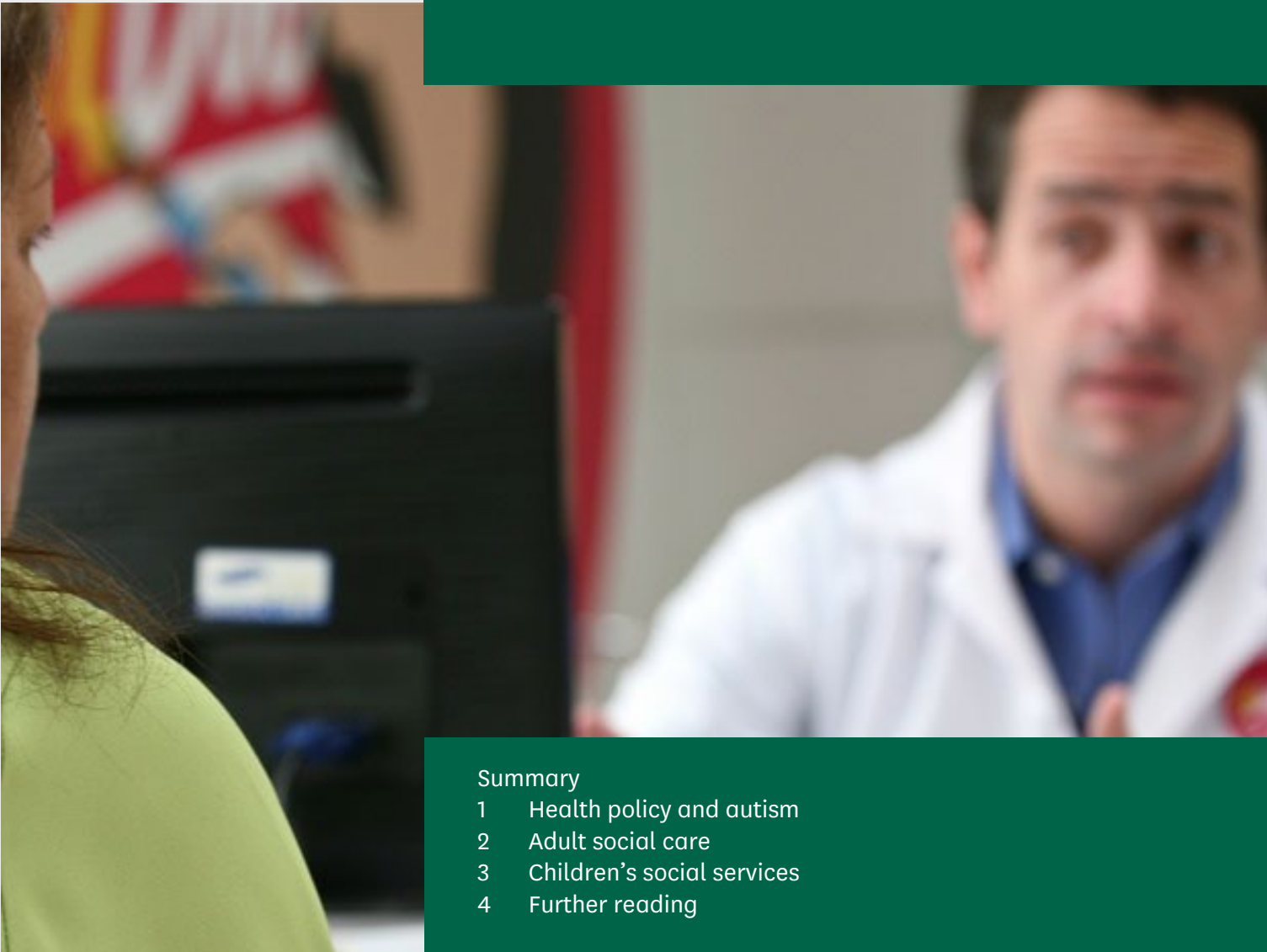


**Research Briefing**

2 April 2025

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# Autism policy and services: Health and social care



## Summary

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## Summary

**Warning: This briefing discusses suicide, which some readers may find distressing.**

This briefing will form part of a [collection of briefings on autism policy and services](#).

### What is autism?

[The UK National Autistic Society \(NAS\) describes autism as a lifelong neurodivergence and disability](#) that affects how people experience and interact with the world. It is a spectrum condition that affects people in different ways. According to the NAS, autistic people may have:

- different communication styles, skills and preferences to non-autistic people
- repetitive and restrictive behaviours and interests (many autistic people see these behaviours as positive and helpful)
- over-sensitivity or under-sensitivity to the five main senses (hearing, sight, smell, taste and touch) and to the senses of balance, movement, spatial awareness and awareness of internal states

Some autistic people also have [a learning disability](#). Autistic people are more likely to experience mental health problems than non-autistic people.

### What terminology does this briefing use?

This briefing uses terminology recommended by the NAS. It uses the term 'autistic people' unless quoting text from another publication.

Autism is sometimes referred to as 'autism spectrum disorder', 'autistic spectrum disorder' or 'autism spectrum condition'. These terms are often used in relation to medical diagnoses and data reporting. Where these terms are used in the briefing, it is to reflect the data or text source they are referring to.

The term 'neurodiversity' refers to the normal range of variation in the way people's brains work, including how they perceive and respond to the world. A person whose brain works differently from a 'typical' person

may refer to themselves as neurodivergent; some, but not all, autistic people identify as neurodivergent.

## Health policy and autism

### Responsibility for autism services and waiting times for assessments

Integrated care boards ([NHS organisations responsible for planning health services for their local population; they replaced clinical commissioning groups in 2022](#)) are responsible for making available appropriate provision for autism assessments and support services for autistic people. ICBs should commission services in line with [guidance published by the National Institute for Health and Care Excellence \(NICE\)](#).

NICE has said [people referred for an autism assessment should be seen within three months](#). In April 2023, NHS England (NHSE) published [a national framework to deliver improved outcomes in all-age autism assessment pathways: guidance for integrated care boards](#). The median waiting time ranged between 264 and 357 days (roughly nine to 12 months) between April and December 2024.

### Current government policy

The government has said it will publish [a 10 Year Health Plan in spring 2025](#).

In November 2024, the government introduced the [Mental Health Bill \[HL\]](#) in the House of Lords. The bill is intended to reduce the detention of autistic people and people with a learning disability under the Mental Health Act 1983, and to strengthen safeguards for autistic people and people with a learning disability who are subject to the act. For more information see section 1.6 of this briefing and the House of Lords and House of Commons Library briefings on [Mental Health Bill \[HL\]: HL Bill 47 of 2024–25](#) and [Reforming the Mental Health Act](#).

### Mandatory staff training

The [Health and Care Act 2022](#) introduced a new legal requirement for all health and social care service providers registered with the [Care Quality Commission](#) (CQC, the independent regulator of social care in England) to ensure their employees receive training on autism and learning disability at a level appropriate to their role. See section 1.3 for more information on mandatory staff training.

## Physical healthcare for autistic people

The [NHS Long Term Plan](#) and the [National strategy for autistic children, young people and adults: 2021 to 2026](#), include actions to improve autistic people's physical health. This includes expanding NHS England's [Learning from lives and deaths – People with a learning disability and autistic people \(LeDeR\)](#) programme to include autistic people (it previously only covered people with a learning disability). The NHS is also implementing a [reasonable adjustments digital flag](#), to ensure that professionals are aware that someone is autistic and may require reasonable adjustments.

In October 2024, NHS England (NHSE) announced the [NHS would roll out free eyesight, hearing and dental checks for children at residential special schools](#) from 2025. For more information on physical healthcare see section 1.4 below.

