

Research Briefing

2 April 2024

By Laura Abreu

Autism: Overview of policy and services



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Summary

What is autism?

The [National Autistic Society describes autism as a developmental disability](#) that affects how people communicate and interact with the world. Autism is a spectrum condition that affects people in different ways. Autistic people may have:

- Challenges with social communication and interaction
- Repetitive and restrictive behaviours
- Over-sensitivity or under-sensitivity to noise, touch, smells or tastes
- Highly focused interests or hobbies

Some autistic people also have a learning disability.

Terminology

This briefing uses [terminology recommended by the National Autistic Society](#). 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 the “typical” person may refer to themselves as neurodivergent; some, but not all, autistic people identify as neurodivergent.

The Autism Act 2009 and autism strategies

The [Autism Act 2009](#) requires the Government to introduce and keep under review an adult autism strategy.

In 2021 the Government published a [new strategy for 2021 to 2026](#) including children and young people, alongside adults, for the first time. It focuses on autism awareness, education, employment, health, reducing inpatient care, community support and the criminal justice system.

An [implementation plan for 2021 to 2022](#) set out how the strategy would be funded in the first year. The Department of Health and Social Care (DHSC) is working on updating the statutory guidance. [The updated guidance will be subject to public consultation in 2024.](#)

[The strategy was previously refreshed in 2014](#), and the first strategy [Fulfilling and rewarding lives: the strategy for adults with autism in England](#) was published in 2010.

Health policy and autism

The [NHS Long Term Plan](#) (2019) includes objectives for improving access to autism diagnosis and post-diagnostic support, as well as improving autistic people's mental and physical health.

The National Institute for Health and Care Excellence (NICE) has said [people referred for an autism assessment should be seen within three months](#). The median waiting time ranged between 218 and 306 days (roughly seven to 10 months) in the months from April to December 2023.

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 provide employees with training on autism and learning disabilities (called [Oliver McGowan Training](#)).

The Long Term Plan set a target to reduce inpatient provision for autistic people and people with a learning disability by 50% (compared with 2015 levels) and support more people in the community by 2023/24. In February 2024, [2,045 autistic people and people with a learning disability were inpatients](#), down 30% from 2,905 inpatients in March 2015. However the number of inpatients on the autism spectrum only (without learning disability) is actually higher in 2024 than it was in 2015.

In July 2022, the DHSC published an updated [Building the right support for people with a learning disability and autistic people: action plan](#), focusing on six areas to develop community services and reduce reliance on inpatient mental health beds.

The Government also proposed in the [Draft Mental Health Bill 2022](#) to amend the criteria for detention under the Mental Health Act, so a person could not be subject to long-term detention for treatment for autism or learning disability.

Social care and autism

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. [Guidance for social workers](#) (PDF) is provided in a Government-commissioned Capabilities Statement. The Government is also rolling out a qualification for commissioners who work with autistic people. [Guidance on identifying local demand and developing services for autistic people](#) was published alongside the autism strategy for 2021 to 2026.

Education and autism

Under the [Children and Families Act 2014](#), local authorities have a duty to identify needs in their area and commission services to support children and young people with special educational needs and disabilities (SEND). In January 2015, the Government published a [SEND code of practice](#).

In March 2022, the Government published the results of a [review of the SEND system's effectiveness](#) as a green paper for consultation. In March 2023, the Government published a [SEND and alternative provision improvement plan: right support, right place, right time](#). The plan included intentions to establish national standards for SEND and alternative education provision and to standardise and digitise Education, Health and Care Plans.

England's statutory SEND system does not extend to higher education. Higher education providers are instead bound by different statutory duties under the [Equality Act 2010](#) when it comes to supporting autistic students. There is also different funding in place known as the [Disabled Students' Allowance](#) (DSA).

Employment and autism

According to the Office for National Statistics, 30.6% of disabled people with autism as a main or secondary health condition were in employment in 2022/23, compared with 53.9% for all disabled people and 81.9% of non-disabled people.

The National Autistic Society has said that [77% of unemployed autistic people want to work](#).

The autism strategy for 2021 to 2026 says that by 2026, the Government will have improved support to help autistic people find and stay in work. This will be through improving employer awareness of autism, improving the accessibility of employment programmes and making Jobcentres more autism inclusive.

In April 2023, the Department of Work and Pensions announced a [review considering how to improve autistic people's employment prospects](#). In February 2024 the Government published the report and recommendations of [the Buckland Review of Autism Employment](#), which highlighted the barriers to autistic people entering the workplace and set out recommendations to address them.

Schemes aimed at supporting autistic people with employment include:

- the [Disability Confident scheme](#)
- the [Access to Work programme](#)
- the [Intensive Personalised Employment Support programme](#)
- the [Local Supported Employment initiative](#)

Under the [Equality Act 2010](#), employers must make reasonable adjustments to support disabled job applicants and employees. However, the 2024 Buckland Review reported research findings that access to adjustments for autistic employees is “highly variable”.

Social security and autism

Autistic people may be entitled to a range of benefits including benefits to help with the extra costs of a disability. These might include Personal Independence Payment (PIP), which is replacing Disability Living Allowance (DLA), and ‘Income replacement’ benefits to cover day-to-day living costs, such as Universal Credit.

The Department for Work and Pensions published [Transforming Support: The Health and Disability White Paper](#) alongside the Spring Budget on 15 March 2023. This included an aim to make “the [benefit] claim journey more of a two-way conversation”, communicate decisions in a simple and compassionate way and get more decisions right first time.

The white paper outlined plans to abolish the Work Capability Assessment. This assessment helps determine whether someone is entitled to extra amounts in Universal Credit and Employment and Support Allowance, as well as any work-related requirements people must meet as a condition of their claim.

Under these plans a new health element of Universal Credit will be available to claimants who also receive PIP, replacing the existing extra amount for those assessed as having ‘limited capability for work and work-related activity’.

The criminal justice system and autism

The autism strategy for 2021 to 2026 says autistic people may be over-represented among people who come into contact with the criminal and youth justice systems, as victims, witnesses or defendants. It references evidence that autistic people often have poor experiences of these systems and can find prison environments overwhelming, and that staff do not always understand their needs.

The strategy commits to developing a better view of existing provision for neurodivergent adults, including autistic adults, through a call for evidence on neurodiversity in the criminal justice system.

[Neurodiversity in the criminal justice system: A review of evidence](#) was published in July 2021. The review found too little is being done to understand and meet the needs of neurodivergent people in the system.

The Ministry of Justice responded by publishing a [neurodiversity action plan](#) in June 2022, which was updated in January 2023. The updated plan says neurodiversity support managers have been introduced in prisons and the Government plans to have one in every prison across England and Wales by 2024. It also notes autism accreditation is being promoted across the prison estate.

Devolved executives

This paper focuses on policies in England, the Autism Strategy 2021-26 applies only to England. Many of the policy areas are devolved, for example health and education. Each of the devolved executives is responsible for developing its own policy. Section 8, of this briefing, provides an overview of autism strategies implemented in Scotland, Wales and Northern Ireland.

1 Government policies on autism in England

The [Autism Act 2009](#) placed statutory requirements on the Government to publish an adult autism strategy and associated statutory guidance for local authorities and NHS bodies.¹

The 2009 Act was a Private Member's Bill introduced by Cheryl Gillan² with backing from the National Autistic Society and other autism charities.

The current strategy, [National strategy for autistic children, young people and adults: 2021 to 2026](#), is the first to cover children and young people as well as adults.

There have been two previous strategies since the act became law:

- [Think autism - fulfilling and rewarding lives, the strategy for adults with autism in England: an update \(2014\)](#)
- [Fulfilling and rewarding lives: the strategy for adults with autism in England\(2010\)](#)

1.1 The National strategy for autistic children, young people and adults: 2021 to 2026

In July 2021, the Department of Health and Social Care (DHSC) and the Department for Education (DfE) published the [National strategy for autistic children, young people and adults: 2021 to 2026](#).³ It builds on and replaces the 2014 Think autism strategy and covers children and young people, as well as adults, for the first time.

¹ [Autism Act 2009](#)

² Cheryl Gillan was MP for Chesham and Amersham from 1992 until her death in 2021. She was awarded a damehood in the [2018 New Year Honours](#).

³ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021

The strategy was informed by a [review of the Think autism strategy](#), which included a public consultation on the care and support experiences of autistic people and their families and carers.⁴

Evidence was also drawn from a 2019 report by the All-Party Parliamentary Group on Autism (APPGA) and the National Autistic Society, [The Autism Act: 10 Years On](#). The report found “71% (2 in 3) of autistic adults in England aren’t getting the support they need.”⁵

Independent research was commissioned from the Policy Innovation Research Unit to understand the [impact of the Covid-19 pandemic on autistic people](#) (PDF), which reported in 2021.⁶

The new strategy sets out the Government’s vision for the five years from 2021 to 2026 and focuses on six key themes:

- Improving understanding and acceptance of autism within society.
- Improving autistic children and young people’s access to education, and supporting positive transitions into adulthood.
- Supporting more autistic people into employment.
- Tackling health and care inequalities for autistic people.
- Building the right support in the community and supporting people in inpatient care.
- Improving support within the criminal and youth justice systems.⁷

The strategy also sets out plans for the improvement of data quality and collection, with the aim to decrease reliance on self-assessments and build a cross-government approach to data collection and reporting.⁸

The Government committed to invest £74.88 million towards the objectives in the first year of the strategy.⁹ An [implementation plan for 2021 to 2022](#), published alongside the strategy, set out how the money would be spent.¹⁰

⁴ DHSC and DfE, [Review of the National Autism Strategy ‘Think Autism’: call for evidence and summary of responses](#), 14 March 2019

⁵ All Party Parliamentary Group on Autism and the National Autistic Society, [The Autism Act: 10 Years On](#), September 2019, p5

⁶ Policy Innovation and Evaluation Research Unit, [The Impact of COVID-19 on Autistic People in the United Kingdom: Final Report](#) (PDF, 2.39MB) July 2021

⁷ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p10

⁸ As above, p40

⁹ DHSC Press Release, [‘New landmark strategy to improve the lives of autistic people’](#), 21 July 2021

¹⁰ DHSC and DfE, [Autism strategy implementation plan: 2021 to 2022 \(Annex A\)](#), updated 22 July 2021

Response to the 2021–2026 autism strategy

Responses were generally positive in relation to the strategy's aims and the amount of money committed in year one. There were concerns about sustaining the funding throughout the full five years and the knock-on impact of unresolved problems in the social care sector. Caroline Stevens, chief executive of the National Autistic Society, said:

[...] we're really pleased to finally see these as concrete actions in the first year of the new strategy, alongside other important commitments for autistic people and their families.

But the true success of the strategy will depend on the Government investing in autistic people each year, as well as the Prime Minister honouring his promise to fix the social care crisis. If this happens, this strategy could be a significant step forward in creating a society that really works for autistic children, adults and their families.¹¹

Following the autumn spending review in 2021, The National Autistic Society urged the Government to “properly fund the promises made in the five-year strategy”.¹²

In response to the Spring 2023 budget, the National Autistic Society said it is “really worried the Government has missed another opportunity to fund its all-important Autism Strategy”.¹³

Implementation of the autism strategy

In November 2023 the National Autistic Society responded to the [Autumn Statement](#) and the [Government's proposed changes to the Workplace Capability Assessments \(WCA\)](#). It was critical about the Government policies that would negatively impact autistic people particularly in terms of employment and benefits:

What the Chancellor announced in the Autumn Statement will do nothing to help address key issues autistic people face: record waits for diagnosis, a chronic lack of local social care services and mental health support, and parents having to fight too long for too little support for autistic students.

Stricter rules on benefit claimants do not address the root causes of the low employment for autistic people. (...) The Government needs to do more to create an employment system that works for autistic people. The plans announced today will not do that and instead simply add pressure on autistic people who have been left without support for too long.¹⁴

¹¹ National Autistic Society News, '[Government invests millions in better support for autistic people in England](#)', 21 July 2021.

¹² National Autistic Society News, '[Our calls for funding the autism strategy](#)', 28 October 2021

¹³ National Autistic Society News, '[Our response to the Spring Budget and Health and Disability White Paper](#)', 15 March 2023

¹⁴ National Autistic Society News, '[Our response to the Autumn Statement](#)', 22 November 2023

In March 2024 David Johnston, Parliamentary Under-Secretary in the Department for Education, set out the department's progress to date with the autism strategy and s plans for 2024:

In 2024, DHSC is prioritising updating the Autism Act statutory guidance by working across government, including with the department, to support the NHS and local authorities to deliver improved outcomes for autistic people in line with the national autism strategy. This updated guidance will be subject to public consultation in 2024. Delivery of the cross-government actions set out in the national autism strategy remains a priority for 2024 and progress will continue to be monitored.¹⁵

1.2 Previous autism strategies

Think autism strategy 2014

In April 2014, the Department of Health (DH) published an update to the 2010 strategy: [Think autism - fulfilling and rewarding lives, the strategy for adults with autism in England: an update](#).¹⁶ It built-on, rather than replaced, the 2010 strategy.

Think autism set out fifteen priority challenges for action from the perspective of autistic people and carers, across the following areas:

- Building communities that are more aware of and accessible to the needs of people with autism, which have autism champions for change.
- Promoting innovative local ideas, services or projects which can help people in their communities through new models of care.
- Focusing on how advice and information on services can be joined up better for people.¹⁷

In March 2015, the Government updated the statutory guidance for local authorities and NHS organisations.¹⁸ The guidance took into account responses to a consultation¹⁹ and related legislation, including the Health and Social Care Act 2012, the Care Act 2014, and the Children and Families Act 2014, which introduced new duties for autistic people.

In January 2016, the DH produced a progress report on Think autism: [Progress Report on Think Autism: the updated strategy for adults with autism in England](#).²⁰ The report summarised progress since the 2014 strategy and

¹⁵ [PQ 12848 \[on Autism\]](#), 12 February 2024

¹⁶ DH, ['Think Autism': an update to the government adult autism strategy](#), 2 April 2014

¹⁷ As above, p9

¹⁸ DH, [Adult autism strategy: supporting its use](#), 26 March 2015, pp36-55

¹⁹ DH, [The Government response to the consultation on revised statutory guidance to implement the Strategy for Adults with Autism in England](#), 26 March 2015

²⁰ DH, [Strategy for adults with autism: progress report](#), 2016

included a number of new actions, focusing on education, employment, the criminal justice system and better data reporting.

