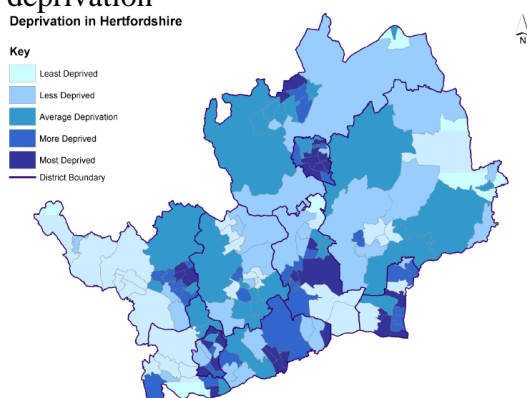
No meaningful local data is held on the religion practiced by adults with Autism Spectrum Conditions.

No meaningful local data is held on the sexual orientation of people with Autism Spectrum Conditions. However, adults on the spectrum who are lesbian, gay or bisexual may face additional barriers to accessing support due to

Equality Impact Assessment (EqIA)

Deprivation

Hertfordshire as a whole is one of the most prosperous areas of the country, Despite its overall prosperity there are significant areas of deprivation



Disability and Long Term Conditions

Over 68,000 people in Hertfordshire have a disability. From this group 23,000 people have a severe physical disability, 26,000 have a learning disability and 13,000 have dementia.

In 2012 the adult population of Hertfordshire with a learning disability was just under 20,600. Over 50% of these people were above the age of 45 and 32% over 55.

By 2020, the percentage of people with a learning disability and over 85 is expected to grow twice as fast as any other group. Over the next seven years there is expected to be a significant increase in the number of people with a moderate or severe LD. People over 55 years of age will account for 18% in this increase and those over 85 increasing by 36%.

Rurality

notably societal homophobia and a lack of specialist LGB services. Whilst current service providers have equal opportunities policies relating to support, access for lesbian, gay and bisexual individuals appears limited. In addition to this, in Hertfordshire the majority of services do not routinely monitor service take up by sexual orientation.

Deprivation is linked to an increased risk of depression and anxiety in particular.

Implications relating to disability may include hypermobility and other related issues.

There are districts in Hertfordshire that present with a major rural landscape and the MPS will ask providers to ensure that services are accessible for people living in these areas.

Equality Impact Assessment (EqIA)

Rural Urban Classification (OA aggregated to District) September 2013							
District	Rural Agg (m2)	Urban Agg (m2)	Total (m2)	Check	Rural Agg %	Urban Agg %	% Check
Broxbourne	1415815	50018958	51434773	OK	2.8%	97.2%	100.0%
Dacorum	131949182	80527460	212476642	OK	62.1%	37.9%	100.0%
East Hertfordshire	420192453	55494595	475687048	OK	88.3%	11.7%	100.0%
Hertsmere	59279889	41880862	101160751	OK	58.6%	41.4%	100.0%
North Hertfordshire	314237310	61137595	375374905	OK	83.7%	16.3%	100.0%
St Albans	83423040	77752704	161175744	OK	51.8%	48.2%	100.0%
Stevenage	0	25963687	25963687	OK	0.0%	100.0%	100.0%
Three Rivers	30484567	58328815	88813382	OK	34.3%	65.7%	100.0%
Watford	0	21425016	21425016	OK	0.0%	100.0%	100.0%
Welwyn Hatfield	70608045	58945704	129553749	OK	54.5%	45.5%	100.0%

The MPS will address this issue by asking providers to consider transport and access for their services.

Transport

HCC's recent consultation on reducing bus services will have an impact on older people who are dependent on public transport accessing services.