## Mental healthcare for autistic people

Successive governments have committed to reducing the number of autistic people and people with a learning disability in inpatient mental health settings. This included a commitment in the [NHS Long Term Plan](#) to reduce inpatient provision for autistic people and people with a learning disability by 50% (compared with 2015 levels) by 2023/24. In February 2025, [2,055 autistic people and people with a learning disability were inpatients](#), down 29% from 2,905 inpatients in March 2015. However, the number of inpatients with autism only (without a learning disability) is higher in 2025 than it was in 2015.

In July 2022, the Department of Health and Social Care (DHSC) published [Building the right support for people with a learning disability and autistic people: action plan](#). The plan built updated the [Building the Right Support](#) plan published in 2015. It focused on actions to develop community services and reduce reliance on inpatient mental health beds. See section 1.5 below for more information on reducing inpatient mental health care for autistic people.

The [Suicide prevention strategy for England: 2023 to 2028](#) says evidence suggests that autistic people may be at higher risk of dying by suicide than people who are not autistic. The strategy says there needs to be a focus on improving the evidence base on suicide prevention and autism. For more information see the Library's briefings on [suicide prevention](#).

## Adult social care

Under the Care Act 2014, local authorities have duties relating to the provision of adult social care services, which apply to everyone, including autistic adults.

A government-commissioned [capabilities statement](#) provides guidance for people involved in delivering social work to autistic adults. Further [resources](#)

[and guidance on supporting autistic people](#) are available on the website of Skills for Care, the workforce development and planning body for adult social care in England.

In January 2025, [the government announced it had appointed Baroness Louise Casey to chair an independent commission on adult social care](#) to make recommendations on how to “rebuild the adult social care system to meet the current and future needs of the population.” The commission is expected to begin in April 2025.

## Children’s social care

Under the Children Act 1989, local authorities have a duty to safeguard and promote the welfare of children who are in need by providing appropriate services. A child is classed as in need if they are disabled.

Concerns have been raised, however, about [the difficulties autistic children can face accessing support from children’s social care](#).

In October 2024, the Law Commission published a [consultation on the legal framework for children’s social care](#). The consultation suggested the current law was out of date and provisionally recommended the creation of a new legal framework. The commission is currently reviewing responses to the consultation before it makes final recommendations to the government.

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# 1 Health policy and autism

## 1.1 Responsibility for autism services

Integrated care boards (ICBs) are responsible for making available appropriate provision to meet the health and care needs of their local population. This includes provision of autism assessments and support services for autistic people, in line with guidance published by the National Institute for Health and Care Excellence (NICE):

- [Autism spectrum disorder in adults: diagnosis and management](#)
- [Autism spectrum disorder in under 19s: recognition, referral and diagnosis](#)

Each ICB in England is required to have a board-level executive lead for learning disability and autism. The lead has responsibility to ensure that the ICB performs its functions effectively in the interests of people with a learning disability and autistic people.<sup>1</sup>

The government has said NHS England (NHSE) allocated £124 million of transformation funding to ICBs for learning disability and autism services in 2024/25.<sup>2</sup>

The [Autism Act 2009](#) introduced a requirement for the government to produce and keep under review an adult autism strategy, as well as to publish [accompanying statutory guidance for local authorities and NHS organisations on implementing the strategy](#) (2015).<sup>3</sup> In May 2024, the previous government said it was updating the statutory guidance.<sup>4</sup> At the time of writing, the guidance has not been updated.

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<sup>1</sup> NHS England (NHSE), [Executive lead roles on integrated care boards](#), May 2023

<sup>2</sup> PQ 32597 [on [Autism and learning disability: Community care](#)], 3 March 2025

<sup>3</sup> Department of Health and Social Care (DHSC), [Adult autism strategy: supporting its use](#), 25 March 2015

<sup>4</sup> PQ 23391 [on [Autism: Lancashire](#)], 2 May 2024



## 1.2

## Autism assessment and diagnosis

**Waiting time standards**

The NICE guidance on [Autism spectrum disorder in under 19s: recognition, referral and diagnosis](#) (December 2017) says an autism diagnostic assessment should start within three months of the referral to the autism team.<sup>5</sup>

The [NICE Quality Standard on autism](#), which covers health and social care services for autistic adults, as well as young people and children, also says autism diagnostic assessments should start within three months of a referral.<sup>6</sup>

Statistics indicate in many cases this target is not met – see below.

**Monitoring waiting times for autism assessment**

NHS Digital started publishing data on [waiting times for autism spectrum disorder diagnosis pathways](#) in November 2019.<sup>7</sup>

In December 2024, there were 213,000 people of all ages waiting for a clinical autism assessment. Of those who had been waiting for more than 13 weeks, only 16% had had their first care contact (that is, their first appointment after they had been referred for an assessment) within the recommended 13 weeks (the waiting time standard).<sup>8</sup>

The median waiting time for people having their first care contact was 357 days (51 weeks),<sup>9</sup> which is more than three times as long as the 13-week target.

The median waiting time ranged between 264 and 357 days in the months from April to December 2024.<sup>10</sup>

The number of people waiting for an autism assessment has grown steadily: in the year from December 2023 to December 2024, it increased by 41,000 people (+24%).<sup>11</sup>

Only a small proportion of the people waiting for an autism assessment have a care contact each month. For example, in December 2024, around 7,600

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<sup>5</sup> NICE, [Clinical guideline \[CG128\] Autism spectrum disorder in under 19s: recognition, referral and diagnosis](#), updated 20 December 2017. NICE guidance is not mandatory but provides best-practice and health practitioners are expected to take guidance into consideration.

<sup>6</sup> NICE, [Quality standard \[QS51\] autism](#), 21 January 2014

<sup>7</sup> NHS Digital, [Autism Statistics, January to December 2024](#), 13 February 2025

<sup>8</sup> As above

<sup>9</sup> As above

<sup>10</sup> As Above

<sup>11</sup> As above

people waiting for an autism assessment had at least one care contact, representing just 4% of the total number waiting for an assessment.<sup>12</sup> Having had a care contact does not mean the autism assessment is complete.

## Improving waiting times

[The 2021–26 autism strategy](#) says increased public awareness of autism, a resulting increase in referrals and the covid-19 pandemic have contributed to delays in autism assessments. The strategy includes an investment of £13 million to reduce waiting times by piloting diagnostic pathways and addressing the backlog of assessments. £3.5 million is dedicated to identifying children and young people on waiting lists for assessment who may be at risk of crisis.<sup>13</sup>

The strategy also includes the expansion of a school-based programme piloted in Bradford involving health and education staff in identifying and assessing children who may be autistic. The programme would be rolled out to over 100 schools over three years.<sup>14</sup>

In April 2023, NHSE published [A national framework to deliver improved outcomes in all-age autism assessment pathways: guidance for integrated care boards](#). The framework acknowledges that waiting lists for autism assessments in England have reached “unsustainable levels”. It sets out principles underpinning assessment services and how these should be applied by ICBs when commissioning services. The framework focuses on the “effective and efficient use of existing resource” and notes increasing workforce supply and resource allocation are outside the scope of the framework.<sup>15</sup>

Alongside the framework, NHSE published [operational guidance](#) for ICBs, which includes:

- an overview of key components of the autism diagnostic pathway
- considerations for conducting assessments outside of standard service delivery, for example in hospitals or the forensic settings
- guidance on non-clinical tasks such as training and consultation and liaison across services<sup>16</sup>

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<sup>12</sup> NHS Digital, [Autism Statistics, January to December 2024](#), 13 February 2025

<sup>13</sup> DHSC and Department for Education (DfE), [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p26

<sup>14</sup> DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27

<sup>15</sup> NHSE, [A national framework to deliver improved outcomes in all-age autism assessment pathways: guidance for integrated care boards](#), 5 April 2023

<sup>16</sup> NHSE, [Operational guidance to deliver improved outcomes in all-age autism assessment pathways: Guidance for integrated care boards](#), 5 April 2023

The 2019 [NHS Long Term Plan](#) contained a commitment to do more across the NHS “to ensure that all people with a learning disability, autism, or both can live happier, healthier, longer lives”.<sup>17</sup> This included a commitment to testing and implementing the most effective ways to reduce waiting times for children and young people to be assessed for autism.