Autism strategy 2010

The Department of Health (DH) published the first autism strategy for England in March 2010 - [Fulfilling and rewarding lives: the strategy for adults with autism in England](#).²¹

The strategy focused on five core areas of activity:

- Increasing awareness and understanding of autism among frontline professionals.
- Developing a clear, consistent pathway for diagnosis in every area, which is followed by the offer of a personalised needs assessment.
- Improving access for adults with autism to the services and support they need to live independently within the community.
- Helping adults with autism into work.
- Enabling local partners to plan and develop appropriate services for adults with autism to meet identified needs and priorities.²²

In December 2010, the DH published [statutory guidance for local authorities and NHS organisations](#) to accompany the strategy.²³

²¹ DH, [Fulfilling and rewarding lives: the strategy for adults with autism in England](#), 3 March 2010 (now archived)

²² As above, pp18-19

²³ DH, [Implementing Fulfilling and rewarding lives: Statutory guidance for local authorities and NHS organisations to support implementation of the autism strategy](#), 17 December 2010 (now archived)

2 Health policy and autism

It is a requirement that each Integrated Care Board (ICB)²⁴ in England has 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.

This includes supporting the board in planning to meet the needs of its local population of people with a learning disability and autistic people and to have effective oversight of, and support improvements in, the quality of care for people in a mental health, learning disability and autism inpatient setting.

This was set out in NHS England statutory guidance, [Executive lead roles within integrated care boards](#) (May 2023).

2.1 The NHS Long Term Plan 2019

The 2019 [NHS Long Term Plan](#) contains 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.”²⁵

Specific areas of action include:

- Tackling the causes of morbidity and preventable deaths through piloting a health check for autistic people and expanding the Stopping overmedication of autistic people and people with a learning disability and Supporting Treatment and Appropriate Medication in Paediatrics (STOMP-STAMP) programmes.
- Continuing to fund the [Learning from Life and Death Reviews Programme](#) (LeDeR) (formally known, and referred to in the Long Term Plan, as the Learning Disabilities Mortality Review).²⁶ LeDeR looks at the lives and deaths of people with a learning disability and autistic people to identify how care can be improved, health inequalities reduced and early deaths prevented. Learning from the reviews is disseminated in [Action from learning reports](#) and LeDeR [Annual reports](#), which from 2023 onwards include information on autistic people.

²⁴ ICBs are statutory bodies responsible for commissioning NHS services in England

²⁵ NHS England, [The NHS Long Term Plan](#), January 2019, p41

²⁶ Since January 2022, [LeDeR has reviewed the lives and deaths of autistic adults](#) (without a learning disability).

- Improving understanding in the NHS of autistic people's needs by delivering awareness training to staff and introducing a "digital flag" in patient records to ensure staff are aware of autistic patients and patients with a learning disability.
- Testing and implementing the most effective ways to reduce waiting times for children and young people to be assessed for autism.
- Assigning 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.
- Halving inpatient provision for autistic people and people with a learning disability by 2023/24, compared to 2015 levels (on a like for like basis and taking into account population growth).²⁷
- Improving the experience of inpatient care and speeding up the discharge process.
- Increasing investment in intensive, crisis and forensic community support including seven-day specialist multidisciplinary service and crisis care in every system.²⁸

The [Long term plan implementation framework](#) (June 2019) sets out how commitments in the NHS Long Term Plan will be delivered and funded.²⁹ It says each local area should develop a five-year plan, overseen by a responsible officer, setting out how the above actions will be met and outlining the local offer for autistic young people and their families.³⁰

2.2

Mandatory staff training

In February 2019, the Government consulted on mandatory learning disability and autism training for all health and care staff. [The Government's response to the consultation](#) was published in November 2019. Over 5,000 responses were received, the vast majority of which were supportive of the principle of mandatory training.³¹

In their consultation response, the Government said it was investing £1.4 million to develop the Oliver McGowan Mandatory Learning Disability and

²⁷ A previous target had been set to reduce inpatient care by 35-50% by March 2019 (see section 2.4)

²⁸ NHS England, [The NHS Long Term Plan](#), January 2019, pp52-53

²⁹ NHS England, [NHS Long Term Plan The Implementation Framework](#), 27 June 2019

³⁰ As above, para 5.10

³¹ DHSC, ['Right to be heard': The Government's response to the consultation on learning disability and autism training for health and care staff](#), 5 November 2019

Autism Training for health and care staff.³² The training is named after Oliver McGowan, whose death highlighted the need for improved training and led his parents to campaign for legislative change.³³

The content of the training is informed by the Core Capabilities Framework for Supporting People with a Learning Disability³⁴ and the Core Capabilities Framework for Supporting Autistic People.³⁵

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.³⁶

It 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.³⁷ The [public consultation on the draft code of practice](#) closed in September 2023 and the Government are considering the responses.

2.3

Assessment and diagnosis

Waiting time standards

The National Institute for Health and Care Excellence's (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.³⁸

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.³⁹

Statistics indicate in many cases this target is not met – see Monitoring waiting times statistics below.

³² DHSC, [All inpatients with learning disability or autism to be given case reviews](#), 5 November 2019

³³ See the campaign website: [Oliver McGowan - Oliver's Campaign](#) for more information

³⁴ Health Education England, [Core Capabilities Framework for Supporting People with a Learning Disability](#), October 2019

³⁵ Health Education England, [Core Capabilities Framework for Supporting Autistic People](#), October 2019

³⁶ [Health and Care Act 2022 \(legislation.gov.uk\)](#), s181

³⁷ [Health and Care Act 2022 \(legislation.gov.uk\)](#), s181

³⁸ 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.

³⁹ NICE, [Quality standard \[QS51\] autism](#), 21 January 2014

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.⁴⁰

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 expansion would see the programme rolled out to over 100 schools over three years.⁴¹

In a February 2023 debate on waiting times for autism and attention deficit hyperactivity disorder (ADHD) diagnosis, Maria Caulfield, Parliamentary Under-Secretary of State for Health and Social Care, gave an update on diagnostic pathway pilots and said a national framework is in development:

NHS England has developed a framework that is transforming learning from autism pilot schemes into scalable action, which will improve support and care for people across the country. Last year, part of the £13 million autism funding enabled 72 pilot tests for improvements in diagnostic pathways, and these pilots are now helping NHS England to develop a national framework on autism that will improve assessment across the country for people of all ages.

[...] We now expect integrated care boards, which were set up in July of last year, to lead the charge on how pathways can be best delivered in local areas. The guidance will provide signposting at each stage of the assessment process, helping to map out a clear route for diagnosis. We now expect every integrated care board to have an executive lead for learning disabilities and autism, and there was talk in the debate about having a national lead. Actually, we want leads at every single local integrated care board to be the lead person to whom MPs can go if assessments are not being done on time, to hold local services to account, to compare best practice and to make sure it is happening in every part of the country. We are putting in the investment needed to meet the demand, because further investment will be needed. This year, we have committed an extra £2.5 million to the scheme, which will help roll it out further.⁴²

In April 2023, NHS England 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 Integrated Care Boards (ICBs) when commissioning services. The

⁴⁰ Department of Health and Social Care and Department for Education, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p26

⁴¹ Department of Health and Social Care and Department for Education, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27

⁴² [HC Deb 6 February 2023](#), c243WH. [Corrections to this statement](#) were made after the debate, this extract uses the corrected Hansard text.

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.⁴³

Alongside the framework, NHS England 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.⁴⁴

Monitoring waiting times

Between 2011 and 2019, Public Health England carried out annual self-assessment exercises with local authority areas on progress made in implementing the Think autism strategy. Local authorities worked with their local partners to informally answer a range of questions.⁴⁵ On diagnosis, the following results were reported for 2018:

The median reported waiting time from referral to diagnostic assessment was 30 weeks (up from 16 weeks reported in 2016). Among the 74% of responding authorities that provided figures for both years, 23% reported a fall in waiting time, 63% reported an increase. A substantially higher proportion of local areas reported that they were unable to foresee when they would be able to meet the recommended NICE standards.⁴⁶

NHS Digital started publishing data on [waiting times for autism spectrum disorder diagnosis pathways](#) in November 2019.⁴⁷

In December 2023, there were 172,000 people of all ages waiting for a clinical autism assessment. Of those who had been waiting for more than 13 weeks, only 6% had had their first care contact (post-referral appointment) within the recommended 13 weeks (the waiting time standard).

The median waiting time for people having their first care contact was 281 days (40 weeks), which is more than three times as long as the 13-week target.

⁴³ NHS England, [A national framework to deliver improved outcomes in all-age autism assessment pathways: guidance for integrated care boards](#), 5 April 2023

⁴⁴ NHS England, [Operational guidance to deliver improved outcomes in all-age autism assessment pathways: Guidance for integrated care boards](#), 5 April 2023

⁴⁵ [PQ HL 6524 \[on Autism\], 14 March 2016](#)

⁴⁶ Public Health England, [Autism self-assessment exercise 2018: executive summary](#), 20 June 2019, para 5

⁴⁷ NHS Digital, [Autism Statistics, January to December 2023](#), 14 March 2023

The median waiting time ranged between 218 and 306 days in the months from April to December 2023.

The number of people waiting for an autism assessment has grown steadily: in the year from December 2022 to December 2023, it increased by 55,000 people (+47%).

Only a small proportion of the people waiting for an autism assessment have a care contact each month. For example, in December 2023, around 6,400 people waiting for an autism assessment had at least one care contact, representing just 4% of the total number waiting for an assessment. Having had a care contact does not mean the autism assessment is complete.

2.4 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 DH published the Transforming Care programme, which pledged to move people inappropriately placed in hospital to community-based care no later than 1 June 2014.⁴⁸ This target was missed; a report by the Transforming Care Steering Group found there were more people being admitted to long-term institutions than those discharged.⁴⁹

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.⁵⁰ In 2016 the group recommended a commissioner to promote and protect the rights of all people with learning disabilities and autistic people in England.⁵¹ The Government said statutory roles and legislation are "not necessarily the answer" to providing this protection.⁵²

Building the Right Support (2015)

In October 2015, NHS England, 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

⁴⁸ DH, [Transforming care: A National response to Winterbourne View Hospital](#), December 2012

⁴⁹ Transforming Care and Commissioning Steering Group, chaired by Sir Stephen Bubb, [Winterbourne View - Time for change](#), November 2014

⁵⁰ Transforming Care and Commissioning Steering Group, [Winterbourne View: Time is Running Out](#), July 2015

⁵¹ Transforming Care and Commissioning Steering Group, [Time for Change: The Challenge Ahead](#), February 2016

⁵² [PQ 28525 \[on Learning Disability\] 1 March 2016](#)

people with a learning disability and autistic people by 35% - 50% over three years.⁵³

In 2019, the [NHS Long Term Plan](#) included a commitment to achieve the 50% reduction (compared to the 2015 figure) by 2023/24.⁵⁴ The new deadline was criticised by charities such as Mencap, who described the situation as a “domestic human rights scandal”.⁵⁵

The Care Quality Commission (CQC) has published [reports on the use of restraint, segregation and seclusion](#) in care services for autistic people, people with a learning disability or a mental health condition.⁵⁶

National autism strategy 2021–26

The [2021–26 autism strategy](#) recommits to achieving the Long Term Plan goal and reports a net decrease in inpatient numbers of autistic people and people with a learning disability of 28% as of June 2021.⁵⁷ It notes the decrease in inpatient numbers of autistic people has been slower compared to overall numbers. 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.⁵⁸

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 2.5 below).
- Improving community support to prevent crises and avoidable admissions to hospital.
- Improving inpatient care for autistic people, including reducing restrictive practice, and speeding up discharges.⁵⁹

In February 2024, the Government provided an update on implementation of the strategy:

⁵³ NHS England, [Building the right support](#), October 2015, para 1.9

⁵⁴ PQ 274584 [on [Learning disability: Hospital beds](#)], 15 July 2019

⁵⁵ Mencap Press Release, [Government due to miss deadline for releasing people with a learning disability locked away in inpatient units, warns Mencap](#), 21 March 2019

⁵⁶ CQC, [Out of sight – who cares?: Restraint, segregation and seclusion review](#), 22 October 2022; CQC, [Restraint, segregation and seclusion review: Progress reports](#), Updated March 2022

⁵⁷ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p30

⁵⁸ As above, p30

⁵⁹ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, pp31-34

In 2024, the DHSC is prioritising updating the Autism Act statutory guidance; this updated guidance will be subject to public consultation in 2024.⁶⁰

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 is monitored by the Building the Right Support Delivery Board, chaired by the Minister of State for Care and Mental Health.⁶¹

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

- 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.⁶²

Providers of specialist services for autistic people and people with a learning disability are assessed against [guidance by the CQC](#). From 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

⁶⁰ [PQ 12848 \[on Autism\]](#), 12 February 2024

⁶¹ DHSC, [Building the right support for people with a learning disability and autistic people](#), July 2022

⁶² DHSC, [Building the right support for people with a learning disability and autistic people](#), July 2022

the provider decide to provide the services, they must apply to have the condition removed.⁶³

Monitoring mental health inpatient bed use

As of February 2024, there were 2,045 inpatients who had a learning disability and/or autism, down 30% from 2,905 inpatients in March 2015. However, a higher number of these inpatients are autistic (with or without a learning disability): 1,360 in February 2024 compared with 1,115 in March 2015.⁶⁴

There was also an increase in autistic inpatients without a learning disability, from 450 in March 2015 to 940 in February 2024.

