



Royal College of Speech and Language Therapists

Autism Strategy and Action Plan
15.03.13

Please find attached the Royal College of Speech and Language Therapists (RCSLT) submission to the above consultation.

Yours sincerely

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Heather Crawford MBE
RCSLT Country Councillor



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

**Autism Strategy
(2013 – 2020)
and
Action Plan
(2013-2015)**

Consultation Questionnaire

RESPONDING TO THE CONSULTATION

The NI government departments are seeking your views on the draft cross-departmental Autism Strategy and Action Plan. Please use this questionnaire to tell us your views on the draft document.

Please send your response, **no later than 15 March 2013**, to:

DHSSPS Autism Strategy Core Team

Room D1
Castle Buildings
Stormont Estate
BELFAST BT4 3SQ

Tel: 028 9052 2153

Fax: 028 9052 2500

E-mail: Autism.Strategy@dhsspsni.gov.uk

Please note that all responses will be treated as public and may be published on the DHSSPS website. If you do not want your response to be used in this way, or if you would prefer for it to be used anonymously, please indicate this when responding (See Statement of Confidentiality and Access to Information Legislation below).

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If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice (section 45) with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this, it would be helpful if you could explain to us why you regard the information you have provided as confidential. If we receive a request for disclosure of the information, we will take full account of your explanation, but we cannot give an assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the DHSSPS.

For further information about confidentiality of responses please contact the Information Commissioner's Office

Information Commissioner's Office Northern Ireland

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Email: ni@ico.gsi.gov.uk

Website: <http://www.informationcommissioner.gov.uk/>

Please tick the box below if you do want your response to be treated as anonymous.

I want my response to be treated as anonymous.

Thank you for completing this questionnaire and providing input to this consultation.

SECTION 1: ABOUT YOU

Consultee Details

Question 1(a):

I am responding as... *(Please tick one option only)*

- A person with autism
- A parent / carer of a person with autism
- A family member of a person with autism
- On behalf of an organisation
- Professional Body

Question 1(b):

Please enter your details below:

| | |
|--------------------------------------|--|
| Name: | Alison McCullough MBE |
| Job Title: <i>(if applicable)</i> | Country Policy Officer |
| Organisation: <i>(if applicable)</i> | Royal College of Speech and Language Therapists (RCSLT) |
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SECTION 2: VISION, VALUES, AIMS AND OBJECTIVES

Question 2:

Do you agree with the vision, values, aim and objectives for the Strategy?
(Please tick one option only)

Yes

No

If no, please explain why and / or let us know how you think these could be improved.

The RCSLT is concerned that there is a general omission regarding reviewing, benchmarking and building upon the work that has already been achieved. The strategy tends to read as if these objectives are entirely new and that little progress has been made over recent years. The RCSLT would therefore like to see the inclusion of an objective to assess and review current practice against these new objectives to ensure that existing best practice models can provide impetus for change where it is required.

SECTION 3: THEMES

The themes of the Strategy have been developed in consideration of some of the articles in the United Nations Convention on the Rights of Persons with Disabilities. They include:

- Awareness
- Accessibility
- Children, Young People and Family
- Independence / Choice and Control
- Transitions
- Employment and Employability
- Accessing Justice
- Being Part of the Community
- Participation and Active Citizenship

Question 3:

Do you agree with all the themes in the Strategy?
(Please tick one option only).

- Yes
 No

If no, please explain why and let us know how you think the themes could be improved.

We generally agree with these strategic priorities but consider that the following addition needs to be included.

Awareness not only of ASD but also of services available.

As identified in the introduction there has been considerable investment in Children's ASD services in recent years. Many good services already exist within the Health Service to support the needs of children with ASD.

Speech and Language Therapy (SLT) has always provided intervention to children and families pre and post diagnosis. The RCSLT believes that there is a general lack of awareness of the range and level of SLT services available. Within community speech and language therapy services there is already provision which addresses;

- core speech and language difficulties,
- significant social-communication impairment with or without an additional learning disability provided by highly skilled specialist SLTs
- Specialist SLT advice on AAC technology within the Communication Advice Centre (CAC), which is part of a UK wide network of communication assessment centres for people with communication disabilities. In Northern Ireland the CAC (an SLT based service) regularly takes referral for clients with ASD.