## 1.3 Mandatory staff training

The Health and Care Act 2022 introduced a new legal requirement for all health and social care service providers registered with the Care Quality Commission to ensure their employees receive training on autism and learning disability at a level appropriate to their role.<sup>18</sup> The training is named after Oliver McGowan, whose death highlighted the need for improved training and led his parents to campaign for legislative change.<sup>19</sup>

The content of the training is informed by the Core Capabilities Framework for Supporting People with a Learning Disability<sup>20</sup> and the Core Capabilities Framework for Supporting Autistic People.<sup>21</sup>

The 2022 act also placed a duty on the Secretary of State to issue a code of practice setting out requirements for the content, delivery and accreditation of training.<sup>22</sup> The [public consultation on the draft code of practice](#) closed in September 2023 and a response has not yet been published. In March 2025, the government said it would set out its plans for the code of practice in due course.<sup>23</sup>

## 1.4 Physical healthcare for autistic people

The 2021–26 autism strategy notes that autistic people have poorer physical health outcomes and a lower life expectancy than the general population.<sup>24</sup> The strategy committed to the following actions to improve autistic people’s

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<sup>17</sup> NHSE, [The NHS Long Term Plan](#), January 2019, p41

<sup>18</sup> [Health and Care Act 2022 \(legislation.gov.uk\)](#), s181

<sup>19</sup> NHSE, [The Oliver McGowan Mandatory Training on Learning Disability and Autism](#) (accessed 26 March 2025)

<sup>20</sup> Health Education England, [Core Capabilities Framework for Supporting People with a Learning Disability](#), October 2019

<sup>21</sup> Health Education England, [Core Capabilities Framework for Supporting Autistic People](#), October 2019

<sup>22</sup> [Health and Care Act 2022 \(legislation.gov.uk\)](#), s181

<sup>23</sup> PQ 34576 [on [Autism and learning disability: Health services](#)], 11 March 2025

<sup>24</sup> Autistica, [Building Happier Healthier Longer Lives The Autistica Action Briefings 2019 \(pdf\)](#), 2019, referenced in DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021

health outcomes, which mainly built on existing commitments in the 2019 NHS Long Term Plan:

- expanding NHSE's [Learning from lives and deaths – People with a learning disability and autistic people \(LeDeR\)](#) programme to include autistic people (it previously only covered people with a learning disability). LeDeR looks at the lives and deaths of people with a learning disability and autistic people to identify how to improve care, reduce health inequalities, and prevent early deaths. Learning from the reviews is disseminated in [Action from learning reports](#) and LeDeR [Annual reports](#).
- trialling a primary care health check for autistic adults in North East England
- resuming a pilot of hearing, sight and dental checks for autistic children in special residential schools – in October 2024, NHSE announced the [NHS would roll out free eyesight, hearing and dental checks for children at residential special schools](#) from 2025<sup>25</sup>
- developing a 'digital flag' in patient healthcare records so professionals across the NHS are aware that someone is autistic and may require adjustments – this is known as a [reasonable adjustment digital flag](#)<sup>26</sup>

## 1.5

## Mental healthcare for autistic people

### Evolution of policy on reducing inpatient care

#### Winterbourne View and Transforming Care

In 2011, the BBC's Panorama programme exposed abuse of patients at Winterbourne View, an independent hospital for autistic people and people with learning disabilities. In response, the Department of Health published the Transforming Care programme, which pledged to move people inappropriately placed in hospital to community-based care no later than 1 June 2014.<sup>27</sup> This target was missed; a report by the Transforming Care Steering Group found there were more people being admitted to long-term institutions than being discharged.<sup>28</sup>

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<sup>25</sup> NHSE, [NHS rolls out free eyesight, hearing and dental checks for children at residential special schools](#), 5 October 2024

<sup>26</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021

<sup>27</sup> Department of Health, [Transforming care: A National response to Winterbourne View Hospital](#), December 2012

<sup>28</sup> Transforming Care and Commissioning Steering Group, chaired by Sir Stephen Bubb, [Winterbourne View - Time for change](#), November 2014

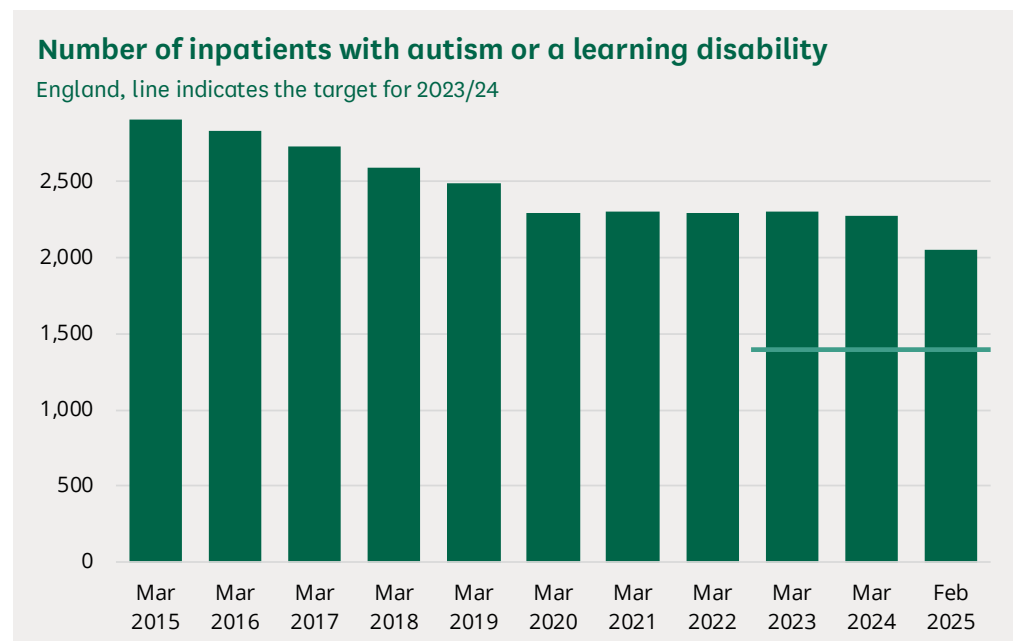
A subsequent report by the group in 2015 found progress was being made, but the programme had not yet delivered tangible benefits in terms of new community facilities.<sup>29</sup> In 2016 the group recommended a commissioner to promote and protect the rights of all people with learning disabilities and autistic people in England.<sup>30</sup> The government said statutory roles and legislation are “not necessarily the answer” to providing this protection.<sup>31</sup>

### Building the Right Support (2015) and the NHS Long Term Plan (2019)

In October 2015, NHSE, the Local Government Association and the Association of Directors of Adult Social Services, published a national action plan to close inpatient facilities for autistic people and people with a learning disability. The [Building the Right Support](#) plan aimed to shift money from inpatient services to the community and reduce the use of inpatient beds for people with a learning disability and autistic people by 35% to 50% over three years.<sup>32</sup>

In 2019, the [NHS Long Term Plan](#) included a commitment to achieve the 50% reduction (compared with the 2015 figure) by 2023/24.<sup>33</sup>

As of February 2025, the number of autistic people and people with a learning disability who were inpatients had decreased by 29% compared to 2015,<sup>34</sup> missing the target by over 20 percentage points.