2.5

Mental Health Act Reform

The [Mental Health Act 1983](#) governs the compulsory detention and medical treatment of people with severe mental illness, people with a learning disability and autistic people for their own safety or for the protection of others.⁶⁵

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; and investigate 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](#), also found the Act was being used to detain autistic people (and those with learning disabilities) due to the 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.⁶⁶

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](#).⁶⁷ The Government held a [consultation on the proposed](#)

⁶³ 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

⁶⁴ NHS Digital, [Learning disability services monthly statistics from Assuring Transformation dataset: Data tables – February 2024](#), 21 March 2024, Table 2.2

⁶⁵ See: Gov.uk, [Government response to the Joint Committee on the draft Mental Health Bill](#), 24 March 2024

⁶⁶ DHSC, [Modernising the Mental Health Act – final report from the independent review](#), December 2018, p31

⁶⁷ DHSC, [Reforming the Mental Health Act](#), January 2021

[changes](#) between January and April 2021, before publishing its response in August 2021.⁶⁸

Proposed reforms

In June 2022, the Government published the [Draft Mental Health Bill 2022](#). The draft Bill would amend the criteria for detention under the Act so autism and learning disability would not be conditions for which a person could be subject to longer term detention for treatment (section 3). This would mean people with a learning disability or autistic people could only be detained for treatment if they are suffering from a co-occurring mental disorder. The changes would not apply to patients in the criminal justice system.⁶⁹

Measures in the draft Bill would place Care (Education) and Treatment Reviews (C(E)TRs) for persons with learning disability and autistic people on a statutory footing. C(E)TRs are part of current NHS policy and aim to reduce unnecessarily long hospital stays. They focus on whether the patient is safe and receiving the right care and treatment. By placing the reviews on a statutory footing, the draft Bill seeks to ensure outcomes from reviews are followed up and barriers to progress are overcome.⁷⁰

The draft Bill would also require Integrated Care Boards (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. The register would be used to put in place preventative measures to avoid admission and inform local commissioning. ICBs and local authorities would have a duty to seek to ensure they meet the needs of people with a learning disability and autistic people without detaining them.⁷¹

Pre-legislative scrutiny

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 2023.⁷²

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.⁷³

The Committee also received evidence about a lack of community alternatives for those diverted away from hospital, with provision described as “worryingly

⁶⁸ DHSC, [Reforming the Mental Health Act: government response](#), 24 August 2021

⁶⁹ DHSC and MoJ, [Draft Mental Health Bill 2022](#), 27 June 2022, clause 1

⁷⁰ As above, clause 2

⁷¹ As above, clause 2

⁷² Joint Committee on the Draft Mental Health Bill, [Report - Draft Mental Health Bill 2022](#), 19 January 2023

⁷³ As above, para 150

low”.⁷⁴ 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.”⁷⁵

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 or diagnosing alternative mental health conditions to justify using the Mental Health Act.

Another concern was that individuals from this group could be diverted into the criminal justice system.⁷⁶ The Government told the Committee they have introduced neurodiversity support managers in prisons and are improving staff training, including developing an autism accreditation.⁷⁷

The Government responded to the Committee’s recommendations on 24 March 2024.⁷⁸ Some of the key Committee recommendations and Government responses are summarised below:

- The Committee recommended the Government review the Building the right support action plan (see section 2.4 of this briefing) to reflect how the needs of people with learning disability and autistic people could be met in the community where they would no longer be covered by the Mental Health Act.
 - The Government said it agreed there needed to be an appropriate level and range of community support available before commencing those parts of the legislation which would remove the power to detain people with a learning disability and autistic people without a co-occurring mental health condition.
- The Committee recommended that the Government monitor the outcomes for those no longer eligible for long-term detention, to ensure there was not a rise in use of the Mental Capacity Act or detention in the criminal justice system.
 - The Government agreed it would need to monitor outcomes and noted it remained committed to reducing the number of people with a learning disability and autistic people detained in hospital.

⁷⁴ Joint Committee on the Draft Mental Health Bill, [Report - Draft Mental Health Bill 2022](#), 19 January 2023, paras 108-110

⁷⁵ Joint Committee on the Draft Mental Health Bill, [Report - Draft Mental Health Bill 2022](#), 19 January 2023, paras 108-110

⁷⁶ Paras 164-175

⁷⁷ Para 173

⁷⁸ Gov.uk, [Government response to the Joint Committee on the draft Mental Health Bill](#), 24 March 2024

- The Committee recommended strengthening the wording of the legislation to emphasise the duty on ICBs and Local Authorities to action the outcomes of C(E)TRs.
 - The Government said it did not recognise the Committee’s concern that some ICBs do not currently fully engage with the C(E)TR process. It noted that under its reforms ICBs would be under a statutory duty to make arrangements to ensure a C(E)TR takes places and they must have regard to recommendations from a review. Currently C(E)TRs are held only pursuant to guidance from NHS England.
 - The Government welcomed the Committee’s recommendation to reduce the time between C(E)TRs and said they are considering the best way of ensuring that individuals receive C(E)TRs at the appropriate intervals.

More information can be found in the Library’s briefing on [Reforming the Mental Health Act](#).

3 Social care and autism

The main legislation and guidance relating to local authority provision of 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.

3.1 Adult social care

Under the Care Act 2014, local authorities have a range of duties relating to the provision of adult social care services which 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); and
- subject to certain conditions, to meet an adult's assessed care and support needs, or the support needs of a carer, where those needs meet prescribed eligibility criteria.⁷⁹ Authorities also have power to meet needs not meeting the eligibility criteria (sections 18 to 20).⁸⁰

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 a statement setting out 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.

Under [Regulation 5 of the Care and Support \(Assessment\) Regulations 2014](#), local authorities are required to 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

⁷⁹ [The Care and Support \(Eligibility Criteria\) Regulations 2015](#), SI 2015/313

⁸⁰ [Care Act 2014](#), sections 9-10 and 18-20.

the skills, knowledge, competence and training to carry out such assessments.⁸¹

Government guidance

Guidance for professionals involved in delivering social work to autistic adults is provided in the Government-commissioned [Capability Statement](#) (PDF) published by the British Association of Social Workers.⁸²

2015 statutory guidance for local authorities and NHS organisations to support implementation of the 2010 Autism strategy says local authorities should allocate responsibility to a named joint commissioner/senior manager to lead commissioning of care and support services for autistic adults.⁸³ It adds that local commissioning plans should describe how local authorities will make sure autistic adults are able to access direct payments where appropriate (see above).⁸⁴

The statutory guidance also says people on the autism spectrum should benefit from personalisation and be involved in decisions about their care and decisions about shaping local services:

Local commissioning plans should set out how local authorities will ensure that adults with autism are able to access direct payments (where appropriate) and benefit from the personalisation of health and social care. Local partners should already have a local autism partnership board in place, which brings together different organisations, services and stakeholders and adults with autism and their families to set a clear direction for improved services. Autism partnership boards have proved to be a highly effective means for stakeholders to shape and monitor local delivery of the strategy and statutory guidance. It is therefore essential for their partnership arrangements to be established in areas where they are not currently.⁸⁵

Autism strategy 2021–2026

The autism strategy 2021–2026 identified “improving health and care staff’s understanding of autism” as crucial in enabling progress on 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.⁸⁶ As set out in section 2.2 above, this training has now been launched and the Government has said it is its “preferred and recommended

⁸¹ DH, [Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy \(PDF\)](#), March 2015, p18

⁸² British Association of Social Workers, [Capabilities Statement for Social Work with Autistic Adults](#).

⁸³ DH, [Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy](#), March 2015, p29

⁸⁴ As above, p29

⁸⁵ As above, p29

⁸⁶ DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27.

training for health and social care staff” to meet the mandatory training requirement under the Health and Social Care Act 2022.⁸⁷

Noting “commissioners need the right skills and tools to develop services that work for autistic people”, the strategy said the Local Government Association (LGA), Skills for Care, and the Association of Directors of Adult Social Services (ADASS) would roll out their qualification for commissioners who work with autistic people to 120 more NHS and local authority commissioners.⁸⁸ The Government’s [Building the right support action plan](#), published in July 2022, said Skills for Care had committed to roll out the qualification for current and aspiring commissioners by April 2023. It added the aim was to have a health and a social care commissioner per local area to have completed the qualification by April 2025.⁸⁹

In addition, [Government-commissioned guidance](#) to “help commissioners identify local demand and develop the right services for autistic people”, developed by Skills for Care and the National Development Team for Inclusion (NDTi), was published alongside the autism strategy.⁹⁰

The strategy argued “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.” As part of a plan to prevent avoidable admissions, the strategy said the Government “will...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 access adaptations to their homes and reforming the social care system so it is fit for purpose.” It adds the LGA and ADASS are “leading work to review best practice models of support for autistic people, people with a learning disability or both.”⁹¹

Adult social care reform

Regarding plans for adult social care reform, the autism strategy said:

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

⁸⁷ [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.

⁸⁸ DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27.

⁸⁹ DHSC, [Building the right support for people with a learning disability and autistic people, Table of Commitments \(Annex A\)](#), July 2022, Commitment 3h.

⁹⁰ DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27.

⁹¹ As above, p30-33.

them. We want to ensure that everyone, including autistic people, receive the care they need to enable them to live full and independent lives.⁹²

In December 2021, the 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](#).⁹³ 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”.⁹⁴

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. At the [Autumn Statement 2022](#) delivered on 17 November 2022, the Chancellor, Jeremy Hunt, said the reforms would be delayed by two years.⁹⁵ Further information is provided in the Library briefing: [Proposed adult social care charging reforms \(including cap on care costs\)](#).⁹⁶

3.2 Children’s social services

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.⁹⁷

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

⁹² DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p32.

⁹³ DHSC, [People at the Heart of Care: adult social care reform white paper](#), 1 December 2021.

⁹⁴ DHSC, [Adult social care system reform: next steps to put People at the Heart of Care](#), 4 April 2023.

⁹⁵ [HC Deb 17 November 2022, c850](#).

⁹⁶ Commons Library briefing CBP-9315, [Proposed adult social care charging reforms \(including cap on care costs\)](#).

⁹⁷ Children Act 1989, section 17.

which organisations and agencies will provide which services to the child and family.

The type of services that can be provided include:

- advice, guidance and counselling
- occupational, social, cultural, or recreational activities
- home help
- facilities for, or assistance with, travelling to and from home for the purpose of taking advantage of any other service provided under the 1989 Act or of any similar service
- assistance to enable the child concerned and their family to have a holiday
- such steps that are practicable to enable a child in need (who is not a looked after child) who is living apart from their family to live with their family, or to promote contact between them and their family (if necessary in order to safeguard or promote their welfare)
- day care for a child if they are under 5 years of age but not yet attending school
- care or supervised activities (either outside school hours or during school holidays) for a child attending any school
- accommodation
- assistance in kind or in cash

Any service may also 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".

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

During a debate on 21 March 2019, MPs raised issues with securing adequate care plans for autistic children. David Drew (Lab/Co-op) said:

What parents find most frustrating are instances in which a care plan has been agreed and is in place, and the local authority then tries to renegotiate downwards the sum that has been agreed. That causes problems for the parents and, obviously, for the person with autism, but is also causes problems for, in particular, specialist units.⁹⁸

⁹⁸ [HC Deb 21 March 2019 c1276](#)

Autism strategy 2021–2026

Noting the important role social workers play in “identifying the support autistic people need throughout their lives”, the 2021–26 autism strategy said the Government would publish a Capability Statement for Social Work with Autistic Children and their Families in line with the existing Capability Statement for Social Work with Autistic Adults (see above). At the time of writing, the Capability Statement has not been published.⁹⁹

Reform of children’s social care

The 2021–26 autism strategy also noted the launch of the Independent Review of Children’s Social Care in January 2021 and said the review “will take a fundamental look at what is needed to make a real difference to children who need social care.”¹⁰⁰

The [final report of the Independent Review](#) was published in May 2022. The Government’s response, comprising a consultation on reform proposals, was published in February 2023: [Stable homes, built on love: implementation strategy and consultation](#).¹⁰¹ A [response to the consultation](#) was published in September 2023.¹⁰²

Further information on the Government’s reform plans, which included a proposed new model of early intervention services referred to as Family Help, is provided in the [Library briefing on children’s social care reform in England](#).¹⁰³

⁹⁹ DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p27

¹⁰⁰ DHSC and DfE, [The national strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p32

¹⁰¹ DfE, [Children’s social care: Stable Homes, Built on Love](#), 2 February 2023

¹⁰² Department for Education, [Children’s Social Care: Stable Homes, Built on Love: Government Consultation Response \(PDE\)](#), September 2023

¹⁰³ Commons Library briefing CBP-9818, [Reform of children’s social care in England](#)

4 Education and autism

The legislative basis of the system of support for children with special educational needs and disabilities (SEND) in England is Part 3 of the [Children and Families Act 2014](#).

Under the 2014 Act, local authorities have a duty to identify needs in their area and to commission, together with partner agencies (for example, schools), services to support children and young people with SEND. This includes autistic children and young people. As part of this, authorities are required to publish a Local Offer, which must set out, among other things, a description of the special educational provision it expects to be available for children in its area who have special educational needs from schools and other educational providers.

In January 2015, the Government published a [Special educational needs and disability code of practice](#)¹⁰⁴ for children and young people aged between 0 to 25 years and provides statutory guidance for organisations working with and supporting children and young people who have special educational needs and disabilities.

4.1 Types of support

The type of support children and young people with SEND receive varies widely, as the types of SEND and the impact they have are very different. This applies particularly to autism. However, two broad levels of support are in place: SEN¹⁰⁵ support, and Education, Health and Care Plans.

- SEN support: support given to a child or young person in their pre-school, school or college. In schools, it replaces the previously existing ‘School Action’ and ‘School Action Plus’ systems. For children of compulsory school age, the type of support provided might include extra help from a teacher, help communicating with other children, or support with physical or personal care difficulties.
- Education, Health and Care Plans (EHCPs): for children and young people aged up to 25 who need more support than is available through SEN support. They aim to provide more substantial help for children and

¹⁰⁴ DfE and DHSC, [SEND code of practice: 0 to 25 years](#), Last updated 30 April 2020

¹⁰⁵ Children with special educational needs may not have disabilities (or vice versa), and this support is focused on a child’s special educational needs

young people through a unified approach reaching across education, health care, and social care needs.

4.2 Support system for children with SEND

Support for autistic pupils is provided within the broader system of support for pupils with special educational needs and disabilities.

The statutory [SEND Code of Practice](#) makes particular reference to autism and the challenges it produces. See for instance:

Special educational provision should be matched to the child's identified SEN. Children's SEN are generally thought of in the following four broad areas of need and support – see Chapter 6, paragraph 6.28 onwards, for a fuller explanation:

- communication and interaction
- cognition and learning
- social, emotional, and mental health
- sensory and/or physical needs

These areas give an overview of the range of needs that providers should plan for. However, individual children often have needs that cut across all these areas and their needs may change over time. For instance speech, language and communication needs can also be a feature of a number of other areas of SEN, and children with an Autism Spectrum Disorder may have needs across all areas. The special educational provision made for a child should always be based on an understanding of their particular strengths and needs and should seek to address them all, using well-evidenced interventions targeted at areas of difficulty and, where necessary, specialist equipment or software. This will help to overcome barriers to learning and participation. Support should be family centred and should consider the individual family's needs and the best ways to support them.