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Protected characteristic	<u>Potential for differential impact</u> (positive or negative)	What reasonable mitigations can you propose?
Age	No negative or differential impact currently identified as there is a lack of robust data on the age profile of adults with Autism Spectrum Conditions. The MPS reflects the Council's commitment to delivering person centred services, which offer choice and control – this will be reflected across the services for all ages.	Service providers will be required to demonstrate that they are providing choice and control in meeting the individual's needs and this will be made clear in the MPS. It will also clearly set out some of the specialist or additional support that may be required for different age groups.
Disability	People with disabilities can be at greater risk of mental ill health due to associated social, health and financial factors. Conversely, adults with Autism Spectrum Conditions can also experience disability, although there is currently no data available on the prevalence of physical and learning disabilities among adults with autism. It is not therefore possible to identify whether there is a differential impact due to disability.	Providers must be in a position to support people in a flexible and holistic way. The MPS will encourage providers to work in partnership to achieve this and meet the range of needs adults with autism may have. HCC will offer advice and guidance to providers in reviewing their provision and services and where these need to be changed, HCC can support with this.
Race	Since 2001 the number of people in Hertfordshire identifying themselves with an	The service specification for any services will require training to be given to staff to ensure they are

Equality Impact Assessment (EqIA)

Protected characteristic	<u>Potential for differential impact</u> (positive or negative)	What reasonable mitigations can you propose?
	ethnic group which is not white has increased by 8%. Providers currently are not always culturally aware and the MPS will expect providers to meet these needs.	culturally aware and able to meet service users needs, for example, if proficiency in English is poor and/or if there is stigma around Autism Spectrum Conditions and related conditions in particular cultures..
Gender reassignment	District profiling has not identified the level of this part of the Hertfordshire Community and no service user data is available. The changes proposed in the MPS to increase access to services for adults with autism , both statutory and preventative, are likely to have a beneficial impact	This will continue to be monitored and a action taken if any issues are identified. The minimum data set will include gender reassignment.
Pregnancy and maternity	No meaningful data is held on this protected characteristic so no differential impact currently identified.	This will continue to be monitored and action taken if any issues are identified.
Religion or belief	There is the potential for a differential impact if providers do not provide culturally appropriate support.	The MPS will make it clear to providers that they need to understand and respect the religious beliefs of service users Robust contract monitoring will identify if Service users' needs are not being met
Sex	Minimal impact identified	This will continue to be monitored and any identified action undertaken
Sexual orientation	No meaningful data is held on this protected characteristic so no differential impact currently identified.	This will continue to be monitored and action taken if any issues are identified.
Marriage & civil partnership	No meaningful data is held on this protected characteristic so no differential impact currently identified.	This will continue to be monitored and action taken if any issues are identified.
Carers (by association with any of the above)	The Care Act outlines changes to access to services for carers. As it is likely that carers of adults with autism are likely to be caring for a considerable amount of time compared to some other care groups, there is the potential for a differential impact if the right support is not	Most actions specific to carers are covered in the Carers MPS. However, the Adults with Autism Spectrum Condition MPS will make clear that carers' needs must be taken into account and that supporting carers is everyone's business. This is a key message from the carers strategy and MPS.

Equality Impact Assessment (EqIA)

Protected characteristic	<u>Potential for differential impact</u> (positive or negative)	What reasonable mitigations can you propose?
	provided and they themselves are not supported or involved in the support of the person they care for.	Supporting carers to prepare for a time when they're no longer able to care
Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the guidance for more information on the public sector duties)		
<p>HCC wants providers to give staff appropriate and regular training in order to ensure staff are aware of safeguarding concerns. It is also expected that providers will ensure staff are culturally aware and able to meet the needs of service users whose first language is not English.</p> <p>It is also expected that providers will ensure adults with Autism Spectrum in their services will have access to regular health checks which would include cancer screening and obesity checks.</p> <p>Contractual obligations reflect the work required and contracts are monitored through various mechanisms including</p> <ul style="list-style-type: none"> • Monitoring visits • Dun & Bradstreet alerts • Ongoing contract management 		

Impact Assessment – Staff (where relevant)

Potential for differential impact

The MPS will not significantly change the practical nature of the careworkers role and the support they are required to deliver. However the changes proposed in the MPS could potentially impact upon the culture, standards and expectations of care workers and the way they deliver care. This may be more of an issue for older careworkers, disabled careworkers or careworkers from different ethnic backgrounds, who may require more training and support to transition to new ways of working and to deliver culturally specific care and support to all who are eligible for the service.

What reasonable mitigations can you propose

Contractual obligations reflect the work required and contracts are monitored through various mechanisms including

- Monitoring visits
- D&B alerts
- Contract management

Procurement processes for any new service will also set out clear requirements and expectations of staff delivering services, including training. Commissioners may also need to support providers with identifying and analysing issues with access to the service and what to do if people from particular protected characteristics groups are over or under represented in the service.