<sup>29</sup> Transforming Care and Commissioning Steering Group, [Winterbourne View: Time is Running Out](#), July 2015

<sup>30</sup> Transforming Care and Commissioning Steering Group, [Time for Change: The Challenge Ahead](#), February 2016

<sup>31</sup> PQ 28525 [on [Learning Disability](#)], 1 March 2016

<sup>32</sup> NHSE, [Building the right support](#), October 2015, para 1.9

<sup>33</sup> PQ 274584 [on [Learning disability: Hospital beds](#)], 15 July 2019

<sup>34</sup> NHS Digital, [Learning disability services monthly statistics from Assuring Transformation dataset: Data tables – February 2025](#), 20 March 2025, Table 2.2

Source: Source: NHS Digital, [Learning Disability Services Monthly Statistics, AT: February 2025, MHSDS: January 2025](#), Table 1.1

The Long Term Plan also included an action to assign designated keyworkers to autistic children and young people (with or without a learning disability) with the most complex needs. Initially, keyworkers would support those in hospital or at risk of admission, then expand to children facing other vulnerabilities, such as looked after children (who are in the care of the local authority). It also committed to improving the experience of inpatient care and speeding up the discharge process.

### **National autism strategy 2021–26**

The [2021–26 autism strategy](#) recommitted to achieving the 2024 Long Term Plan goal of moving care from inpatient settings to communities. As noted above, this goal was missed. The strategy says that although progress is being made on discharging autistic people from hospital, “too many” autistic people are being admitted to hospital because they are not receiving adequate social care, mental health and housing support.<sup>35</sup>

The strategy includes actions across the following areas to reduce the number of autistic people and people with a learning disability in inpatient settings:

- making legislative changes to the Mental Health Act (see section 1.6 below)
- improving community mental health support to prevent crises and avoidable admissions to hospital
- improving inpatient care for autistic people, including reducing restrictive practice, and speeding up discharges<sup>36</sup>

### **Building the right support action plan (2022)**

In July 2022, the DHSC published an updated [Building the right support for people with a learning disability and autistic people: action plan](#). Progress against commitments in the plan was monitored by the Building the Right Support Delivery Board, chaired by the Minister of State for Care and Mental Health.<sup>37</sup> In March 2025, the government said the delivery board has been paused and no decisions on the board will be taken while the Mental Health Bill is before Parliament.<sup>38</sup>

The action plan focuses on six areas to develop community services and reduce reliance on inpatient mental health beds:

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<sup>35</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021

<sup>36</sup> As above

<sup>37</sup> DHSC, [Building the right support for people with a learning disability and autistic people](#), July 2022

<sup>38</sup> PQ 32598 [on [Autism and learning disability: Community care](#)], 11 March 2025

- ensuring people are safe and that they receive quality health and social care through improving the experience of mental health settings, supporting people to move out of long-term segregation, improving advocacy and training the workforce
- making it easier to leave hospital by refreshing the policy for Care (Education) and Treatment Reviews, using the [Community Discharge Grant](#) and improving outcomes for neurodivergent people in the criminal justice system
- ensuring people receive the right housing, care and support in the community by reviewing best practice, investing in supported housing and ensuring the right services are commissioned
- supporting children and young people by ensuring quicker diagnosis, improving special educational needs and disabilities (SEND) provision and training educational staff in autism awareness
- making cross-government changes to improve system collaboration, including by reforming the Mental Health Act and integrating health and care
- ensuring local and national accountability by the Board holding commitment owners accountable for delivery<sup>39</sup>

In December 2024, the government said the Building the Right Support Action Plan includes commitments which have not yet passed their delivery dates (such as reforming the Mental Health Act). Therefore, it said it is not planning to create a new action plan while the Mental Health Bill is before Parliament. However, it said it is “considering how to ensure that more people with a learning disability and autistic people are supported well in the community, ahead of the commencement of the Mental Health Act reforms”.<sup>40</sup>

### **Mental Health Bill [HL] 2024-25**

The Mental Health Bill [HL] currently passing through parliament would make changes to the Mental Health Act 1983, aimed to limit detention of autistic people and people with a learning disability under the act – see section 1.6 below.

### **Monitoring mental health inpatient bed use**

As of February 2025, there were 2,055 inpatients who had a learning disability and/or autism in England, down 29% from 2,905 inpatients in March 2015. However, a higher number of these inpatients are autistic (with or without a

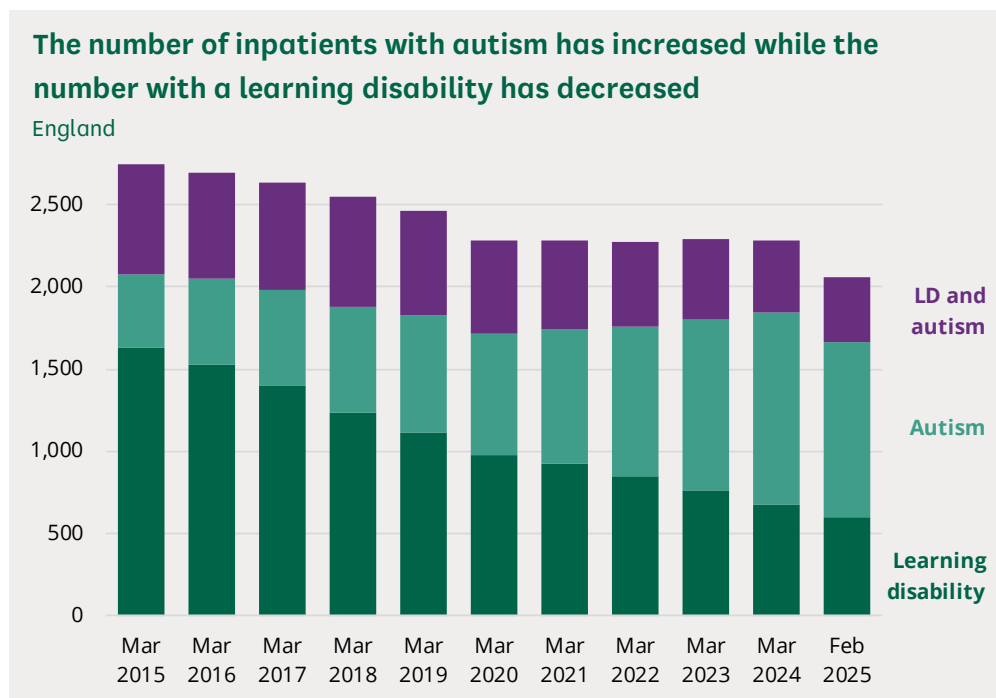
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<sup>39</sup> DHSC, [Building the right support for people with a learning disability and autistic people](#), July 2022

<sup>40</sup> [PQ HL3253, 16 December 2024](#)

learning disability): 1,460 in February 2025 compared with 1,115 in March 2015.<sup>41</sup>

There was also an increase in autistic inpatients without a learning disability, from 450 in March 2015 to 1,065 in February 2025.