It is clear that there needs to be better signposting to existing services which have detailed expertise around communication and an acknowledgment of what current services can offer before new services are developed which may overlap with current provision.

In section 2: Existing Service Provision, there is no mention of existing AHP provision which is delivered at local levels in multi-disciplinary and uni-professional contexts. Under section 2.5 there is also no mention of the multi agency support teams across Northern Ireland which provide therapy and training to teachers and schools staff.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

The NI Government Departments are aiming to implement the strategic priorities of the Autism Strategy over a *seven-year period (2013 – 2020)*.

They will aim to achieve the actions and outcomes measures as set out in the initial '*Laying the Foundations*' Action Plan, over a *two-year period (2013 – 2015)*.

A further two Action Plans will be developed to fully deliver the strategic priorities in terms of '*Whole-life Journey*' and '*Holistic Personalised Approach*'.

Question 4(a):

Do you agree with the strategic priorities on *Awareness* for this Strategy? (*Please tick one option only*)

Yes

No

If no, please explain why and let us know how you think these could be improved.

Strategic priority 1.

The RCSLT is concerned that the phrasing of this priority could be clearer and may lead to confusion. We suggest that the following wording is used;

We will work in partnership with all government departments to ensure that they receive autism awareness training to enable them to develop policies and practice which support the public and private sector in the delivery of autism inclusive services.

Communication deficits are a core part of ASD and we therefore believe that a strategic priority should be included which focuses upon raising awareness of the *communication* impairments that people with autism face and the impact that this may have on their ability to access services, gain and maintain employment successfully, ensure independence and choice.

SLTs are uniquely skilled in awareness training and have for many years worked in partnership with internal and external services and community service providers in highlighting the communication needs of people with ASD. SLTs are also the key deliverers of training programmes such as TEACCH and are skilled in offering advice on interventions and communication strategies. The RCSLT is disappointed that there is no mention of the contribution of SLTs in delivering autism awareness training.

We are concerned that there is no action relating to the development of standards of training to be delivered and how training providers will be procured, measured and monitored. The RCSLT would be able to offer specialist advice in the content of training programmes to ensure that it covers all aspects of communication difficulties. Quite often, particularly for those with high functioning autism and no additional learning disabilities, high level communication difficulties are not identified and can result in a detrimental effect on an individual's ability to successfully build personal and professional relationships, and be included fully in society.

There is also a need to ensure that appropriate professional advice is available to respond to queries regarding the use of emerging communication technology such as IPADs. There is increasing evidence that carers and organisations are purchasing devices which may be totally unsuitable for an individual with ASD. SLTs are uniquely skilled in providing information on suitable accessible communication formats.

It is therefore our recommendation that any awareness training programme should include expert advice and input from a specialist SLT.

Question 4(b):

Do you agree with the actions and outcome measures on *Awareness* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

As awareness raising is to be such an important part of the strategy and in reference to our comments above, the RCSLT believe that the following actions should be included:

A training advisory group to be convened to scope and critically evaluate existing awareness raising programmes and make recommendations on the content and standards of training. This group should include representation from the RCSLT and other professional bodies, voluntary and statutory groups.

We also consider that the action plan lacks key performance indicators (KPIs) or measurable outcomes which will make the action plan difficult to monitor and critically evaluate its success.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 5(a):

Do you agree with the strategic priorities on *Accessibility* for this Strategy? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

We agree in part. As discussed previously people with ASD have always had access to SLT pre and post diagnosis. SLT provides a comprehensive and tiered service in a range of settings; home, clinic, school, early years settings, which is flexible to meet the specific needs of the individual.