[...]

Children and young people with ASD, including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.¹⁰⁶

A Library Briefing provides further information on the [system of support for children and young people with special educational needs in England](#). Section 6 of the paper discusses reports published on the effectiveness of the system.

¹⁰⁶ DfE, [Special educational needs and disability code of practice: 0 to 25 years \(PDF, 93.3MB\)](#), January 2015, p85 and p97

Disagreement resolution

If a disagreement between parents of pupils with SEND and schools or local authorities has not been resolved at the local level, under sections 496 and 497 of the [Education Act 1996](#) complaints can be made to the Secretary of State for Education that either the governing body of a maintained school or a local authority has acted unreasonably, or has failed to carry out one of its duties under the Education Acts, including their SEND duties.

Autistic pupils in state-funded schools

As in previous years, the most commonly recorded primary need for pupils with an EHC plan was autistic spectrum disorder (ASD). This was around 116,000 pupils in January 2023 (31% of school pupils with EHC plans). A further 91,000 pupils whose primary need was ASD were receiving SEN support (around 8% of pupils with SEN support).¹⁰⁷

Section 4.1 outlines the difference between EHC plans and SEND support.

4.3

Special Educational Needs and Disability Review

In September 2019, five years after the introduction of the current system of support for children and young people with SEND, the Government announced [a review of the system's effectiveness](#).

The review aimed “to improve the services available to families who need support, equip staff in schools and colleges to respond effectively to their needs as well as ending the ‘postcode lottery’ they often face.” It intended to look at how the system has evolved since its introduction, links with health and social care, and would “conclude with action to boost outcomes and improve value for money.”¹⁰⁸

The review was published as a green paper consultation: [SEND review: right support, right place, right time](#) in March 2022.

The green paper envisaged, among other proposals:

- A new integrated national SEND and alternative provision system setting statutory, nationally consistent standards.
- Establishing new local SEND partnerships, bringing together education (including alternative provision), health and care partners with local

¹⁰⁷ DfE, [Special educational needs in England academic year 2022/23](#), 22 June 2023, main text

¹⁰⁸ DfE, [Major review into support for children with Special Educational Needs](#), 6 September 2019

government and other partners to produce a local inclusion plan, setting out how each local area will meet the national standards.

- Introducing a standardised and digitised EHCP process and template.
- Local authorities providing a tailored list of settings to support parents and carers to express their preference for a suitable placement.
- Introducing a streamlined process for redress, including mandatory mediation. [The SEND Tribunal](#), responsible for handling appeals against local authority decisions regarding special educational needs, would remain in place.
- A planned consultation on a new Special Educational Needs Coordinator (SENCo) National Professional Qualification (NPQ) for school SENCos, and to increase the number of staff with an accredited Level 3 SENCo qualification in early years settings.
- Revised and clarified accountability for responsible bodies, such as schools and local authorities.
- A new national framework of banding and price tariffs for high needs funding, which covers SEND and alternative provision.

A Library briefing on [The Special Educational Needs and Disabilities and Alternative Provision Green Paper](#) provides more detail.

A consultation on the green paper was undertaken in summer 2022.

Improvement Plan

The Government published its [SEND and alternative provision improvement plan: right support, right place, right time](#) in March 2023. The plan responded to the green paper consultation and confirmed the Government's future plans.

A roadmap was published alongside the plan, setting out [timelines for key aspects of the Government's proposals](#).¹⁰⁹

The plan confirmed the Government's intention to, among other changes:

- Establish National Standards for SEND and alternative provision.
- Create local SEND and alternative provision partnerships to work with local partners to commission provision for SEND and alternative provision, in line with the National Standards.
- Standardise and digitise Education, Health, and Care Plans.

¹⁰⁹ DfE, [SEND and alternative provision roadmap](#), 2 March 2023

- Introduce a new leadership level SENCo (Special Educational Needs Co-ordinator) NPQ (National Professional Qualification) for schools.
- publish a local and national inclusion dashboard to support the development of local inclusion plans.

In a [written statement to the House of Commons](#), the Children’s Minister, Claire Coutinho, said what the Government had heard in the consultation responses “gives us confidence to establish a new national SEND and alternative provision system.”¹¹⁰ The Minister also published a letter to parents providing [an overview of the Government’s plans](#).¹¹¹

The Department for Education also published [a short blog with an overview of the Plan](#).¹¹²

4.4 Teachers

Teachers are required to have a clear understanding of the needs of pupils with SEND, including autism, as part of the [Teachers’ standards](#).¹¹³ The Department for Education has adopted a [framework of core content for initial teacher training](#), which gives direction to training providers on what should be prioritised to ensure their programmes enable trainees to meet the Teachers’ Standards in full.

Over 135,000 professionals have undertaken autism awareness training since the [Universal Services programme](#) began in May 2022, which aims to bring together SEND-specific training and support for staff working in schools and further education.¹¹⁴

Autism strategy 2021–26

The 2021–26 autism strategy includes a commitment of £600,000 for staff autism training and professional development in schools and colleges in 2021 to 2022, to improve understanding of autism amongst educational professionals.¹¹⁵

The strategy also set out that, in the first year, the Government would launch a new anti-bullying programme, and put in place new Mental Health Support Teams and training for Designated Senior Mental Health Leads within

¹¹⁰ [HC Deb 2 March 2023 c42WS](#)

¹¹¹ DfE, [Message to parents of children with SEND from Claire Coutinho MP, Minister for Children, Wellbeing and Families](#), 2 March 2023

¹¹² DfE, [How we are improving support for children with Special Educational Needs and Disabilities \(SEND\)](#), 2 March 2023

¹¹³ DfE, [Teachers’ standards](#), December 2021

¹¹⁴ [PQ 14564 \[Autism: Education\], 22 February 2024](#)

¹¹⁵ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), July 2021, p18

schools, which it said would “also benefit autistic pupils who are more likely to experience poor mental health.”¹¹⁶

The strategy set out the Government’s commitment to opening 37 new special free schools, of which 24 would have provision specifically for autistic children and young people, expected to start operating from September 2022.¹¹⁷

A response to a parliamentary question on [progress with the autism strategy](#) in February 2024, the Minister for Children said:

The department is investing in the Free Schools programme, which is committed to improving SEND provision across the country. There are currently 108 open special free schools and a further 76 approved to open.¹¹⁸

4.5 Exclusions policy

Statutory guidance is in place on [School suspensions and permanent exclusions](#). The guidance makes clear that it is only lawful to exclude a pupil for disciplinary reasons, and states explicitly that it is “unlawful to exclude a pupil simply because they have SEN or a disability that the school feels it is unable to meet.”¹¹⁹

4.6 Support in higher education

England’s statutory Special Educational Needs and Disabilities (SEND) system does not extend to higher education, which is education generally undertaken in universities. Providers are instead bound by different statutory duties under the [Equality Act 2010](#), in Great Britain, when it comes to supporting autistic students in higher education. There is also different funding in place known as the [Disabled Students’ Allowance](#) (DSA).

Equality Act 2010

Publicly funded higher education providers have a duty under the [Equality Act 2010](#) not to discriminate against potential or current students if they have a disability.

¹¹⁶ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), July 2021

¹¹⁷ 16 special free schools have opened since September 2022. See Gov.uk, [Get information about schools](#).

¹¹⁸ [PQ 12848 \[Autism\], 12 February 2024](#)

¹¹⁹ DfE, [School suspensions and permanent exclusions](#), September 2023, p16

Not all autistic students will use the word “disabled” about themselves, but autistic students would be protected under the Equality Act if their autism meets the definition of disability set out in the Act.

A disability is defined in the Act as: “a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.”¹²⁰

Higher education providers must not discriminate against a student with a disability in relation to admissions, how education is provided, exclusion, and any other disadvantage or denial of opportunity or choice. How education is provided includes:

- teaching
- assessments and exams
- facilities, including lecture halls, libraries, and IT
- leisure, recreation, entertainment, and sports facilities
- the physical environment
- disciplinary procedures.

Reasonable adjustments

The Equality Act 2010 requires higher education providers to make “reasonable adjustments” for disabled people.¹²¹ The duty aims to ensure disabled people do not face “substantial disadvantage” compared to non-disabled people.¹²²

- The first requirement of the duty covers changing the way things are done (such as changing a practice).
- The second covers making changes to the built environment (such as providing access to a building).
- The third covers providing auxiliary aids and services (such as providing special computer software or providing a different service).¹²³

The aim is to prevent disabled people from being disadvantaged and to encourage greater equality in participation and outcomes among all students. The Office for Students, which regulates higher education in

¹²⁰ Disability Rights UK, [Factsheet F56. Understanding the Equality Act: Information for disabled students](#), June 2020

¹²¹ [Equality Act 2010](#), Section 20 and Schedule 13

¹²² See the National Autistic Society’s webpage on [Disability discrimination in further and higher education \(GB\)](#), which provides information on discrimination and reasonable adjustments in higher education for autistic students

¹²³ [Equality Act 2010](#), Section 20

England, has published [information on effective practice and resources](#) to assist higher education providers in supporting disabled students.¹²⁴

The [Disabled Students' Commission](#) is an independent group established by the Office for Students in March 2020 that provides advice and information to higher education providers to improve support for disabled students.

Universities have student support advisers, and many will also have specific disability advisers, who can discuss with autistic students what reasonable adjustments might be available to them depending on their personal situation.¹²⁵ Many universities will also publish information on their websites setting out what support is available to autistic students.¹²⁶

Disabled Students' Allowance

[Disabled Students' Allowance](#) (DSA) helps to cover the extra costs a student might incur because of a disability, including a long-term health condition, mental health condition, physical disability, sensory disability, or specific learning difficulty.¹²⁷ Autistic students are eligible for DSA.

DSA can help to pay for:

- specialist equipment, such as a computer or disability-related software;
- a non-medical helper, such as a British Sign Language interpreter;
- the day-to-day costs of study related to the student's disability; and
- travel costs.

The amount of DSA a student is entitled to will depend on their individual needs. Students may need to provide evidence of their disability and attend a Study Needs Assessment to establish the necessary support. For autistic students, evidence could be a formal medical diagnosis, or a 'working diagnosis' from a doctor.

In England, undergraduate and postgraduate students can get up to £26,948 of support for the 2024/25 academic year.¹²⁸ Students apply through Student Finance England and the money is generally paid directly to the organisation providing the service or equipment, but may also be paid into the student's bank account depending on the support required.

The Government's SEND Improvement Plan said the Department for Education and the Welsh Government are working with the Student Loans Company to reduce the length of time between a student making a DSA application and

¹²⁴ Office for Students, [Disabled students](#), 27 July 2020

¹²⁵ Disability Rights UK information on some common adjustments for disabled students: Disability Rights UK, [Adjustments for disabled students and apprentices](#), May 2023

¹²⁶ See for example University of Brighton, [Students with autistic spectrum conditions](#)

¹²⁷ Gov.uk, [Help if you're a student with a learning difficulty, health problem or disability](#)

¹²⁸ Gov.uk, [Help if you're a student with a learning difficulty, health problem or disability](#)

having their support agreed. It also said the Government would “seek to set expectations” on how students should be supported to apply for DSA.¹²⁹

Transitioning into higher education

The consultation period for the Government’s 2022–2023 SEND review revealed some young people with SEND do not feel effectively supported to transition into higher education. Delays to receiving support through the Disabled Students’ Allowance (DSA) were highlighted, as were differences in the levels and types of support available at different higher education providers.¹³⁰

The transition to higher education can be especially challenging for neurodiverse students. Rachel Nowicki, Disability Support Advisor at the Dyson Institute of Engineering and Technology, has said coping strategies “can crumble in the face of increased independence, the removal of existent scaffolding and a new routine.”¹³¹

The [2021–26 autism strategy](#) identifies “improving autistic children and young people’s access to education and supporting positive transitions into adulthood” as a priority area. By 2026, the Government wants transitions into adulthood to improve, so that more autistic young people can, among other things, access higher education opportunities.

The Government’s SEND Improvement Plan states the Department for Education is developing “good practice guidance” to support transitions for children and young people with SEND and in alternative provision between all stages of education from early years education.¹³² This will focus initially on transitions into and out of post-16 settings, including transitions into employment, adult services, and out of alternative provision.

A [blog post on the Department for Education’s teaching blog](#) in March 2022 by Leila Morne, an Advanced Autism Practitioner and Lecturer in Autism at Weston College, highlights the increase in the number of autistic university students and outlines how they can be better supported so their university experience is improved. It suggests immersive learning experiences to teach money management and study and social skills, as well as individualised training programmes so students can access tailored support.¹³³

¹²⁹ DfE, [SEND and alternative provision improvement plan: right support, right place, right time](#), CP 800, March 2023, p46

¹³⁰ DfE, [SEND and alternative provision improvement plan: right support, right place, right time](#), CP 800, March 2023, p46

¹³¹ Advance HE, [A proactive approach to neurodiversity in higher education](#), 21 March 2022

¹³² DfE, [SEND and alternative provision improvement plan: right support, right place, right time](#), CP 800, March 2023, p45

¹³³ DfE teaching blog, [Supporting students with SEND transition into higher education](#), 29 March 2022

5 Employment and autism

5.1 Statistics on autistic people in employment

Since January 2020, the Office for National Statistics (ONS) has collected data on autistic people through the [Annual Population Survey](#).

The Department for Work and Pensions publishes an annual set of [statistics on the employment of disabled people](#) which uses data from the survey, and includes a breakdown of employment rates for disabled people depending on the type of disability. These statistics use the [Government Statistical Service \(GSS\) Harmonised Standard definition of disability](#), in line with the Equality Act 2010 core definition. A person is considered disabled if they have a self-reported long-standing illness, condition or impairment, which causes difficulty with day-to-day activities.¹³⁴

These statistics show that disabled people on the autism spectrum were among the least likely to be in employment of all disabled people. 30.6% of disabled people with autism as a main or secondary health condition were in employment in the 2022/23 financial year, which compared to 53.9% for all disabled people and 81.9% of non-disabled people.