Source: NHS Digital, [Learning Disability Services Monthly Statistics, AT: February 2025, MHSDS: January 2025](#), Table 2.2

## Improving the quality of inpatient care

Providers of specialist services for autistic people and people with a learning disability are assessed against [guidance by the Care Quality Commission \(CQC\)](#). Since September 2022, providers registering with the CQC who do not plan to provide these services must agree to a condition that they “must not” provide these services. Should the provider decide to provide the services, they must apply to have the condition removed.<sup>42</sup>

### CQC review of restraint practices in care services

In 2018, the government commissioned the CQC to undertake a review of restraint, seclusion and segregation in care services for people with a mental health condition, a learning disability or autistic people. In response to a recommendation in the CQC’s [interim report](#), the government committed to reviewing cases of all autistic people and people with a learning disability in inpatient care and independent case reviews for people in long-term

<sup>41</sup> NHS Digital, [Learning disability services monthly statistics from Assuring Transformation dataset: Data tables – February 2025](#), 20 March 2025, Table 2.2

<sup>42</sup> CQC, [‘We are strengthening regulation of services for people with a learning disability and autistic people to improve people’s experiences and outcomes’](#), 31 August 2022



segregation. These are known as Independent Care (Education) and Treatment Reviews (IC(E)TRs).<sup>43</sup>

An oversight panel chaired by Baroness Hollins was established to examine the reviews and develop recommendations to government, NHSE and care organisations. [Baroness Hollins' final report of the IC\(E\)TR programme](#), finalised in July 2023 and published in November 2023, said 'long-term segregation' should be re-termed 'solitary confinement', and made recommendations across three areas:

- improving care and support for people with a learning disability and/or autistic people detained in solitary confinement
- improving accountability and visibility when solitary confinement is used
- moving people out of solitary confinement and preventing future use of solitary confinement for people with a learning disability and/or autistic people<sup>44</sup>

The government responded to the report in November 2023. Alongside responding to individual recommendations, it said it would provide funding to continue IC(E)TRs for an additional two years.<sup>45</sup>

In 2020, the CQC published [Out of sight – who cares?](#), the final report of its review.<sup>46</sup> The review found that overall, hospital ward environments were not therapeutic, particularly for autistic people. It also found inappropriate use of restrictive practices such as [blanket restrictions](#) (rules or policies that restrict a person's liberty and other rights, without individual risk assessments to justify their application), restraint, seclusion, and long-term segregation. The review made a series of recommendations across four areas:

1. People with a learning disability and or autistic people who may also have a mental health condition should be supported to live in their communities. This means prompt diagnosis, local support services and effective crisis intervention.
2. People who are being cared for in hospital in the meantime must receive high-quality, person-centred, specialised care in small units. This means the right staff who are trained to support their needs supporting them along a journey to leave hospital.
3. There must be renewed attempts to reduce restrictive practice by all health and social care providers, commissioners and others. We have seen too many examples of inappropriate restrictions that could have

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<sup>43</sup> CQC, [Interim report: Review of restraint, prolonged seclusion and segregation for people with a mental health problem, a learning disability and or autism](#), May 2019

<sup>44</sup> Baroness Hollins, [Baroness Hollins' final report: My heart breaks - solitary confinement in hospital has no therapeutic benefit for people with a learning disability and autistic people](#), 8 November 2023

<sup>45</sup> DHSC, [Independent Care \(Education\) and Treatment Reviews: government response](#), 8 November 2023

<sup>46</sup> CQC, [Out of sight – who cares?: Restraint, segregation and seclusion review](#), 22 October 2022

been avoided. We know in absolute emergencies this may be necessary, but we want to be clear – it should not be seen as a way to care for someone.

4. There must be increased oversight and accountability for people with a learning disability, and or autistic people who may also have a mental health problem. There must be a single point of accountability to oversee progress in this policy area.

The CQC published a series of progress reports relating to the review.<sup>47</sup> The latest report, published in March 2022, found most of its recommendations had not been achieved.<sup>48</sup>

### National strategy for autistic children, young people and adults

[The national strategy for autistic children, young people and adults: 2021 to 2026](#) includes the following actions on improving inpatient care for autistic people:

- undertaking a joint Department of Health and Social Care (DHSC) and NHS England (NHSE) [review of advocacy for autistic people and people with a learning disability in inpatient settings \(pdf\)](#)
- investing £1.5 million to develop training for staff working in adult inpatient mental health training in line with the [Core Capabilities Framework for supporting autistic people](#)
- providing £4 million to help inpatient settings “become more autism-friendly”
- developing a ‘senior intervenor’ pilot to oversee actions from IC(E)TRs and helping patients in long-term segregation towards discharge, as part of a wider £1.35 million package to support people experiencing long-term segregation and seclusion – in March 2025, Baroness Hollins reported funding for the pilot “has been cut at the end of this year”<sup>49</sup>
- providing £21 million in funding through the [Learning Disability and Autism Community Discharge Grant 2020 to 2023](#)
- placing Care (Education) and Treatment Reviews on a statutory footing through the Mental Health Bill (see section 1.6 below)

The [Mental Health Units \(Use of Force\) Act 2018](#) provides for the oversight and management of use of force in relation to patients in mental health units and similar settings in England. For more information, see section 8.4 of the Library briefing on [Mental health policy and services in England](#).

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<sup>47</sup> CQC, [Restraint, segregation and seclusion review: Progress reports](#), updated March 2022

<sup>48</sup> CQC, [Restraint, segregation and seclusion review: Progress report \(March 2022\)](#), March 2022

<sup>49</sup> [HL Deb 11 March 2025](#), c583

## Suicide prevention

The [Suicide prevention in England: five-year cross-sector strategy](#), published in September 2023 under the previous government, highlights that autistic people may be at higher risk of death by suicide than people who are not autistic.<sup>50</sup> The plan sets out the following actions:

- NHSE and the DHSC will continue to work to improve access to autism diagnosis and community-based services, as well as improving access to mental health care for autistic people while reducing the reliance on inpatient settings.
- NHSE and DHSC will improve the national evidence base of suicide prevention and autism through:
  - the (LeDeR) programme (see section 1.4 above)
  - the [National Confidential Inquiry into Suicide and Safety in Mental Health](#)
  - National Institute for Health and Care Research funded studies.
- The Department for Education will explore support for autistic children in the education system and consider whether specific guidance is needed to those teaching relationships, health and sex education.

For more information see the Library’s briefings on [Suicide prevention](#).

## 1.6

## Mental Health Bill [HL] 2024-25

The [Mental Health Bill \[HL\]](#) (HL Bill 47 of 2024-25) currently passing through Parliament would amend the [Mental Health Act 1983](#), which provides the legal framework for compulsory detention and treatment of people with a mental disorder.

The bill would make the following changes to the Mental Health Act (‘the act’), affecting autistic people:

- People with a learning disability and autistic people could not be detained for compulsory treatment under section 3 or made subject to community treatment orders under section 17A of the act, unless they have a co-occurring psychiatric disorder. This change would not apply to people detained under part 3 of the act (individuals accused of or serving a sentence for committing a crime).
- The bill would put Care (Education) and Treatment Reviews (C(E)TRs), which are already part of NHS policy, on a statutory footing. C(E)TRs

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<sup>50</sup> DHSC, [Suicide prevention in England: 5-year cross-sector strategy](#), 11 September 2023

focus on whether a patient with a learning disability or an autistic person is safe and receiving the correct care, as well as assessing for any specific needs relating to social care, education or medical treatment. They aim to reduce unnecessarily long hospital stays and health inequalities.