SLT staff have the opportunity to specialise in addressing the social-communication needs of people with ASD taking account of their learning styles and other challenges such as their sensory difficulties. The RCSLT believes that there needs to be more emphasis placed on sharing this expertise within all environments where the individual functions so that all involved, adopt and maintain the most effective approach to supporting the individual with ASD, which has been based on their individual needs.

On page 30 the first paragraph references the right for people to express themselves including the freedom to 'give and receive' information and ideas through all forms of communication. We feel there should be a stronger emphasis on communication as a 2-way process where a person with autism may require communication support to aid understanding as well as to express him or herself.

All environments should be communication rich environments which support individuals with ASD to function at their optimum level. Only then can they process relevant information, ignore irrelevant information, understand and respond to others as well as be spontaneous, actively participate and express their needs and thoughts. In order for this to be achieved all those involved with the individual at home, school, work etc must have appropriate training.

Regarding the supportive techniques, as well as the use of Alternative and Augmentative Communication (AAC), we feel strongly that SLTs are uniquely qualified to provide the best assessment of a person's communication needs and advise on the most effective and appropriate form of supportive AAC (low or high tech). SLT should be central to providing advice and training on accessible communication environments which includes the use of AAC and the facilitative/enabling techniques used by communicative partners.

With specific regard to the comment that individuals with ASD should have access to all forms of communication including ‘technologies’ we would like to emphasise that Speech and Language Therapy services have been delivering expert AAC assessment to people with communication disabilities over many years within existing SLT services.

The RCSLT would like the strategy to emphasise that communication support needs should be only be assessed by those who have specialist training in language and communication technologies. The strategy should state that SLTs are recognised as having the key role in this area as they have developed these services over many years and have an expert knowledge in communication and the range of technologies available.

On page 30, part of the draft proposal states that everyone involved with a person with more complex communication needs should follow the same consistent approach. This statement is factually incorrect as there is a great deal of diversity in how assessment and implementation of communication strategies should be managed in regard of AAC and communication technologies. The RCSLT would like to see the strategy state that expert assessment and advice from a speech and language therapist should be always be sought in relation to communication supports.

Some emergent services are making communication recommendations without having specialist knowledge of the options available to the client, without detailed education/training in communication, and without specific training or knowledge in the range of appropriate communication strategies.

With regard to accessibility of services, the RCSLT consider that the Six Steps programme by RASDN has already provided an effective mechanism for the dissemination of appropriate information and advice.

We would also like to state our concerns that funding for accessible information should not be limited to people with ASD. Many other larger groups such as those with communication disability or specific language impairments should also be factored into any communication accessibility initiatives.

Recent research from The Better Communication Research Programme, a three year research programme funded by the Department for Education, has shown that pupils with ASD were ‘significantly more likely to attract resources than those with Language Impairment (LI)’. The report states that it ‘also observed differential allocation of resources during English language and literacy lessons where we would particularly expect pupils with LI to be experiencing greater need. The current data suggest that a diagnosis of ASD results in receiving more resources despite the fact that on measures of core language (and in some cases literacy) pupils with LI often exhibit greater difficulty¹.

¹ <https://www.education.gov.uk/publications/RSG/publicationDetail/Page1/DFE-RR247-BCRP9A>

This recent report confirms that an over zealous focus on ASD may be to the detriment of funding for other disabilities that are more prevalent. The recent NI census results² indicated that almost 30,000 individuals in Northern Ireland consider themselves to have a long term condition of a communication difficulty.

It is therefore imperative that where possible any actions or initiatives taken to support those with ASD should also be as inclusive and not exclusive to others with communication difficulties. This approach will ensure the most efficient use of funding. In particular we suggest that accessibility programmes such as those mentioned in the action plan Para 2.2.5 and 2.2.6 focus upon reaching all those with communication difficulties rather than only those with ASD, as communication difficulty is the core common barrier to accessing these services whether an individual has ASD diagnosis or any other disability.