The National Autistic Society reported in 2016 that 77% of unemployed autistic people wanted to work.¹³⁵

The ONS have reported that disabled employees with autism as their main impairment have a wider pay gap in comparison with non-disabled employees than disabled people with other types of main impairment. Median pay in 2021 for disabled employees with autism was 33.5% less than that for non-disabled employees.¹³⁶

The Association of Graduate Careers Advisory Services (AGCAS) [Disability Task Group](#) produces an annual report on the employment outcomes of disabled graduates. In their 2024 report they said that autistic graduates experienced universally poorer employment outcomes during 2020 and 2021 than graduates with no known disability and than other disabled graduates, and face the largest barriers in their transition to work:¹³⁷

¹³⁴ DWP, [The employment of disabled people](#), 26 October 2023

¹³⁵ National Autistic Society, [The autism employment gap \(PDE\)](#), October 2016

¹³⁶ ONS, [Disability pay gaps in the UK: 2021](#), 25 April 2022

¹³⁷ AGCAS Disability Task Force, [What Happens Next in Challenging Times?](#), 28 February 2024

- They were least likely to be in full-time employment of all the disability groups, and most likely to be in part-time employment.
- They were most likely to be unemployed.
- They were less likely to be on a permanent/open ended contract, and more likely to be on a fixed-term contract lasting less than 12 months.
- They were more likely to be over-qualified for their job, and working in roles that did not require their qualification.¹³⁸

In their September 2019 report [The Autism Act, 10 Years On \(PDF\)](#), the All-Party Parliamentary Group on Autism found only 12% of autistic adults were receiving employment support, despite 42% needing it and only 13% said the support they were receiving helped them find or stay in work. Only 4% said Jobcentre Plus staff have a good understanding of autism.¹³⁹

5.2 Buckland review (February 2024)

In April 2023, the Department of Work and Pensions announced a [review considering how to improve autistic people's employment prospects](#), led by Sir Robert Buckland KC MP and supported by the charity Autistica.¹⁴⁰

The Buckland Review of Autism Employment was published in February 2024.¹⁴¹

The review highlighted some of the potential barriers to work for autistic people:

There is a wide range of potential barriers to work for autistic people; poor preparation by employers, unfair hiring practices, unclear processes and outdated attitudes all play a role. From a young age, autistic people are less likely than their peers to have the time, connections or support to seek out work-related experiences and career advisors are often poorly equipped to support autistic people. This has knock-on effects for later employment prospects.

Autistic people have far more negative experiences of interviews, group tasks and psychometric tests. Autistic jobseekers must navigate vague, generic job descriptions, ambiguous interview questions and challenging sensory environments, often with an emphasis on social skills rather than job skills. Many feel they must mask their autistic traits to succeed.

¹³⁸ AGCAS Disability Task Force, [What Happens Next? 2022 \(A report on the outcomes of 2019 disabled graduates\)](#), 26 May 2022

¹³⁹ National Autistic Society, [The Autism Act, 10 Years On: A report from the All-Party Parliamentary Group on Autism on understanding, services and support for autistic people \(PDF\)](#), 15 September 2019

¹⁴⁰ DWP press release, '[New review to boost employment prospects of autistic people](#)', 2 April 2023

¹⁴¹ DWP, [The Buckland Review of Autism Employment: Report and recommendations](#), 28 February 2024

Even after finding work, maintaining long-term employment remains a challenge for autistic people. Many do not receive the necessary support or adjustments to enable them to fulfil their role in the face of inaccessible sensory and social environments.¹⁴²

The review reported that only around 35% of autistic employees are fully open about being autistic, with 1 in 10 not disclosing to anyone at work.

The review made recommendations across five areas:

1. To create a national campaign aimed at employers with initiatives to raise awareness, reduce stigma and capitalise on productivity. This would raise awareness of the benefits that employing autistic people have brought to their businesses, highlight the advice and support available to employers and promote the [Autistica Neurodiversity Employers Index](#).
2. To support autistic people to begin or return to a career by promoting employment support programmes and ensuring these are designed to meet the needs of autistic people. This would also involve improving awareness of Access to Work and the support it can provide.
3. To put in place recruitment practices that appropriately support autistic applicants. This will include ensuring that careers advisors have a good understanding of autism and are able to provide appropriate advice to autistic people.
4. To support autistic people already in the workforce. This will involve ensuring that the 2018 [Neurodiversity at Work guidance \(PDF\)](#) is accessible to employers, and working with autism charities to produce “autism design guides”, which will “show how to create appropriate and supportive design of premises, furnishings, equipment and procedures”.
5. To encourage and support career progression, by promoting the value of support networks within larger organisations, and by developing packages of training focused on helping autistic staff to progress.¹⁴³

5.3

Autism strategy 2021–26

In the 2021–26 autism strategy, the Government said by 2026, it will have improved the support provided to autistic people to help them find and stay in work:

By the end of the strategy, we will have improved the support autistic people can access to find and stay in work. This includes making sure that existing

¹⁴² DWP, [The Buckland Review of Autism Employment: Report and recommendations](#), 28 February 2024, paras e.5-e.6

¹⁴³ DWP, [The Buckland Review of Autism Employment: Report and recommendations](#), 28 February 2024

services and work programmes are more autism-inclusive and better able to help autistic people find the right employment opportunity for them. In addition, we will have improved welfare support for autistic people who are unable to work, so they can get the support they need to live well in their communities.¹⁴⁴

As part of the strategy, the Government made various commitments to supporting autistic people in employment in 2021/22. These included:

- Improving employer awareness of autism: developing a better understanding of the benefits of employing autistic people and the adjustments needed to recruit and properly support them.
- Improving the accessibility of employment programmes for autistic people.
- Making Jobcentres more autism-inclusive.¹⁴⁵

The strategy also outlines some of the programmes currently in place to meet these commitments.¹⁴⁶ These include:

- The [Disability Confident](#) scheme aims to help organisations “improve how they attract, recruit and retain disabled workers”. This will include webinars focused specifically on supporting autistic people in the workplace.¹⁴⁷
- The [Access to Work](#) programme provides support to meet the needs of disabled people in the workplace. Access to Work grants are available to both employees and to the self-employed, and aim to provide practical and financial support to help disabled people find or stay in work.¹⁴⁸
- The [Intensive Personalised Employment Support programme](#) provides personalised support to those with more complex needs or barriers. People on this programme will have a dedicated support worker who will provide one-to-one support and training to help them get into work. They will usually receive this support for 15 months, as well as six months of on-the-job support if they find employment.¹⁴⁹
- The [Autism Exchange Internship Programme](#) aims to provide autistic young people with experience of working in the Civil Service. The Government has committed to expanding this programme outside of London and the South East.¹⁵⁰

¹⁴⁴ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026 \(PDF\)](#), 21 July 2021

¹⁴⁵ As above, p22

¹⁴⁶ As above, pp22-23

¹⁴⁷ HM Government, [Disability Confident](#)

¹⁴⁸ Gov.uk, [Access to Work: get support if you have a disability or health condition](#)

¹⁴⁹ Gov.uk, [Intensive Personalised Employment Support](#)

¹⁵⁰ DHSC and DfE, [Autism strategy action plan: 2021 to 2022 \(Annex A\) \(PDF\)](#), 22 July 2021, p9

Information on these schemes is provided in the Library briefing, [Disabled people in employment](#).

5.4 Accessing Jobcentre Plus offices and services

The 2021–26 autism strategy acknowledged concerns that some autistic people struggle to get the right support because they feel Jobcentre staff do not understand their needs, or the adaptations they need to make to engage with autistic people, and that for some people the Jobcentre environment can be anxiety-inducing or distressing.

The strategy said the Government would continue efforts to make the Jobcentre network more welcoming and supportive to autistic customers, developing and testing new approaches to provide intensive support through ‘Health Model Offices’.¹⁵¹ Further information on Health Model Offices and other local initiatives to support autistic people can be found in paragraphs 126 to 130 of the [Health and Disability Green Paper](#).

For Department for Work and Pensions (DWP) staff, there is also a ‘[Hidden Impairments Toolkit](#)’ (PDF).¹⁵² The purpose of this resource is to “help DWP colleagues understand how they can provide better support to claimants and people with autism and associated hidden impairment conditions”. The Government has previously reported it is unable to assess the effectiveness of this training due to the lack of robust employment figures for autistic people.¹⁵³

Starting from October 2021, 15 Jobcentre Plus sites have been testing an ‘autism framework’, designed with the National Autistic Society, to “transform the service available to jobseekers on the autism spectrum”. The framework pilot is aiming to help people on the autism spectrum “find, retain and progress in fulfilling jobs”. It involves assessing the current state of knowledge and practices for dealing with autistic customers within those offices and developing a new service delivery framework “that ensures those customers get the support they need, in the way they need it”.¹⁵⁴ A DWP press release explains:

The framework explores how best to support autistic people into employment, including ensuring jobcentre appointments with autistic customers take place in the right environment and educating local employers in the additional requirements of autistic workers.

¹⁵¹ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 22 July 2021, chapter 5

¹⁵² Hidden Impairment National Group, [Uncovering Hidden Impairments Toolkit \(PDF 622KB\)](#), March 2017 (cited in a [DWP Freedom of Information response of 14 October 2019](#), DWP Ref: FOI2019/32844)

¹⁵³ [PQ 203312](#), 8 January 2019

¹⁵⁴ DWP press release, [New government support package to help more disabled people into work](#), 29 December 2021

For example, many autistic people become distressed in busy, bright or noisy environments. As part of the pilot, jobcentre staff will therefore be asked to carry out appointments with customers triggered in this way in quieter rooms, with more appropriate lighting.

Work coaches will also be able to help providers and employers in the local communities understand the additional needs required by autistic employees, which should in turn create more opportunities for autistic jobseekers in settings where they can thrive.¹⁵⁵

All 15 Jobcentres involved “achieved accreditation”¹⁵⁶ and the Government is “exploring whether this framework and these improvements can be rolled out across the wider network.”¹⁵⁷

5.5 Other developments

The DWP worked with nine local authorities on a proof of concept for a Local Supported Employment scheme between November 2017 and May 2019. This aimed to support people with a learning difficulty or autism into work.¹⁵⁸ There were 580 referrals to the scheme during this period, with 560 people starting the scheme and 260 people starting a job.¹⁵⁹

In November 2022, the Government provided funding to expand this scheme to 28 local authority areas across England and Wales until March 2025, with the intention of supporting around 2,000 adults with learning disabilities and/or autism move into and stay in work.¹⁶⁰

The DWP has worked with various autism support groups and charities to develop a series of tools aiming to help autistic people find sustained employment.

It worked with Autism Alliance UK to produce an [Autism and Neurodiversity toolkit in April 2017](#). The aim of this toolkit is to support awareness and understanding of Autism Spectrum Conditions and provide guidance to support autistic people into employment. The toolkit is updated regularly by Autism Alliance UK.¹⁶¹

¹⁵⁵ DWP press release, [New government support package to help more disabled people into work](#), 29 December 2021

¹⁵⁶ [PQ65876, 26 October 2022](#)

¹⁵⁷ DWP, [Transforming Support: The Health and Disability White Paper, CP 807](#), 15 March 2023, para 82

¹⁵⁸ BASE, [Supported Employment Proof of Concept](#) (accessed 17 April 2023)

¹⁵⁹ [PQ 121078](#), 16 January 2023

¹⁶⁰ DWP, [Transforming Support: The Health and Disability White Paper](#), 15 March 2023

¹⁶¹ [PQ 252853](#), 17 May 2019

5.6 Statutory guidance for local authorities on employment outcomes

In March 2015, the Government produced updated [statutory guidance for local authorities and NHS organisations](#) to support the implementation of the Government's [Think autism](#) programme of action. This set out legal duties for local authorities to improve employment outcomes for autistic people:

Local Authorities must:

- Ensure that the assessment and care planning process for adult needs for care and support considers participation in employment as a key outcome, if appropriate, and looks at the ways that any such needs may be met in a way which could support adults with autism to become 'work ready';
- when carrying out a needs assessment, consider whether matters other than the provision of care and support could contribute to the achievement of the outcomes an adult with autism wishes to achieve in day-to-day life, and whether the adult would benefit from the provision of anything under section 2 or 4 of the Care Act (preventative services or information and advice services), or anything that may be available in the community, including signposting, as appropriate, to Access to Work for interview support, and to other appropriate benefits and agencies that can help people with autism to find and keep a job.
- Ensure that employment is promoted as a positive outcome for the majority of children and young people with autism who have EHC plans and that routes to employment are fully explored during the reviews of those plans from Year 9 (age 13-14) onwards and included in plans where appropriate. Information on preparing for and finding employment must be included in the local authority's Local Offer under the Children and Families Act 2014.¹⁶²

5.7 Employers and anti-discrimination legislation

Many people who are neurodivergent are covered by the Equality Act 2010 under the definition of disability. In the Act, a person is defined as having a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.¹⁶³

The Equality Act prohibits both direct and indirect disability discrimination in employment and recruitment.¹⁶⁴

¹⁶² DH, [Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy \(PDF\)](#), March 2015, p51

¹⁶³ Section 6, [Equality Act 2010](#)

¹⁶⁴ Section 39, [Equality Act 2010](#)

The Act also prohibits employers from harassing or victimising disabled people.

Reasonable adjustments

Under the [Equality Act 2010](#), employers must make reasonable adjustments to support disabled job applicants and employees.¹⁶⁵ These changes should either remove or reduce a disadvantage related to someone's disability.¹⁶⁶

Examples of reasonable adjustments are included in the guidance and on the Gov.uk page [Reasonable adjustments for workers with disabilities or health conditions](#).¹⁶⁷ Access to Work funding can be applied for towards the cost of making such reasonable adjustments.¹⁶⁸

The Equality and Human Rights Commission has provided [Examples of reasonable adjustments in practice](#).¹⁶⁹

Access to adjustments

The Buckland Review reported research findings that access to adjustments for autistic employees is “highly variable”, and that the onus is normally on the autistic employee to identify and advocate for the adjustments that they need. It also reported that a third of autistic employees felt unable to discuss their adjustment needs at all, that a quarter of requests for adjustments were rejected and that the adjustments were poorly implemented for more than 1 in 10 employees.¹⁷⁰

The review made various recommendations to remove the barriers to adjustments for autistic employees. This included recommendations around making workplaces more inclusive, modernising recruitment practices and raising awareness of Access to Work.

The Library briefing [Legal advice and help in employment matters](#) explains the options available to individuals who feel their rights to non-discrimination or reasonable adjustments have been breached, and who require legal assistance. One of the options available is to make a claim to an employment tribunal, and the steps involved in this process are summarised in the Library casework article [Making a claim to an employment tribunal](#).