- The bill would place a duty on integrated care boards (ICBs) to establish and maintain a register of people with a learning disability and autistic people who are at risk of hospital admission under part 2 of the act. Part 2 of the act applies to patients who are not involved in the criminal justice system.
- The bill would also introduce duties on commissioners to improve understanding of the risk of crisis among people with a learning disability and/or autistic people in their local areas and ensure an adequate supply of community services to prevent inappropriate detentions.<sup>51</sup>

Stakeholders such as the National Autistic Society and Mencap have welcomed the bill, and particularly welcomed the changes in the how the act applies to autistic people and people with learning disabilities. However, there has been recognition that these changes could have unintended consequences, such as an increase in alternative routes for detention.<sup>52</sup>

Several user-led organisations, including projects led by autistic people and people with learning disabilities, have raised concerns that the bill would allow for the continued detention and forced treatment of disabled people, and argue that it breaches the UN Convention on the Rights for Persons with Disabilities.<sup>53</sup>

Stakeholders have also made clear that the reforms must be supported by adequate community services for autistic people and people with a learning disability, including mental health support, social care and housing.<sup>54</sup> The National Autistic Society has called for the bill to:

- strengthen review processes and protections for autistic people in mental health hospitals
- enhance duties to provide community support

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<sup>51</sup> [Mental Health Bill \[HL\]](#), 6 November 2024 (bill as introduced in the Lords); DHSC and Ministry of Justice (MoJ), [HL Bill 47 Explanatory Notes](#), 6 November 2024

<sup>52</sup> National Autistic Society, [Government Unveils its New Mental Health Bill](#), 7 November 2024; Mencap, [Mencap responds to the Mental Health Bill](#), 6 November 2024; Royal College of Psychiatrists, [“The Mental Health Bill is a step in the right direction but there is still work to be done” – Royal College of Psychiatrists](#), 6 November 2024; The Law Society, [Government must do more to reform mental health law](#), 27 November 2024

<sup>53</sup> Disability News Service, [‘Mental health bill ‘will not stop us being locked up’, say disabled activists’](#), 7 November 2024

<sup>54</sup> Rethink Mental Illness, [New Mental Health Bill: What's included and what's not](#), 7 November 2024

- close inappropriate alternative routes to detention
- ensure treatment in a mental health hospital has therapeutic benefit<sup>55</sup>

At the time of writing the bill is at report stage in the Lords. No amendments relating to the provisions in the bill relating to autistic people and people with a learning disability were made at committee stage.

For more information on the bill see the House of Lords Library briefing on [Mental Health Bill \[HL\]: HL Bill 47 of 2024–25](#) and the House of Commons Library briefing on [Reforming the Mental Health Act](#).

## Background to the reforms

In 2018, an Independent Review of the Mental Health Act 1983 (applicable in England and Wales) was conducted to understand:

- rising rates of detention under the act
- the disproportionate numbers of people from Black, Asian and minority ethnic groups in the detained population
- concerns about some processes in the act being out of step with a modern mental health system

The resulting report, [Modernising the Mental Health Act](#), found the act was being used to detain autistic people (and those with learning disabilities) due to a lack of appropriate community services:

[...] the Mental Health Act isn't providing the right type of support and care for people with learning disabilities, autism or both. The Mental Health Act is being used in a way that is not in line with its intended purpose, and is too often being used [to] compensate for the lack of adequate and meaningful support within the community.<sup>56</sup>

In January 2021, the government published a series of proposals for legislative change, including on how the act would apply to autistic people and people with a learning disability, in a [white paper on Reforming the Mental Health Act](#).<sup>57</sup>

The government held a [consultation on the proposed changes](#) between January and April 2021, before publishing its response in August 2021.<sup>58</sup>

In June 2022, the Conservative government published the [Draft Mental Health Bill 2022](#), which included similar provisions to the current bill on:

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<sup>55</sup> National Autistic Society, [Government Unveils its New Mental Health Bill](#), 7 November 2024

<sup>56</sup> DHSC, [Modernising the Mental Health Act – final report from the independent review](#), December 2018, p31

<sup>57</sup> DHSC, [Reforming the Mental Health Act](#), January 2021

<sup>58</sup> DHSC, [Reforming the Mental Health Act: government response](#), 24 August 2021

- preventing the detention of autistic people and people with learning disability under section 3 the act
- placing C(E)TRs on a statutory footing
- requiring ICBs to create and maintain a “risk register” for their area of autistic people and people with a learning disability at risk of hospital admission
- placing a duty on ICBs and local authorities to seek to ensure they meet the needs of people with a learning disability and autistic people without detaining them<sup>59</sup>

In July 2022 a [joint select committee was established](#) to consider the draft bill. Following a call for evidence and a series of evidence sessions, [the committee published its report](#) on 19 January 2023.<sup>60</sup>

The committee said it heard from witnesses that hospitals are not the correct environment in which to provide support for people with learning disabilities and autistic people. Most witnesses supported changing the definition of “mental disorder” to exclude learning disability and autism in principle.<sup>61</sup>

The committee also received evidence about a lack of community alternatives for those diverted away from hospital, with provision described as “worryingly low”.<sup>62</sup> The committee said it is clear there will need to be a “sustained programme of investment” to expand community services, but it was “still not clear to [the committee] whether the Government is able to deliver on these commitments in the long term.”<sup>63</sup>

There were concerns that limiting how the act would apply to autistic people and people with a learning disability could lead to unintended consequences, such as detention under the Mental Capacity Act, diagnosing alternative mental health conditions to justify using the Mental Health Act, or diverting people into the criminal justice system.

The Conservative government responded to the committee’s recommendations on 24 March 2024.<sup>64</sup>

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<sup>59</sup> DHSC and MoJ, [Draft Mental Health Bill 2022](#), 27 June 2022

<sup>60</sup> Joint Committee on the Draft Mental Health Bill, [Report - Draft Mental Health Bill 2022](#), 19 January 2023

<sup>61</sup> As above, para 150

<sup>62</sup> As above, paras 108-110

<sup>63</sup> As above, paras 108-110

<sup>64</sup> Gov.uk, [Government response to the Joint Committee on the draft Mental Health Bill](#), 24 March 2024

## 2 Adult social care

The main legislation and guidance relating to local authority provision of adult social care services is framed in general terms. The emphasis is on a person's care and support needs rather than any specific condition they may have.

Under the Care Act 2014, local authorities have a range of duties relating to the provision of adult social care services; the duties apply to all adults, including autistic adults. They include duties:

- to undertake an assessment of any adult with an appearance of need for care and support, or any carer with an appearance of need for support, regardless of their financial situation or whether the authority thinks the individual is eligible for support (sections 9 and 10)
- to meet an adult's assessed care and support needs, or the support needs of a carer, where those needs meet prescribed eligibility criteria (subject to certain conditions).<sup>65</sup> Authorities also have power to meet needs that do not meet the eligibility criteria (sections 18 to 20).<sup>66</sup>

If a local authority is required, or chooses, to meet a person's social care needs, it must produce a care and support plan setting out how those needs will be met. This should include the cost to the local authority of meeting the person's needs (their "personal budget"), including the amount the person must pay themselves (on the basis of a financial assessment) and the amount the local authority must pay.

Adults qualifying for state-funded care services may be entitled to receive payments instead of a care package from the local authority. They can then use these direct payments to arrange and pay for their own, independently contracted, care and support services.