Question 5(b):

Do you agree with the actions and outcome measures on *Accessibility* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

Under Para 2.2.1 Improvements in referral:

- *The RCSLT consider that SLTs should be part of every core ASD diagnostic team for children and adults, as they have the unique skill of making the differential diagnosis of ASD and specific language impairment (SLI).*
- *The RCSLT consider SLTs should be included in mainstream mental health services to support the person with high functioning autism access appropriate intervention and support.*
- *The RCSLT also consider that that there is currently significant inequity of service provision in learning disability services as they currently lack the provision of intensive specialist interventions for those with severe autism.*

² NISRA <http://www.ninis2.nisra.gov.uk/public/pivotgrid.aspx?dataSetVars=ds-2385-lh-37-yn-2011-sk-136-sn-Census%202011-yearfilter-->

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 6(a):

Do you agree with the strategic priority on *Children, Young People and Family* for this Strategy? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

We agree in part. However, we wish to develop the discussion around providing access to education, health and social care services to meet the needs of the children and families. The RCSLT is concerned that there should be a greater emphasis on developing a more cohesive approach from these agencies. Partnership and collaborative working has always been a core recommendation in previous relevant strategies. However, there is still a considerable gap between aspirational and operational evidence of this working in practice.

Clients and families report that they receive different and conflicting information and advice from a wide range of sources e.g. from ASD advisors, teachers, families, commercial suppliers, private providers, SLTs. On page 31 a parent reports 'Inconsistency and changing habits are hard for an autistic person to cope with' and it becomes very confusing for the parents and carers to follow and implement advice. On school entry it is even more difficult for a family to understand the changes in roles and responsibilities of service provision.

In order to address this, the RCSLT propose that joint training in ASD should be mandatory across agencies. In this way all agencies will develop a shared language and baseline knowledge and skills in this area. It would also improve recognition of the individual contributions of professionals and would thereby reduce duplication of services. SLTs currently work across both education and health and could provide a key role in ensuring a consistent message across agencies around the individual communication needs of a person with ASD.

The RCSLT therefore recommend that in 3.1.1 the responsibility of delivery should have joint leadership and not be led by DHSSPS alone. The RCSLT would also like to see an action that joint training should be mandatory across health and education.

Question 6(b):

Do you agree with the action and outcome measures on *Children, Young People and Family* in the Action Plan (2013 – 2015)? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

Re Para 3.1 The RCSLT is concerned that there is no mention of improved services for children and young people with ASD and mental health difficulties. The link between communication difficulties and mental health is well documented. An individual with ASD and social communication difficulties is more likely to be lacking in self esteem and experiencing feelings of isolation than his peers and this can lead to depression.

There has already been UK wide recognition of the SLT's role within MH teams as evidenced in the Royal College of Psychiatrists paper 'Quality teams for Acute MH'. Also in Scotland, SLTs were involved in developing and inputting into 'Choose Life' – a national strategy and action plan for preventing suicide in Scotland.

SLTs also have a key role to play in assessing capacity³. Under the proposed new Mental Capacity Bill a person is not to be treated as unable to make a decision unless *all practicable and appropriate steps* to help him have been taken without success. The SLT will therefore have an important contribution to make in child and adolescent mental health teams to ensure that someone with a communication difficulty has the optimum communication support in making decisions about his/her future mental health care.

The RCSLT recommends that a further action is required in order to support vulnerable young people with ASD and mental health problems. SLTs should be included in CAMH teams to ensure that those young people with ASD have access to appropriate and timely communication support.

As previously stated we are also concerned at the lack of specificity in the defined user/carer outcomes. How will this outcome be measured?

³ SLT roles in assessing decision making ability; (Tippett and Sugarman, 1996; Enderby 1994; Ferguson et al 2010; Diener and Bischof-Rosario, 2004)

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 7(a):

Do you agree with the strategic priority on *Independence, Choice and Control* for this Strategy? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

The RCSLT is concerned that the impact of this action may not have been fully considered in relation to other services. SLTs have already reported an increase in requests for reports for disability living allowance assessment. SLTs are concerned that with the changes in welfare reform they may be increasingly asked to provide supporting statements for housing adaptations such as the need for sensory or therapy rooms. SLTs do not currently charge for writing such reports. Reports can be time consuming and can impact upon caseloads and service provision.