¹⁶⁵ As above

¹⁶⁶ ACAS, [Reasonable adjustments at work](#) (accessed 28 March 2024)

¹⁶⁷ Gov.uk, [Reasonable adjustments for workers with disabilities or health conditions](#). (accessed 2 March 2023)

¹⁶⁸ Gov.uk, [Access to Work: get support if you have a disability or health condition](#). (accessed 2 March 2023)

¹⁶⁹ Equality and Human Rights Commission, [Examples of reasonable adjustments in practice](#). (accessed 2 March 2023)

¹⁷⁰ DWP, [The Buckland Review of Autism Employment: Report and recommendations](#), 28 February 2024

6 Social security and autism

Autistic people may potentially be entitled to a range of different benefits including:

- Benefits to help with the extra costs of a disability, such as [Personal Independence Payment \(PIP\)](#), which is replacing [Disability Living Allowance \(DLA\)](#) for working-age adults.
- ‘Income replacement’ benefits to cover day to day living costs. This includes benefits such as [Employment and Support Allowance \(ESA\)](#), but increasingly the main source of support will be [Universal Credit](#).

6.1 Personal Independence Payment

Personal Independence Payment (PIP) is replacing Disability Living Allowance (DLA) for people of working age. Like DLA, PIP is non-means-tested and is intended to help with the extra costs arising from ill health or disability. It has two components: a mobility component, based on an individual’s ability to get around; and a ‘daily living’ component, based on ability to carry out various day to day activities. Each component has two rates.

PIP was introduced for new claims from April 2013, and Department for Work and Pensions (DWP) was reassessing all existing working age DLA claimants for the benefit. Young people in receipt of DLA were also reassessed for PIP when they reach 16). New invitations to claim PIP for working age DLA claimants are not currently being sent out following delays caused to the PIP rollout during the Covid-19 pandemic.¹⁷¹

The PIP assessment was intended to provide a more ‘holistic’ assessment of the impact of a health condition on an individual’s ability to participate in everyday life, compared with that for DLA. PIP was also intended to target support more closely on those most in need. The Coalition Government assumed initially that PIP would ultimately cost 20% less than DLA, but the Office for Budget Responsibility (OBR) has shown that expenditure on PIP is exceeding that on DLA. In December 2019 the OBR noted that, despite its July 2015 forecast expecting spending on working-age disability benefits to fall in cash terms between 2014-15 and 2018-19, spending increased by 36% over the

¹⁷¹ DWP, [PIP statistics: background quality and methodology report](#), 22 March 2024

period, amounting to a £4 billion underestimate of disability benefits spending in 2018-19, with PIP rollout 75% complete.¹⁷²

The DWP is responsible for handling claims for PIP and making decisions on entitlement to benefit. Contracted assessment providers are a key element in the claims process. Atos Healthcare (operating as [Independent Assessment Services](#)) holds the contracts for undertaking assessments in Northern England, London, Southern England, and Scotland (although PIP is being replaced in Scotland with [Adult Disability Payment](#), which does not use outsourced assessments). Capita Business Services Ltd holds the contracts covering Wales, Central England, and Northern Ireland. These are separate from the contract under which Maximus undertakes Work Capability Assessments for Employment and Support Allowance and Universal Credit claims.

However, from September 2024, a new “Functional Assessment Service” supporting both PIP assessments and WCAs will begin, with all functional health assessment services within a geographic area delivered by a single provider. This is part of a wider process of creating a new Health Assessment Service, which is due to be rolled out nationally from 2029, with a “transformed PIP service” and the [planned removal of the Work Capability Assessment](#).¹⁷³ Contracts for this have now been awarded for 2024 to 2029: Maximus will cover North England and Scotland, Capita will cover the Midlands, Wales and Northern Ireland, Ingeus UK Ltd will cover South East England, London, and East Anglia, and Serco Ltd will cover South West England.¹⁷⁴

Other extra-costs disability benefits provide support for children (DLA) and people of State Pension age (Attendance Allowance). All these benefits are being replaced with new Disability Assistance benefits in Scotland.¹⁷⁵

PIP statistics

A PIP claimant’s “main disabling condition” is recorded during their assessment. The disability categories used are based on DWP data standards.¹⁷⁶

As of January 2024, 190,173 PIP claimants had an autistic spectrum disorder recorded as their main condition.¹⁷⁷ This accounted for 5.4% of all PIP recipients.

The specific disabilities recorded for these claimants were:

¹⁷² Office for Budget Responsibility, [Welfare trends report](#), December 2019, paras 2.28-2.31

¹⁷³ [HCWS1056](#)

¹⁷⁴ [HCWS807](#); [HCWS1056](#)

¹⁷⁵ See [Disability Assistance](#) on the Scottish Government website (accessed 23 March 2024)

¹⁷⁶ DWP, Stat-Xplore, [PIP disability metadata](#)

¹⁷⁷ Autistic spectrum disorder is a data standard used by the DWP. It includes autism, Asperger syndrome and Retts disorder. DWP, [Stat-Xplore](#), PIP cases with entitlement dataset

- Autism (157,183 recipients, 83%)
- Asperger syndrome (32,540 recipients, 17%)
- Retts disorder (444 recipients, 0.2%)¹⁷⁸

73% of PIP claimants with an autistic spectrum disorder as their main condition were male (97,638).

These figures include only those for whom an autistic spectrum disorder was recorded as their main condition on their PIP claim. Other PIP claimants may have an autistic spectrum disorder in addition to their main recorded condition.

The table below shows the total number of PIP claimants with an autistic spectrum disorder as their main condition, broken down by type of disorder and PIP award level.

Just over half (56%) of claimants with an autistic spectrum disorder were receiving the highest level of award (both the daily living and mobility component at the enhanced rate).

¹⁷⁸ DWP categorises Retts disorder (also known as Rett syndrome) as an autistic spectrum disorder, although it is no longer classed as such in the Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5).

PIP claims in payment to people with an autistic spectrum disorder as main disabling condition				
By award level: January 2024 (Great Britain)				
	Total: Autistic spectrum disorders	Of which:		
		Autism	Asperger syndrome	Retts disorder
Daily Living - Enhanced	159,610	135,398	23,790	427
In combination with:				
Mobility Award - Enhanced	105,870	94,605	10,859	404
Mobility Award - Standard	43,271	33,782	9,476	15
Mobility Award - Nil	10,471	7,008	3,455	7
Daily Living - Standard	26,036	18,252	7,772	18
In combination with:				
Mobility Award - Enhanced	3,445	2,663	774	..
Mobility Award - Standard	12,010	8,586	3,425	6
Mobility Award - Nil	10,581	7,003	3,566	10
Daily Living - Nil	4,520	3,534	983	..
In combination with:				
Mobility Award - Enhanced	935	730	200	..
Mobility Award - Standard	3,520	2,756	766	..
Mobility Award - Nil	67	48	18	..
Total	190,173	157,183	32,540	444

Notes: Components may not sum to totals due to statistical disclosure control, which has been applied at source to avoid the release of confidential data. ".." denotes a nil or very small number of claimants.

Source: [DWP Stat-Xplore](#), PIP cases with entitlement dataset

Application success rates

The table overleaf shows that between April 2013 and January 2024, 49% of new claims made by people with an autistic spectrum disorder as their main condition were awarded PIP, while the remaining 51% were disallowed. This was higher than the award rate for all conditions (44%). For those whose main condition was Asperger syndrome, the award rate for new claims was lower at 43%.

For people who were previously receiving Disability Living Allowance (DLA) and who underwent reassessment to determine entitlement to PIP, 76% of those with an autistic spectrum disorder were awarded PIP, compared with 71% for all conditions. Again, the award rate for reassessed DLA claimants with Asperger syndrome was lower at 56%.

Clearances of PIP new claim applications and DLA-to-PIP reassessments, by main disabling condition and initial DWP decision

Great Britain: April 2013 to January 2024

	Total	Of which:			
		Awarded		Disallowed	
New claim applications					
All claims where disabling condition is recorded	5,683,394	2,528,106	44%	3,155,290	56%
Total: Autistic spectrum disorders	81,955	40,146	49%	41,811	51%
Autism	60,174	30,768	51%	29,405	49%
Asperger syndrome	21,730	9,347	43%	12,380	57%
Retts disorder	52	30	58%	22	42%
DLA-to-PIP reassessments					
All claims where disabling condition is recorded	2,126,533	1,517,573	71%	608,962	29%
Total: Autistic spectrum disorders	179,551	136,728	76%	42,823	24%
Autism	140,658	114,792	82%	25,867	18%
Asperger syndrome	38,413	21,484	56%	16,930	44%
Retts disorder	481	454	94%	26	5%

Notes: Components may not sum to totals due to statistical disclosure control, which has been applied at source to avoid the release of confidential data.

Source: [DWP Stat-Xplore](#), PIP clearances dataset

PIP mobility component and psychological distress

In March 2017 the DWP introduced regulations to reverse the effect of two Upper Tribunal judgments relating to the PIP eligibility criteria.¹⁷⁹ The most significant change made was to tighten the rules on access to the mobility component for people unable to undertake journeys due to “overwhelming psychological distress.” This would potentially affect people with a wide range of conditions, including autistic people. Disability organisations called on the Government not to proceed with the changes.

On 21 December 2017, the High Court ruled the March 2017 regulations were unlawful because they discriminated against people with disabilities in breach of Human Rights Act 1998 obligations and declared that the Secretary of State did not have lawful power to make the regulations (they were ‘ultra vires’) and should have consulted before making them.¹⁸⁰

The Government did not contest the High Court’s decision. The Secretary of State for Work and Pensions said her department would “take all steps necessary to implement the judgment in MH [the Upper Tribunal decision that

¹⁷⁹ See Commons Library briefing CBP-7911, [Changes to the Personal Independence Payment eligibility criteria](#)

¹⁸⁰ [RF v Secretary of State for Work and Pensions \[2017\] EWHC 3375 \(Admin\)](#)

had prompted the change to the regulations] in the best interests of our claimants, working closely with disabled people and key stakeholders over the coming months.”¹⁸¹

In June 2018 the DWP began to review around 1.6 million existing PIP awards, and PIP claims submitted since the original Upper Tribunal judgment in November 2016, to see who could be affected.¹⁸²

It was originally expected that the review would result in around 25,000 claimants by 2022 to 2023 receiving a PIP award who would not have otherwise done so, and around 165,000 receiving a higher award.¹⁸³ DWP statistics suggest that far fewer arrears’ payments than expected are being awarded. By 30 November 2022, the DWP had reviewed 990,000 PIP cases against the MH Upper Tribunal decision, but only around 4,300 resulted in additional payments being made.¹⁸⁴ Some have suggested the relatively small number of awards casts doubt on whether the DWP review is a genuine and effective attempt to identify underpaid PIP claimants.¹⁸⁵

6.2 Benefit assessments

A key concern of organisations working with autistic people is benefit assessors’ knowledge and understanding of the condition and how it affects people. In its September 2019 report ‘The Autism Act, 10 Years On’, the All-Party Parliamentary Group on Autism recommended the new autism strategy should:

- include a requirement in contracts for benefits assessment providers to provide all frontline assessors with autism training, and regularly monitor compliance; and
- ...develop guidance – working with autistic people and their families – to be disseminated to all providers carrying out benefits assessments on how to properly identify autistic people’s needs and ensure assessments truly capture their circumstances.¹⁸⁶

While acknowledging some autistic people struggle to access the support they need because they feel benefit assessors may not understand their needs, or because they find the assessment process difficult to engage with, the [2021–26 autism strategy](#) did not include any specific commitments on

¹⁸¹ [HCWS414, 19 January 2018.](#)

¹⁸² See DWP, [Personal Independence Payment \(PIP\): Implementation of legal decisions MH and R.J: Frequently Asked Questions \(FAQ\)](#), DEP 2020-0061, February 2020

¹⁸³ Office for Budget Responsibility, [Economic and fiscal outlook](#), March 2018, para 4.112

¹⁸⁴ DWP, [PIP administrative exercise: progress on cases cleared, at 30 November 2022](#), 15 December 2022

¹⁸⁵ [Update: LEAP Review May Be Unlawful Leading Barrister Tells Us, Now We Need Your Help](#). Benefits and Work Newsletter, 23 June 2021

¹⁸⁶ All-Party Parliamentary Group on Autism, [The Autism Act, 10 Years On](#), September 2019, p52

benefit assessments. It did say the DWP's upcoming Health and Disability Support Green Paper would consider how the welfare system could better meet the needs of disabled people, including autistic people.¹⁸⁷

Asked whether assessors undertaking Work Capability Assessments were required to undertake training on autism and autistic spectrum disorders, the then Minister for Disabled People, Sarah Newton, said in a written answer in November 2017:

All Healthcare Professionals conducting Work Capability Assessments receive extensive training regarding autism spectrum disorders as part of their initial new entrant training. This training programme includes simulated assessments covering claimants with autism and learning disabilities to allow Healthcare Professionals to develop appropriate consultation skills. All Healthcare Professionals have access to condition specific information on autism which is quality assured by external reviewers. Healthcare Professionals are further supported by Functional Champions who are available to provide advice to Healthcare Professionals on particular conditions including autism before, during or after an assessment.¹⁸⁸

The DWP's [Work Capability Assessment Handbook](#) for Healthcare Professionals gives further guidance in relation to the assessment of autistic people.¹⁸⁹

Asked what disability training medical professionals undertaking PIP assessments are required to have in respect to autism, the then Minister for Disabled People Justin Tomlinson said in January 2020:

All health professionals carrying out assessments are clinically qualified and registered practitioners in their own field.

DWP requires health professionals to have a broad training in disability analysis as well as awareness training in specific conditions which include autistic spectrum disorder.

While preparing to undertake an assessment, health professionals have access to a range of resources as well as experienced clinicians to support them in assessing claimants with conditions that they may not be familiar with.