### 2.1 Staffing

Under [Regulation 5 of the Care and Support \(Assessment\) Regulations 2014](#), local authorities must ensure a person carrying out a social care needs assessment has the skills, knowledge and competence to carry out the assessment in question and is appropriately trained. Local authorities must therefore ensure assessors carrying out assessments of autistic people have

<sup>65</sup> [The Care and Support \(Eligibility Criteria\) Regulations 2015](#), SI 2015/313

<sup>66</sup> [Care Act 2014](#), sections 9-10 and 18-20.

the skills, knowledge, competence and training to carry out such assessments.<sup>67</sup>

A [capabilities statement](#), commissioned by the Department of Health and Social Care and developed by the British Association of Social Workers, provides guidance for professionals, managers and other stakeholders involved in delivering social work to autistic adults.<sup>68</sup>

[Resources and guidance for social care workers on supporting people with autism](#) are also available on the website of Skills for Care, the workforce development and planning body for adult social care in England.<sup>69</sup>

## 2.2 Autism strategy 2021–2026

The autism strategy 2021–2026 said “improving health and care staff’s understanding of autism” was crucial in reducing health inequalities for autistic people. The strategy said:

- the government would continue to trial and develop the [Oliver McGowan Mandatory Training](#) in learning disability and autism for all health and adult social care staff across England.<sup>70</sup> Further information is provided in section 1.3 above.<sup>71</sup>
- the Local Government Association (LGA), Skills for Care, and the Association of Directors of Adult Social Services (ADASS) would further roll out [the qualification for commissioners who work with autistic people](#).<sup>72</sup> The previous government’s [Building the right support action plan](#), published in July 2022, said the aim was to have a health and a social care commissioner per local area to have completed the qualification by April 2025.<sup>73</sup>

The strategy said “too many autistic people” are being admitted to inpatient mental health settings “because they often struggle to access community support, including social care, mental health and housing support before their needs escalate”. The strategy said the government would “improve autistic people’s access to housing and social care that meets their needs, by increasing the provision of supported housing, enabling more people to

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<sup>67</sup> DH, [Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy \(PDF\)](#), March 2015, p18

<sup>68</sup> British Association of Social Workers, [An introduction to the Capability Statement](#).

<sup>69</sup> Skills for Care, [Autism](#).

<sup>70</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27.

<sup>71</sup> [Health and Social Care Act 2022](#), section 181; NHS Health Education England, [The Oliver McGowan Mandatory Training on Learning Disability and Autism](#), last updated 22 December 2022.

<sup>72</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27.

<sup>73</sup> DHSC, [Building the right support for people with a learning disability and autistic people. Table of Commitments \(Annex A\)](#), July 2022, Commitment 3h.



access adaptations to their homes and reforming the social care system so it is fit for purpose”. It added:

We are committed to sustainable improvement of the adult social care system and will bring forward proposals in 2021. The objectives for reform are to enable an affordable, high quality adult social care system that meets people’s needs, while supporting health and care to join up services around them. We want to ensure that everyone, including autistic people, receive the care they need to enable them to live full and independent lives.<sup>74</sup>

## 2.3 Adult social care reform

In December 2021, the previous government set out its plans for wider reform of adult social care in a white paper: [People at the Heart of Care: adult social care reform white paper](#).<sup>75</sup> A policy paper published in April 2023, [Next steps to put People at the Heart of Care](#), provided more detail on the implementation of some of the reforms set out in the 2021 white paper.

Among other things, the 2023 policy paper said the government would provide funding for training for social care staff, including on “learning disabilities including autism”.<sup>76</sup>

In September 2021, the government also set out plans to reform how people pay for adult social care, including the introduction of a cap on care costs from October 2023. However, at the [2022 Autumn Statement](#) the then Chancellor, Jeremy Hunt, announced the reforms would be delayed by two years.<sup>77</sup> In July 2024, the new Chancellor, [Rachel Reeves announced the reforms would be cancelled](#).<sup>78</sup> Further information is provided in the Library briefing: [Proposed adult social care charging reforms \(including cap on care costs\)](#).<sup>79</sup>

### Labour government

In its manifesto for the 2024 general election, the Labour Party said a Labour government would undertake a programme of reform to “create a National Care Service, underpinned by national standards, delivering consistency of care across the country”. It added that there will be a principle of ‘home first’ that supports people to live as independently for as long as possible.<sup>80</sup>

<sup>74</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p32.

<sup>75</sup> DHSC, [People at the Heart of Care: adult social care reform white paper](#), 1 December 2021.

<sup>76</sup> DHSC, [Adult social care system reform: next steps to put People at the Heart of Care](#), 4 April 2023.

<sup>77</sup> [HC Deb 17 November 2022, c850](#).

<sup>78</sup> [HC Deb 29 July 2024, cc1034-1037](#).

<sup>79</sup> Commons Library briefing CBP-9315, [Proposed adult social care charging reforms \(including cap on care costs\)](#).

<sup>80</sup> Labour Party, [Change: Labour Party manifesto 2024](#), June 2024, pp100-101.

On 3 January 2025, [the government announced it had appointed Baroness Louise Casey to chair an independent commission on adult social care](#) to make recommendations on how to “rebuild the adult social care system to meet the current and future needs of the population”.

The commission, which is expected to begin April 2025, will be split into two phases:

- the first phase, reporting in 2026, will “identify the critical issues facing adult social care and set out recommendations for effective reform and improvement in the medium term”.
- the second phase, reporting by 2028, “will make longer-term recommendations for the transformation of adult social care”.<sup>81</sup>

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<sup>81</sup> DHSC, [New reforms and independent commission to transform social care](#), 3 January 2025; [PQ33860 \[on Autism: Health Services\]](#), 11 March 2025.

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## 3 Children's social services

### 3.1 Support for children in need

Under section 17 of the Children Act 1989, local authorities are under a general duty “to safeguard and promote the welfare of children within their area who are in need...by providing a range and level of services appropriate to those children’s needs”.

A child in need is defined as a child who:

(d) [is] unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision...of services by a local authority...;

(e) [whose] development is likely to be significantly impaired, or further impaired, without the provision of such services; or

(f) [is] disabled.<sup>82</sup>

The act defines a child as disabled, in language that is now outdated, if they are “blind, deaf or dumb or suffers from mental disorder of any kind or is substantially and permanently handicapped by illness, injury or congenital deformity”.<sup>83</sup>

A local authority is responsible for assessing whether a child is in need. Where, following an assessment, a local authority decides to provide services, a multi-agency child in need plan should be developed, setting out which organisations and agencies will provide which services to the child and family.

The Children Act specifies the range of services that can be made available for a child in need. These include (but are not limited to):

- occupational, social, cultural, or recreational activities
- home help
- assistance to enable the child and their family to have a holiday
- assistance in kind or in cash<sup>84</sup>

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<sup>82</sup> Children Act 1989, section 17.

<sup>83</sup> Children Act 1989, section 17(11).

<sup>84</sup> [Children Act 1989](#), section 17 and schedule 2

Any of the services listed in the act (except day care or care or supervised activities) may be provided to any member of the child in need's family, "if it is provided with a view to safeguarding or promoting the child's welfare".<sup>85</sup>

Local authorities may charge what they consider reasonable for providing services to a child in need and their family (but not for advice, guidance or counselling). Local authorities are not, however, under a duty to charge for services and they may not charge more than a person can "reasonably be expected to pay".<sup>86</sup>

Further information is available in the Library briefing, [Local authority support for children in need \(England\)](#).

## Parent carer's needs assessment

If a local authority considers a parent carer of a disabled child may have support needs, it must carry out a "parent carer's needs assessment" under section 17ZD of the Children Act 1989. Such an assessment must also be carried out if the parent carer requests one. The duty to carry out an assessment only applies where the local authority is satisfied the child and their family are classed as in need under section 17 of the act (see above).<sup>87</sup>

Following an assessment, the local authority must decide whether the parent has needs for support and, if so, whether these needs could be met by services under section 17.<sup>88</sup>

Further information is available in section 1.2 of the Library briefing on [local authority support for unpaid carers in England](#).<sup>89</sup>

## Short breaks

Under schedule 2 of the Children Act 1989, local authorities are required to provide services designed to "assist individuals who provide care for [disabled] children to continue to do so, or to do so more effectively, by giving them breaks from caring".<sup>90</sup> Under [The Breaks for Carers of Disabled Children Regulations 2011](#), local authorities must produce a short breaks services statement setting out these services and the eligibility criteria for accessing them.<sup>91</sup>

Further information is available in guidance published by the Department for Education on [short break care: how local authorities should provide it](#).<sup>92</sup>

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<sup>85</sup> [Children Act 1989](#), section 17(3)

<sup>86</sup> [Children Act 1989](#), section 29

<sup>87</sup> [Children Act 1989](#), section 17ZD.