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Opportunity to advance equality of opportunity and/or foster good relations

It is expected that providers will treat their care staff appropriately, ensuring that wages are competitive for the local area and that staff have the right support from management within their organisation. We will also expect all staff to have received training in safeguarding and have up to date and appropriate policies in Safeguarding, Whistleblowing and Complaints. These will be checked through monitoring visits by checking training matrix's and policies and where these are not in place providers will be expected to make the required changes, through an action plan which will be followed up on through a follow up monitoring visit.

STEP 5: Gaps identified

Gaps identified Do you need to collect more data/information or carry out consultation ? (A 'How to engage' consultation guide is on Compass). How will you make sure your consultation is accessible to those affected?	Hertfordshire County Council will establish improved information sharing processes with Hertfordshire Partnership NHS Foundation Trust, who hold delegated social care responsibility for people with a mental ill health condition who also have Autism Spectrum Conditions. This will be used to continually develop the MPS and be cross referenced with comments and feedback from service users and carers. Service Providers will also be required to collect better and more comprehensive data on the protected characteristics of service users in order to monitor equality of access and identify any issues.
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STEP 6: Other impacts

Consider if your proposal has the potential (positive and negative) to impact on areas such as health and wellbeing, crime and disorder and community relations. There is more information in the guidance.

STEP 7: Conclusion of your analysis

Select one conclusion of your analysis	Give details
<input type="checkbox"/> No equality impacts identified – No change required to proposal.	
<input type="checkbox"/> Minimal equality impacts identified – Adverse impacts have been identified, but have been objectively justified (provided you do not unlawfully discriminate). – Ensure decision makers consider the cumulative effect of how a number of decisions impact on equality.	
<input checked="" type="checkbox"/> Potential equality impacts identified – Take 'mitigating action' to remove barriers or better advance equality. – Complete the action plan in the next section.	Services will need to monitor the number of adults receiving support for an Autism Spectrum Condition and act on their feedback to ensure they are flexible and offer choice and control. The number of people with needs associated with increasing age, continued austerity measures and social isolation will also need to be monitored. Services will be expected to be aware of and competent at meeting the diverse and changing needs of Adults with

Equality Impact Assessment (EqIA)

Select one conclusion of your analysis	Give details
	Autism Spectrum Condition and their carers, including a better ability to provide culturally appropriate care and support.
<input type="checkbox"/> Major equality impacts identified <ul style="list-style-type: none"> – Stop and remove the policy – The adverse effects are not justified, cannot be mitigated or show unlawful discrimination. – Ensure decision makers understand the equality impact. 	

STEP 8: Action plan

Issue or opportunity identified relating to: <ul style="list-style-type: none"> – Mitigation measures – Further research – Consultation proposal – Monitor and review 	Action proposed	Officer Responsible and target date
Further research	Hold MPS engagement events to capture provider feedback Engagement direct with HPFT Social Care Management Team to discuss their input to MPS (due to delegated responsibility)	Complete via MPS events
Mitigation measure: market shaping to ensure robust marketplace for Adults with Autism Spectrum Conditions	Continued engagement with statutory, community sector and existing services via the Community Wellbeing review	Community Well Being
Mitigation measure: provider failure	Integrated Health and Care Commissioning Team work alongside HPFT to monitor services for Adults with Autism Spectrum Conditions.	All – on going
Mitigation measure: service requirements	<p>Clearly set out in MPS and future service specifications the future direction of services and the need to offer personalised, holistic support</p> <p>Clearly set out in MPS and future service specifications requirements in relation to providing culturally appropriate care and support</p> <p>Monitor and review the data providers collect on the protected characteristics of service users and take action as appropriate</p>	<i>All – on going reported through ASC LIG</i>
Mitigation measure: carers	Cross reference MPS to carers MPS and specific support that carers of people with Autism Spectrum Conditions may require	

Equality Impact Assessment (EqIA)

This EqIA has been reviewed and signed off by:

Head of Service or Business Manager: Simon Pattison

Date: March 2017

DRAFT