Additionally, assessment providers engage with medical experts, charities and relevant stakeholders to strengthen their training programmes.¹⁹⁰

Both PIP assessment providers also have 'Health Condition Insight Reports' that cover autism specifically. These are completed by representative groups

¹⁸⁷ DHSC and DfE [National strategy for autistic children, young people and adults: 2021 to 2026](#), 22 July 2021, chapter 5

¹⁸⁸ [PQ 112878 \[Work Capability Assessment: Autism\], 20 November 2017.](#)

¹⁸⁹ DWP, [Work Capability Assessment handbook: for healthcare professionals](#), updated 19 October 2023

¹⁹⁰ [PQ 235 \[Personal Independence Payment: Medical Examinations\], 8 January 2020.](#)

and provide “insights from real life examples to describe common issues faced by the people they support”.¹⁹¹

Health Transformation Programme and the Health and Disability Green Paper

In March 2019 the then Secretary of State for Work and Pensions, Amber Rudd, announced her department had launched a ‘Health Transformation Programme’ to develop a new, integrated service, supported by a single digital system, for both Personal Independence Payment assessments and Work Capability Assessments.¹⁹² The department’s ambition in launching this programme was to make the assessment process “simpler, more user-friendly, easier to navigate and more joined-up for claimants, whilst delivering better value for money for taxpayers”.¹⁹³

Through this programme, the DWP has been trialling various changes and innovations to decision making and assessment processes on a small scale in a “safe environment” called the Health Transformation Area (HTA), to inform decisions on whether to roll out the changes nationally.¹⁹⁴

The first HTA location, in North London, was launched on 21 April 2021. The HTA was subsequently expanded to parts of Birmingham, and the DWP plans to expand to other parts of the country in the future.

Ideas the DWP is seeking to explore in the HTA, and as part of the wider Health Transformation Programme, include:

- Different ways of conducting assessments, including the scope for “triaging” claims so that people only have face-to-face assessments where absolutely necessary.
- Lessons from “forced changes” to assessment processes during the coronavirus pandemic, including the greater use of telephone and video assessments.
- How to make it easier for claimants to understand the evidence they need to provide, and why.
- Where people give consent, reusing medical evidence the department already holds on them, to provide a more “joined up” claimant experience and reduce the burden of having to provide the same information multiple times.

¹⁹¹ [PQ 79458 \[Autism and Hyperactivity: Females\], 30 November 2021.](#)

¹⁹² [HCWS1376 5 March 2019](#)

¹⁹³ Department for Work and Pensions, [Written evidence for the Work and Pensions Committee Health Assessments for Benefits inquiry](#), HAB0079, November 2021, p1

¹⁹⁴ As above, p7

- How to make claimants aware of the range of support available to them both from the DWP and more widely.¹⁹⁵

The DWP published [Transforming Support: The Health and Disability White Paper](#) alongside the 2023 Spring Budget on 15 March 2023. This noted an ongoing commitment to developing services in the Health Transformation Area, working towards:

- Making the claim journey more of a two-way conversation. This involves building a holistic picture of the person by seeking relevant evidence and clarifying our understanding at every stage;
- Telling people about our decisions in a simple, straightforward and compassionate way. This will help people understand the outcome we have reached and why, and also help us understand if we can provide further support; and
- Increasing the number of decisions we get right first time by engaging people throughout their journey and ensuring we are obtaining more relevant evidence earlier. This should lead to a reduction in mandatory reconsiderations and appeals and make it more straightforward to challenge the outcome of a claim.¹⁹⁶

The white paper also said the DWP is “evaluating how well telephone and video assessments are working compared to face-to-face assessments,” and is “progressing a move to an IT system that will have the capability to record all assessments, including telephone and video.”¹⁹⁷

The Health and Disability white paper also announced further plans for the new integrated Health Assessment Service (see page 52 above).

The National Audit Office (NAO) published a report, [Transforming health assessments for disability benefits](#), on 23 June 2023. This examined the DWP’s plans for its Health Transformation Programme.

The NAO noted that there are challenges to delivering the changes to assessments planned for as part of the programme without further delay, cost overruns, or scaling back the proposals. In terms of value for money, the transformation programme is ambitious, and that in its view it represents an opportunity to substantially improve the costs, timeliness and accuracy of functional health assessments while improving the experience for claimants and increasing the trust they have in the system.

However, the NAO also noted the gaps in the DWP’s approach, such as how it will integrate the service between different assessment providers, build an

¹⁹⁵ Department for Work and Pensions, [Written evidence for the Work and Pensions Committee Health Assessments for Benefits inquiry](#), HAB0079, November 2021, pp8-9. See also Department for Work and Pensions, [Shaping Future Support: The Health and Disability Green Paper](#), CP 470, 20 July 2021, chapter 3

¹⁹⁶ DWP, [Transforming Support: The Health and Disability White Paper, CP 807](#), 15 March 2023, paras 108-109

¹⁹⁷ As above, paras 110-113

interim model during the lifetime of the programme (currently due to continue until 2029) which will enable sufficient testing, and evaluate whether the programme is on track to deliver the planned benefits. It noted the DWP did not yet know how the reforms announced in the March 2023 white paper would affect the costs, benefits, and timetable of the programme, and that there would likely be a need to respond to further changes in the future.¹⁹⁸

Specialist assessors

The Health and Disability white paper published in March 2023 stated that evidence the DWP received from organisations and individuals in the consultation following the preceding green paper advocated:

- Assessors should be specialists in the condition(s) they are assessing but if they are not, they should research the condition(s) before the assessment.
- There should be more assessors with personal experience of disability or who have been trained by disabled people.
- [The DWP] should liaise with organisations and charities to ensure that assessors have knowledge of a wide range of disabilities and health conditions, including mental health conditions.¹⁹⁹

The white paper stated that the DWP will continue to develop assessors' skills and that, starting this year, "...will begin testing matching people's primary health condition to a specialist assessor."

In April 2023, the then Minister for Disabled People, Health and Work, Tom Pursglove, said the DWP would "begin testing matching people's primary health condition to a specialist assessor" this year, and that as part of this, assessors would take part in training to specialise in the functional impacts of specific health conditions.²⁰⁰ At the time of publication, a [PQ asking for an update on this testing](#) had not yet been responded to.²⁰¹

Plans to abolish the Work Capability Assessment

Chapter 4 of the white paper also outlined further plans for disability assessment reform.

The main proposal is to abolish Work Capability Assessment, which currently helps determine entitlement to extra amounts in Universal Credit and Employment and Support Allowance, as well as any work-related requirements people have to meet as a condition of their claim. Instead, a new "UC health element", available to claimants who also receive PIP, will replace the existing element for claimants who are assessed as having

¹⁹⁸ NAO, [Transforming health assessments for disability benefits](#), 23 June 2023

¹⁹⁹ DWP, [Transforming Support: The Health and Disability White Paper](#), CP 807, 16 March 2023, para 114

²⁰⁰ [PQ 177845 \[on Employment: Chronic illnesses and disability\]](#), 19 April 2023

²⁰¹ [PQ 19455 \[on Personal Independence Payment\], 19 March 2024](#)

“limited capability for work and work-related activity”.²⁰² Conditionality groups will no longer be assigned automatically following assessment, but will be decided individually through a “new personalised health conditionality approach”²⁰³

The Government argues that determining entitlement this way will “enable people to try to work without the fear of losing their benefits”, and conditionality changes will “give people confidence that they will receive support, for as long as it is needed, regardless of whether they are working.”²⁰⁴

These reforms will require new primary legislation, which will be brought forward in a future Parliament. The white paper says once legislation is passed:

These reforms would then be rolled out, to new claims only, on a staged, geographical basis from no earlier than 2026/27. We would expect the new claims roll-out to be completed within three years (so by 2029 at the earliest), when we would then begin to move the existing caseload on to the new system.²⁰⁵

6.3

Universal Credit

Universal Credit is replacing tax credits and means-tested benefits (including income-related Employment and Support Allowance and Housing Benefit) for working age individuals and families, in or out of work.

Challenges in claiming Universal Credit

For some people on the autism spectrum, navigating the Universal Credit system may be a challenge if they do not have an appointee to act on their behalf.²⁰⁶ An autistic person could, for example, face challenges making and managing their claim online, interacting (either online, or in person) with their Work Coach, and satisfying ‘conditionality’ requirements. The removal of

²⁰² DWP, [Transforming Support: The Health and Disability White Paper](#), CP 807, 16 March 2023,, paras 144-150

²⁰³ As above, paras 158-162

²⁰⁴ [HCWS 636, 15 March 2023](#)

²⁰⁵ DWP, [Transforming Support: The Health and Disability White Paper, CP 807](#), 15 March 2023, para 156

²⁰⁶ When a claimant lacks the capacity to manage their benefit affairs, the Secretary of State may appoint a person to act on their behalf for benefit purposes. For further information see the DWP UC guidance chapter on [Appointees, Personal Acting Bodies and Corporate Acting Bodies](#) (PDF), Version 13.0, current June 2023

‘implicit consent’ in Universal Credit may also make it harder for advisers and support workers to advocate for autistic clients.²⁰⁷

All Universal Credit claimants are required to agree to a [Claimant Commitment](#). This will record the activities they are required to undertake, including, where appropriate, doing all that can reasonably be expected of them to find work or prepare for work.

Support for autistic people accessing Universal Credit

The DWP should have in place procedures to identify Universal Credit claimants with complex needs – including those with learning disabilities – so they can get the support they need throughout the ‘customer journey’ and be subject to conditionality requirements that reflect their needs and circumstances. Identifying claimants with complex needs can also be important in determining whether the person needs extra help with making and maintaining their claim, whether they would benefit from alternative payment arrangements, in deciding whether there is ‘good cause’ for failing to comply with conditionality, or whether they should be offered home visits.²⁰⁸

Further information on arrangements for helping people unable to access Universal Credit via the standard online process can be found in the [DWP Universal Credit guidance chapter Assisted digital overview](#) (PDF).²⁰⁹

Information on the Help to Claim service – which provides “tailored, practical support to help people make a Universal Credit claim up to receiving their first full correct payment on time”²¹⁰ – is available on the Citizens Advice website – see [Get help applying for Universal Credit](#).

Guidance for DWP staff says that when a Universal Credit claimant with complex needs contacts the department, their customer journey “must be equal in quality and outcome to those whose needs are not complex” and it is important to ask them and record what additional support they need “to make sure it’s available every time the claimant needs it”. The guidance says this “will provide them with equal access to products and services and enable them to follow the standard claimant journey, if appropriate”.²¹¹ There have been concerns that arrangements for identifying those needing support have not always worked as intended.²¹²

²⁰⁷ Where implicit consent is accepted, a third party can deal with the DWP on behalf of a claimant in the absence of valid written authority, or where the claimant is not present at the time to confirm their consent verbally. In UC, the claimant must provide explicit consent before information can be disclosed to a representative – although an exception has been made for Members of Parliament. For further information see the DWP UC guidance chapter [Consent and disclosure including when to share with third parties](#) (PDF), Version 26.0, current January 2023

²⁰⁸ DWP UC guidance chapter [Complex needs overview](#) (PDF), Version 18.0, current March 2022

²⁰⁹ Version 14.0, current May 2021

²¹⁰ [PQ 6510 \[Universal Credit\], 31 October 2019](#)

²¹¹ As above

²¹² See [UC and complex needs](#), Owen Stevens, CPAG Welfare Rights Bulletin, August 2019

Guidance and training for Work Coaches

For Universal Credit claimants, their Work Coach is the key point of contact within the DWP. [A DWP microsite giving information for prospective applicants](#) for these posts explains:

As a Work Coach you hold a vital role in the Department, helping individuals and their families towards financial independence through work and enabling them to claim the support they need as they progress.

Work Coaches are customer-focused, dedicated individuals and able to deliver exceptional service with empathy and compassion to people who need their support.

As a Work Coach, you will use sound judgement to help people through some difficult, challenging times in their lives, and your tailored coaching can make a huge difference to their ability to find, stay in, and progress in a job.

In June 2023, then DWP Minister Tom Pursglove provided information on training and support for Work Coaches to enable them to support autistic claimants:

The DWP is committed to providing the best possible support for all customers to meet their individual circumstances.

Since the national roll-out of Universal Credit (2016) all DWP Work Coaches undergo a comprehensive learning journey. The learning provides staff with the knowledge and skills to enable them to treat each customer as an individual regardless of additional or complex needs.

In addition to this, DWP offer a learning product specific to autistic awareness, which is available to all work coaches on an 'at point of need' basis. The product includes:

- adapt how you communicate verbally
- adapt your body language
- show empathy
- adapt your environment

We do not keep information on how many work coaches have used this particular product.²¹³

²¹³ [PQ 190699 \[Jobcentres: Training\], 26 June 2023](#)

7 The criminal justice system and autism

7.1 Review of neurodiversity in the criminal justice system

The Ministry of Justice's (MoJ) September 2020 white paper [A Smarter Approach to Sentencing \(PDF\)](#) said the MoJ would launch a national 'call for evidence' to obtain a clearer picture of prevalence and the current national provision to support offenders with neurodivergent conditions in the criminal justice system.²¹⁴ It also said the Government would be improving awareness, understanding and training on neurodiversity across the system and would develop a national training toolkit to increase the skills of frontline staff on neurodiversity.

In December 2020 the then-Justice Secretary, Robert Buckland, commissioned HM Inspectorate of Prisons, with support from HM Inspectorate of Probation and HM Inspectorate of Constabulary and Fire & Rescue Services, to undertake an independent review of neurodiversity in the criminal justice system.²¹⁵

The report, [Neurodiversity in the criminal justice system: A review of evidence](#) was published in July 2021.²¹⁶ It said evidence received as part of the review suggests neurodivergence is more prevalent in the criminal justice system than in the wider community.²¹⁷

The review focused on four main themes:

- screening to identify neurodivergence in criminal justice system service users;
- adjustments that have been made to existing provision to support those with neurodivergent needs;

²¹⁴ MoJ, [A Smarter Approach to Sentencing, September 2020 \(PDF, 639KB\)](#), CP 292, p57

²¹⁵ Gov.uk, press release, [Fairer justice system for neurodivergent people to reduce crime](#), 18 December 2020

²¹⁶ Criminal Justice Joint Inspection, [Neurodiversity in the criminal justice system: A review of evidence](#), 15 July 2021

²¹⁷ As above para 2.11; Neurodiversity is defined in the review as an umbrella term for conditions under the broader category of neurodevelopmental disorders, including: learning difficulties and disabilities, attention deficit hyperactivity disorder, autism spectrum conditions, developmental language disorder, tic disorders and cognitive impairments due to acquired brain injury.