<sup>88</sup> [Children Act 1989](#), section 17ZF.

<sup>89</sup> Commons Library briefing CBP-7756, [Local authority support for informal carers in England](#).

<sup>90</sup> [Children Act 1989](#), Schedule 2, paragraph 6.

<sup>91</sup> [The Breaks for Carers of Disabled Children Regulations 2011](#), SI 2011/707.

<sup>92</sup> Department for Education, [Short break care: how local authorities should provide it](#), 24 March 2011.

## 3.2 Concerns about “Autism plus” policies

In August 2020, CEREBRA, a charity which helps children with neurodevelopmental conditions, published a report: [Unlawful restrictions on the rights of disabled children with autism to social care needs assessments](#).

The report raised concerns with the way local authorities were responding to the social care assessment and support needs of autistic children. Based on responses to freedom of information requests, the report found that the eligibility criteria of 41 local authorities specified that autistic children would only be eligible for an assessment/support if they also met an additional requirement (referred to as “autism plus” policies). In 22 local authorities an autistic child was also required to have a learning disability to be eligible.<sup>93</sup>

The report went on to say:

- The definition of disability in the Children Act 1989 (a “mental disorder of any kind”) is “is a wide definition and includes, for example, children with autism or Asperger’s syndrome even if they have a high IQ and even if they do not have behaviour that may be described as ‘challenging’”.<sup>94</sup>
- ‘Autism plus’ policies may result in a child who is disabled for the purposes of the Children Act 1989 not receiving an assessment and/or support. The report argued this would make the policy unlawful under the Children Act 1989. It added it may also result in children with autism being provided with an assessment and/or support of a different nature or quality to other children entitled to support.<sup>95</sup>

The report argued that “autism plus’ policies...constitute unlawful indirect discrimination” and perhaps also “direct discrimination on the ground of disability”.<sup>96</sup>

## 3.3 Autism strategy 2021–2026

The 2021–26 autism strategy noted the important role social workers play in “identifying the support autistic people need throughout their lives” and said the government would publish a Capability Statement for Social Work with Autistic Children and their Families in line with the existing Capability

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<sup>93</sup> CEREBRA, [Unlawful restrictions on the rights of disabled children with autism to social care needs assessments](#), August 2020, pp15-17.

<sup>94</sup> CEREBRA, [Unlawful restrictions on the rights of disabled children with autism to social care needs assessments](#), August 2020, p18.

<sup>95</sup> CEREBRA, [Unlawful restrictions on the rights of disabled children with autism to social care needs assessments](#), August 2020, p27.

<sup>96</sup> CEREBRA, [Unlawful restrictions on the rights of disabled children with autism to social care needs assessments](#), August 2020, p27.

Statement for Social Work with Autistic Adults (see section 2.1 above). At the time of writing, the capability statement has not been published.<sup>97</sup>

## 3.4 Reform of children’s social care

On 2 February 2023, the Conservative government published a strategy and consultation on reforming children’s social care in England: [Stable Homes, Built on Love](#).<sup>98</sup> This was, in part, a response to the [final report of the Independent Review of Children’s Social Care](#), published in May 2022.<sup>99</sup>

The strategy noted concerns about the difficulties families face trying to access support for disabled children and made several commitments “to strengthen and improve” the support provided.<sup>100</sup>

The commitments included the development of a “family help” service to provide “intensive multi-disciplinary support” to families facing significant challenges in a non-stigmatising way”.<sup>101</sup> Further information on the plans, which are being taken forward by the current government as part of the [Families First Partnership Programme](#), is provided in section 3.1 of the [Library briefing on reform of children’s social care in England](#).<sup>102</sup>

### Law Commission review

The Stable Homes, Built on Love strategy also said the government would work with the Law Commission to review the legislation on providing help to disabled children and their families.<sup>103</sup>

The Law Commission published a [consultation paper in October 2024](#) setting out its initial views on the current legal framework. The consultation period closed on 31 January 2025 and the Law Commission is reviewing the responses before making its final recommendations to the government.<sup>104</sup>

<sup>97</sup> DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27

<sup>98</sup> Department for Education, [Stable Homes, Built on Love: Implementation Strategy and Consultation](#), February 2023.

<sup>99</sup> The Independent Review of Children’s Social Care, [Final Report](#), May 2022.

<sup>100</sup> Department for Education, [Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023](#), February 2023, p26; Department for Education, [Children’s Social Care: Stable Homes, Built on Love: Government Consultation Response](#) (PDF), September 2023, pp16-18.

<sup>101</sup> Department for Education, Stable Homes, [Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023](#), February 2023, p17.

<sup>102</sup> Commons Library briefing CBP-9818, [Reform of children’s social care in England](#); DfE, [Families First Partnership programme](#), 20 March 2025; [HCWS539 \[Families First Partnership Programme\]](#), 20 March 2025.

<sup>103</sup> Department for Education, [Stable Homes, Built on Love: Implementation Strategy and Consultation: Children’s Social Care Reform 2023](#), February 2023, p17.

<sup>104</sup> Law Commission, [Disabled children’s social care](#).

Among other things, the consultation stated:

- The law on disabled children’s social care is out of date. The definition of disability in the Children Act 1989 (see section 3.1 above) was “drafted at a time when our awareness of neurological conditions such as autism was in its infancy”.<sup>105</sup>
- Autistic children can experience difficulty accessing section 17 assessments.<sup>106</sup>
- Staff carrying out assessments may “lack training, experience and understanding of disability; particularly in conditions such as autism”.<sup>107</sup>
- A particular issue is the focus on safeguarding in assessments, “at the expense of consideration of social care needs”.<sup>108</sup>

The consultation provisionally favoured creating a new legal framework for assessing and meeting the needs of disabled children.<sup>109</sup>

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<sup>105</sup> Law Commission, [Disabled Children’s Social Care Consultation Paper](#), October 2024, para 1.7.

<sup>106</sup> Law Commission, [Disabled Children’s Social Care Consultation Paper](#), October 2024, para 3.31.

<sup>107</sup> Law Commission, [Disabled Children’s Social Care Consultation Paper](#), October 2024, para 4.13.

<sup>108</sup> Law Commission, [Disabled Children’s Social Care Consultation Paper](#), October 2024, para 4.14.

<sup>109</sup> Law Commission, [Disabled Children’s Social Care Consultation Paper](#), October 2024, para 23.22.

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## 4 Further reading

The House of Commons Library has published briefings on the following related topics:

- [Mental health policy and services in England](#)
- [Reforming the Mental Health Act](#)
- [Support for children and young people’s mental health \(England\)](#)
- [Suicide prevention](#)
- [The NHS workforce in England](#)
- [Adult Social Care Funding \(England\)](#)
- [Children’s social care workforce](#)
- [Adult social care workforce in England](#)
- [Proposed adult social care charging reforms \(including cap on care costs\).](#)
- [Local authority support for informal carers in England.](#)
- [Reform of children’s social care in England](#)
- [Local authority support for unpaid carers in England](#)
- [Local authority support for children in need \(England\)](#)

The House of Lords Library has published a briefing on:

- [Mental Health Bill \[HL\]: HL Bill 47 of 2024–25](#)




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