The RCSLT would like to see an action that reviews and monitors the impact of such a proposal on Allied Health and other professionals to ensure that there is consistency in this approach and equity in the support for those with ASD. We are also concerned that whilst some HSC Trusts may support ASD families in this way, other HSC Trusts may not and this may lead to inequities.

Question 7(b):

Do you agree with the action and outcome measure on *Independence, Choice and Control* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

As previously stated we are concerned at the lack of specificity in the defined user/carer outcomes. In particular we believe that there are other actions required to support the delivery of this in an equitable way across NI.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 8(a):

Do you agree with the strategic priority on *Transitions* for this Strategy? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

The RCSLT is pleased to support all initiatives which aim to develop awareness and information for parents, clients and professionals in relation to important transition periods within the ASD individual's life time.

However, we are concerned that members are reporting to us that in some HSC Trusts there is currently no resource to adequately support a person with Learning Disability and ASD to transition from school to adult services. In order to reduce the anxiety associated with such a change for the person with Autism, all services including SLT should be involved six to eight months before the person transitions so that a communication screening programme can be completed and appropriate liaison with previous SLT can occur.

To ease this transition process, communication and behaviour programmes should be set up before the person moves. This also applies to people transitioning from home to supported living, resettlement from long stay hospitals, which if not handled effectively can result in placement breakdown. SLT has always proactively sought to work across disciplines and agencies to provide ASD/Social programmes which are relevant, timely and appropriate to the family's needs at any given time.

In one HSC Trust over the last decade, SLT services have been working as part of an ASD specific multi professional team with education colleagues to develop and provide a timely and accessible transition programme. The programme aims to support both the individual and their families and education staff during key transition points (moving from preschool to primary, from primary to post primary and from post primary to further education/work/supportive environment settings).

The aim of these programmes is in keeping with the core strategy of raising awareness across all areas of life (personal, education, work) in increasing opportunities for individuals to access services in a timely manner by supporting individuals and families in a co-ordinated and planned way.

The RCSLT believes that this strategy provides an opportunity to ensure equity of excellence in transition services and maintains that SLTs have a key role in ensuring transition success for those with significant communication difficulties.

The RCSLT would like to see an action which defines the composition of such transition planning services to ensure that the communication needs at transition are fully included in the plan. SLTs look forward to being included in transition planning in the future.

Again we would like to state that we consider that anyone with a communication difficulty should have equal access to transition planning whether or not they have a diagnosis of ASD.

Question 8(b):

Do you agree with the action and outcome measure on *Transitions* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

As previously stated we are concerned at the lack of specificity in the defined user/carer outcomes.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 9(a):

Do you agree with the strategic priorities on *Employment and Employability* for this Strategy? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

'The most significant act of learning of our early life, perhaps of our whole life is the acquisition of our mother tongue. Once we have language at our disposal we have a key which can unlock many doors' David Crystal⁴

For a young person or adult who fails to develop social use of language effectively, the effects are life altering and will impact upon their ability to access employment. They will be unable to read social situations, social cues, body language, or conform to the rules of social engagement and may appear uncooperative, rude, insulting or aggressive to those around them who do not understand ASD. Studies show that Not being in Education Employment or Training (NEET) for six months is likely to mean that by the age of 21 a young male is five times more likely to have a criminal record.

The RCSLT is aware of much research in this area. Studies have shown that;

- Up to 88% of those Not in Education Training or Employment have speech language and communication needs⁵.
- Young people with learning difficulties and disabilities are twice as likely to be NEET as those without.⁶
- More than a third of these individuals have low level qualifications.
- Young people with low educational qualifications and persistent absentees from school are much more likely to become NEET.

A recent Department for Employment and Learning's Scoping Study 2010⁷ outlines a set of current information available on and action being undertaken (by a range of organisations including Departments, other agencies, the Voluntary and Community sector and local government) in relation to those young people currently not in education, employment or training. However, the identification and assessment of individuals with speech language and communication needs were not considered in this scoping exercise.

⁴ Child Language Teaching and Therapy David Crystal 1986

⁵ Interim results from a PhD in preparation " An Investigation into the Communication Skills of Long-Term Unemployed Young Men", Natalie Elliott

⁶ Department of Communities and Local Government 'Digital Exclusion Profiling of Vulnerable Groups - Young People not in Education, Employment or Training: A Profile'

⁷ A **Scoping Study** of those young people Not in Education .www.delni.gov.uk/scoping-study-young-people-not-in-education

Changes in employment patterns make it more important than ever that an individual with ASD and/or communication difficulty has the right skills to contribute to the workforce. The employability of a person of the 21st century will be defined in terms of the ability to communicate effectively as this is now recognised as the key life skill.

A recent Welsh study⁸ looked at the long-term outcomes for individuals with communication impairments. The aim of the study was to estimate the prevalence of language impairment in a population of long-term unemployed young men aged 18-24 years in Wales. The study assessed expressive and receptive vocabulary in long-term unemployed young men, finding that scores for both measures were below average for all 76 participants. Depending on the criteria used to define language impairment, up to 67% could be identified as having impaired listening vocabulary and up to 64% as having impaired speaking vocabulary.

A further complication for young people with communication difficulties is that employment and training schemes may not be accessible. Evidence shows that employment in the United Kingdom increasingly relies on language and communication skills. Young people with ASD may not possess sufficient language skills and will therefore struggle to access jobs, making them less employable and are more likely to remain as NEET.

The RCSLT is concerned that this section is poor in terms of its actions to deliver this outcome. Actions are required to work with employers and careers staff in enabling them to understand and support individuals with ASD and other communication difficulties. Enabling people with ASD to be aware of the support available is not sufficient to ensure that more people with ASD have access to employment.

In reference to the actions outlined in the document under 6.1.1, it would be useful to document who will be the providers of support in Further Education, Higher Education, Employment and Training and what will the support consist of?.

SLTs can assist careers and further education staff in better understanding the needs of individuals with communication difficulties. A full communication environment assessment is vital if work placements are to succeed. The RCSLT has developed a training package consisting of e-learning and face to face training, delivered by expert speech and language therapists which we would be happy to share.

As NEET is explicitly referenced in the recent Speech Language and Communication Therapy action plan below, speech and language therapy provision and communication support should be integral in any programme of enablement for this group of individuals.

⁸ Interim results from a PhD in preparation " An Investigation into the Communication Skills of Long-Term Unemployed Young Men", Natalie Elliott

Speech Language and Communication Therapy Action Plan DHSSPS NI
(2011/12-2012/13)

| | | | | | |
|---|--|---|--|-----------------------|--|
| 8 | Develop a speech, language and communication care pathway for children and young people who are not in education, training or employment and for Young Offenders | HSCB / PHA in collaboration with education, employment and youth justice organisations / agencies | An agreed understanding of the linkage with the generic care pathway; a nominated lead to promote coordination of care planning, for those with a SLC need | March 2012 and beyond | Improved outcomes for individuals, promotion of social inclusion and enhanced "life chances" |
|---|--|---|--|-----------------------|--|

Question 9(b):

Do you agree with the action and outcome measure on *Employment and Employability* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

- Yes
 No

If no, please explain why and let us know how you think these could be improved

The RCSLT consider that additional actions are required as stated above.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 10(a):

Do you agree with the strategic priority on *Accessing Justice* for this Strategy? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

The RCSLT agree in part. However, we recommend that there should be an overarching action to provide additional support for people with ASD and communication difficulties and other hidden disabilities such as specific language impairment. This will ensure more efficient use of resources and will reduce concerns that other conditions may be overlooked by justice sector staff.

There is already much work underway in the vulnerable and intimidated witnesses working group (DOJ) which will support individuals with ASD. The Youth Justice Agency is also working with the RCSLT to ensure that all of its staff are trained in communication difficulty awareness.

Re Para 7.1.5 The RCSLT has already worked with Autism NI in agreeing a screening tool which can be used by justice sector staff to identify those with ASD and other communication difficulties.

Re Para 7.1.6 The RCSLT would request that this information is equally accessible to others with a communication difficulty.

Question 10(b):

Do you agree with the action and outcome measures on *Accessing Justice* in the Action Plan (2013 – 2015)? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

Actions and outcomes should be more inclusive to all groups with communication difficulties.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 11(a):

Do you agree with the strategic priority on *Being Part of the Community* for this Strategy?
(Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

The RCSLT is concerned that there is no mention in this strategy of support for individuals with ASD who have multi-lingual backgrounds. This is likely to be an increasing demand upon services in Northern Ireland and requires forward planning.

Question 11(b):

Do you agree with the action and outcome measure on *Being Part of the Community* in the Action Plan (2013 – 2015)? (Please tick one option only)

Yes

No

If no, please explain why and let us know how you think these could be improved.

Re Action 8.1

As stated previously, we wish to emphasise the need to plan for inclusion of people with ASD in a multi cultural society. Any community social activities should also take account of non English speaking communities.

SECTION 4: STRATEGIC PRIORITIES AND ACTION PLAN

Question 12(a):

Do you agree with the strategic priorities on *Participation and Active Citizenship* for this Strategy? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

Question 12(b):

Do you agree with the action and outcome measures on *Participation and Active Citizenship* in the Action Plan (2013 – 2015)? *(Please tick one option only)*

Yes

No

If no, please explain why and let us know how you think these could be improved.

SECTION 5: EQUALITY IMPACT ASSESSMENT QUESTIONS

In this section of the questionnaire we are asking you to tell us if you think the draft Autism Strategy (2013 – 2020) and initial Action Plan (2013 – 2015) have promoted equality of opportunity in the Section 75 groups between persons of:

- (1) Different religious belief,
- (2) Different political opinion,
- (3) Different racial group,
- (4) Different age,
- (5) Different marital status,
- (6) Different sexual orientation;
- (7) Different gender
- (8) With a disability and persons without; and
- (9) With dependants and persons without.

Question 13:

Are the actions / proposals set out in this consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the NI Act 1998?
(Please tick one option only)

- Yes
 No

If yes, please state the group or groups and provide comment on how these adverse impacts could be reduced or alleviated in the proposals.

The RCSLT has concerns, founded upon research evidence as stated previously, that services may positively discriminate in favour of ASD and that this may be to the detriment of others with communication difficulties. For this reason we would like to suggest that in developing and implementing this action plan, the scope and remit of the actions are as inclusive as possible to meet the needs of others with communication difficulties. In this way the Department will ensure that this strategy can extend its reach to many others who might benefit from its implementation.

SECTION 5: EQUALITY IMPACT ASSESSMENT QUESTIONS

Question 14(a):

Are you aware of any indication or evidence – qualitative or quantitative - that the actions / proposals set out in this consultation document may have an adverse impact on equality of opportunity or on good relations?

(Please tick one option only)

Yes

No

If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact.

As already stated in the body of this response and attached for your information.

Question 14(b):

Is there an opportunity to better promote equality of opportunity or good relations?

(Please tick one option only)

Yes

No

If yes, please give details as to how.

SECTION 5: EQUALITY IMPACT ASSESSMENT QUESTIONS

Question 14(c):

Are there any aspects of this action plan where potential human rights violations may occur? (*Please tick one option only*)

Yes

No

If yes, please give details.

SECTION 6: ADDITIONAL COMMENTARY

Please use the space below to provide any additional comments you may have.

It would be helpful if you reference which part of the document you are commenting on. If you refer to any other documents, please provide the title, author and if possible approximate date of publication.

The RCSLT is pleased to see that this strategy is attempting to address many of the issues facing people with ASD. We are disappointed that there are no actions relating to identifying gaps in current service provision particularly in the specialist areas of mental health and adult learning disability.