- programmes and interventions which have been specifically designed or adapted for neurodivergent needs; and
- training and support available to staff to help them support people with neurodivergent needs.²¹⁸

While the review found evidence of good local partnerships and was told of simple adjustments that could easily be made to support neurodivergent people in the criminal justice system, the Chief Inspectors concluded that the provision of services could be improved, as it was seen as “patchy, inconsistent and uncoordinated, [with] too little [...] being done to understand and meet the needs of individuals.”²¹⁹

The report made six recommendations, including an overarching recommendation about coordination. The main recommendation was for the MoJ to work with the Home Office, Department of Health and Social Care and the Department for Education and the Welsh Government to develop an overarching national strategy. The other recommendations were:

- A common screening tool for universal use within the criminal justice system should be introduced
- Screening data should be systematically collected and aggregated to provide a more accurate assessment of the prevalence of neurodivergence
- A programme of awareness-raising and specialist training should be developed and delivered to staff working within criminal justice services
- Adjustments to meet the needs of those with neurodivergent conditions should be made throughout the criminal justice system
- Criminal justice system agencies should work together and with other statutory and third sector organisations in a coordinated way, to understand and meet the needs of neurodivergent individuals in the community, prevent offending and support rehabilitation.²²⁰

The inspectorates said the MoJ should provide an action plan to address these recommendations within three months, followed by updates on progress at six and 12 months.

²¹⁸ Criminal Justice Joint Inspection, [Neurodiversity in the criminal justice system: A review of evidence](#), 15 July 2021, para 2.4

²¹⁹ As above, p4

²²⁰ As above, p6

Government response

The Government welcomed the report and in September 2021 said an action plan in response would be published in October 2021.²²¹

The [action plan](#) (PDF) was published in June 2022.²²² It set out which of the recommendations in the review had been agreed, partly agreed or not agreed by the Government. For those recommendations agreed or partly agreed, the action plan also set out steps to be taken. [The action plan was updated in January 2023 \(PDF\)](#) and a further update was published in September 2023.

January 2023 update

Following a six-month exploration phase, the Government concluded that a neurodiversity strategy specifically for the criminal justice system was not needed and that existing policies and strategies for neurodivergent people could be expanded to cover any gaps relating to the criminal justice system.

The January 2023 updated action plan noted that a Cross Government Working Group, led by the MoJ and an Operational Working Group, had been established to monitor and support the delivery of the action plan.²²³

The updated action plan states that neurodiversity support managers have been introduced in prisons and says that the Government plans to have one in every prison across England and Wales by 2024. It notes that Autism Accreditation is being promoted across the prison estate and states that a ‘National Neurodiversity Training Toolkit’ is now available for all frontline staff within prison and probation.

Regarding the recommendation for a common screening tool, the updated action plan said that having thoroughly examined the use of screening tools across the criminal justice system, the Government had concluded that whilst consistency of approach is necessary, it would be “inappropriate to use a single tool universally across all agencies because the time available to identify an individual’s needs and the types of reasonable adjustment available will vary at every stage of the system”.²²⁴

The updated action plan notes that the Police Working Group is producing a best practice directory to highlight examples of training, reasonable adjustments and innovations.²²⁵

September 2023 update

In September 2023, the MoJ published a shorter update addressing progress since January 2023. The MoJ explained that since several commitments would

²²¹ [PQ 45267 \[Offenders\], 15 September 2021.](#)

²²² Gov.uk, [A Response to the Criminal Justice Joint Evidence Review: Neurodiversity in the Criminal Justice System action plan](#), published 30 June 2022, last updated 25 January 2023

²²³ MoJ, [Action Plan](#) (PDF), updated 25 January 2023, p7

²²⁴ As above, p11

²²⁵ As above, p8

take longer to embed, they would provide a more substantive update at 18 months.²²⁶ Among others, the report outlined the following actions undertaken since January 2023:

- Held roundtables with the third sector, and engaged with stakeholders to understand issues for women and black people in receiving diagnoses of autism
- Made progress to increase police training and awareness of neurodiversity, including the publication of a “Neurodiversity Glossary of Terms” by the College of Policing
- The City of London Police are trialling ADHD screening in custody
- HM Courts and Tribunals Service launched the sunflower lanyard scheme to allow people to signal they may need additional support
- MoJ and NHS England have worked to support neurodivergent people who have a Community Sentence Treatment Requirements (CSTRs)
- The Prison and Probation services have recruited over 100 Neurodiversity Support Managers, ahead of the target of having one in each adult prison by 2024²²⁷

The update confirms the MoJ’s commitment to support neurodivergent people in the criminal justice system:

We are committed to maintaining this momentum and will continue to work alongside our colleagues in policing, justice, and health over the next six months to strengthen actions and fulfil the commitments set out in the Neurodiversity Action Plan.²²⁸

It concludes by outlining key areas of focus, including understanding barriers to diagnosing, identifying gaps in provision (including at first contact with the criminal justice system), and reviewing training and resources with race and gender differences in mind.²²⁹

7.2

Autism strategy 2021–26

The Government’s [National strategy for autistic children, young people and adults: 2021 to 2026](#) includes measures intended to improve understanding of

²²⁶ MoJ, [12-month update to the cross-government neurodiversity action plan](#) (PDF), GOV.UK, September 2023

²²⁷ As above.

²²⁸ MoJ, [12-month update to the cross-government neurodiversity action plan](#) (PDF), GOV.UK, September 2023, p2

²²⁹ As above

autism and support for autistic people within the criminal and youth justice systems.

The strategy says available evidence indicates autistic people may be over-represented as people who come into contact with the criminal and youth justice systems, as victims, witnesses or defendants.²³⁰

The strategy refers to the [All-Party Parliamentary Group \(APPG\) on Autism's 2019 report \(PDF\)](#), which found autistic people often have poor experiences when they come into contact with these systems.²³¹ The strategy notes a lack of understanding of autism can cause staff to misinterpret autistic people's behaviour, resulting in missed opportunities to divert them from the criminal and youth justice systems. The strategy also refers to evidence from the APPG on Autism's inquiry which highlighted that autistic people often find prison environments overwhelming.

The strategy committed to developing a better view of existing provision for neurodivergent adults, including autistic adults, through the review of neurodiversity in the criminal justice system.

It also committed to taking further steps in 2021/22 to:

- improve staff awareness and understanding of autism across the criminal and youth justice systems, including prison and probation staff, and youth custodial specialists
- undertake work to improve autistic people's access to adjustments and support and help make environments like prisons and probation services more autism friendly
- drive better access to health and social care services for those in contact with the criminal and youth justice systems, including the support they may need as they leave custody.²³²

The Department for Education (DfE) and Department of Health and Social Care (DHSC) have also published an implementation plan for the strategy for 2021 to 2022²³³. The implementation plan has not been updated since its publication in July 2021.

Recent parliamentary engagement

In a parliamentary question to the MoJ in October 2023, Ruth Cadbury (Lab) asked about the adequacy of the support available to neurodivergent people

²³⁰ DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p35

²³¹ See: APPG on Autism, [The Autism Act, 10 Years On: A report from the All Party Parliamentary Group on Autism on understanding, services and support for autistic people and their families in England \(PDF\)](#), 2019

²³² DHSC and DfE, [National strategy for autistic children, young people and adults: 2021 to 2026](#), 21 July 2021, p36

²³³ DHSC and DfE, [Autism strategy implementation plan: 2021 to 2022 \(Annex A\)](#), July 2021

in prisons. Answering, Damian Hinds, then the Minister of State for Prisons, Parole and Probation, listed a number of steps the MoJ had taken. Chiefly, he mentioned the recruitment of Neurodiversity Support Managers.²³⁴ The recruitment of Neurodiversity Support Managers was also referenced by the Minister in answer to a different question in Parliament on 9 February 2023, stating that, as at January 2023, 51 Neurodiversity Support Managers had been recruited.

The Minister reiterated that the Government intended that every prison in England and Wales would have a Neurodiversity Support Manager by 2024.²³⁵

²³⁴ PQ 203860 [on [Prisoners: Neurodiversity](#)], 26 October 2023

²³⁵ PQ 138010 [on [Prisoners: Learning Disability](#)], 9 February 2023

8 Scotland, Wales and Northern Ireland

8.1 Scotland

Scottish strategy for autism

The Scottish Government and COSLA (Convention of Scottish Local Authorities) published a 10 year [Scottish strategy for autism](#) in November 2011, backed up with funding of £10m over four years.²³⁶ The strategy contained 26 recommendations including on leadership and cross-agency working, improving access to diagnosis and supporting people with employment.²³⁷

In September 2021, the Scottish Government published an [Evaluation of the Scottish strategy for autism](#). The Evaluation examined the strategy's recommendations and priorities, its impact on autistic people and services that support them, and lessons learnt that could inform future policy. The future policy lessons for the Scottish Government included narrowing the focus of future work and placing strong requirements on local authorities to deliver, especially where funding is provided.²³⁸

Learning/intellectual disability and autism: transformation plan

In March 2021 the Scottish Government and COSLA published the [Learning/intellectual disability and autism: transformation plan](#), 'Towards Transformation'.

The plan set out 32 actions for the Scottish Government and COSLA over the following 2 years, as summarised below.²³⁹

Human rights

- Considering the needs of autistic people and people with learning/intellectual disabilities as part of the [independent review of the Mental Health Act](#).

²³⁶ Scottish Government, [The Scottish Strategy for Autism](#), 2 November 2011

²³⁷ As above

²³⁸ Scottish Government, [Evaluation of the Scottish Strategy for Autism](#), 24 September 2021, Chapter 5: Discussions and Conclusions, Lessons gleaned for future policy direction, pp52-53

²³⁹ Scottish Government and COSLA, [Learning/intellectual disability and autism: transformation plan](#), 24 March 2021

- Exploring proposals for a commission or commissioner to protect the rights of autistic people and people with learning/intellectual disabilities.

Mental health, health and social care

- Improving how mental and physical health services can meet the needs of autistic people by piloting a Nurse/AHP Consultant for Autism and learning/intellectual disabilities and exploring mandatory training for NHS staff.
- Improving diagnostic services and monitoring, piloting a national post diagnostic support service and exploring community asset mapping.
- Involving people with lived experience in future policy work.
- Supporting autistic people and their carers to access their rights under the Social Work (Self Directed Support) (Scotland) Act 2013 and the Carers (Scotland) Act 2016.

Employment

- Working towards halving disability employment gap as stated in A Fairer Scotland for Disabled People and [A Fairer Scotland for Disabled People: Employment Action Plan](#).
- Involving autistic people and people with a learning/intellectual disability in the [review of supported employment provision in Scotland](#).

Education

- Working to implement the [Additional support for learning: action plan \(2020\)](#).
- Developing training on autism for trainee teachers and producing guidance on physical intervention and seclusion for schools.
- Developing learning outcome measures that capture autistic children's and children with a learning/intellectual disability's progress beyond solely academic indicators.

Digital exclusion and communication

- Improving digital access for autistic people.
- Campaigning to change how autistic people are understood and empowering autistic people to have their voices heard, including through the [Different minds. One Scotland](#) campaign and supporting self advocacy initiatives.

- Engaging with autistic people from Black, Asian and Minority Ethnic communities.²⁴⁰

More information on Scottish policy affecting autistic people can be found on [the Scottish Government website](#).

8.2

Wales

In 2021, the Welsh government published an updated [Autism delivery plan 2021 to 2022](#) reflecting the new statutory code of practice on the delivery of autism services (see below). It outlined priorities for 2021 to 2022 and said future priorities would be informed by the outcomes of a demand and capacity review of neurodevelopmental services.²⁴¹

The priorities for 2021 to 2022 were:

- Continuing to fund the National Autism Team (NAT) to support the implementation of the Code of practice.
- Raising awareness of autism and the Code of practice through promotion of the Autism Aware campaign.
- Training the local authorities local health board (LHB) workforce on autism and the Code of practice.
- Improving diagnostic services through the duties placed LHBs in the Code, funding the Integrated Autism Service and working with the Together for Children and Young People Programme 2 neurodevelopmental workstream.
- Including the Welsh language in service delivery.
- Supporting autistic people's recovery from Covid-19.
- Supporting and including autistic people from Black, Asian and Minority Ethnic backgrounds and/ or LGBTQ+ autistic people.
- Involving autistic people and their carers in policy making through the Welsh Government Autism Advisory Group and Autistic Champions on Regional Partnership Boards (RPBs).

²⁴⁰ Scottish Government and COSLA, [Learning/intellectual disability and autism: transformation plan](#), 24 March 2021

²⁴¹ Welsh Government, [Autism delivery plan 2021 to 2022](#), 15 July 2021

- Ensuring the needs of autistic people are captured in population needs assessments and developing autism infrastructure through funding for RPBs.²⁴²

The Code of Practice on the delivery of autism services

In July 2021, the Welsh Government published a statutory [Code of Practice on the delivery of autism services](#). The Code of Practice is intended to reinforce the duties of the Social Services and Wellbeing (Wales) Act 2014 and the NHS (Wales) Act 2006 as an alternative to a separate Autism Bill.²⁴³

The Code of Practice aims to inform autistic people about the support they should expect and provide guidance to statutory services to plan, deliver and monitor autism services. It covers the following areas:

- Arrangements for autism assessment, diagnosis and post-diagnostic support.
- Arrangements for accessing health and social care services including advocacy, preventative services, local authority care, mental health services and carer assessments.
- Arrangements for awareness training and training on autism including in health, social care and educational settings.
- Arrangements for planning and monitoring services, including data collection, and ensuring stakeholder involvement.²⁴⁴

The Code of Practice came into force on 1 September 2021.

More information can be found on the [Welsh Government website](#).

8.3

Northern Ireland

[The Autism Act \(Northern Ireland\) 2011](#) requires the Northern Ireland Department of Health to publish an autism strategy (for all ages) and to report on its implementation at three yearly intervals.²⁴⁵

In March 2021 the then-Minister of Health, Robin Swann MLA, published an [Interim autism strategy for action for 2021-22](#), noting that the Covid-19

²⁴² Welsh Government, [Autism delivery plan 2021 to 2022](#), 15 July 2021

²⁴³ Welsh Government, [Code of Practice on the delivery of autism services](#), 16 July 2021

²⁴⁴ As above

²⁴⁵ [Autism Act \(Northern Ireland\) 2011 \(legislation.gov.uk\)](#)

pandemic had delayed the development of a longer term strategy.²⁴⁶ The interim strategy had three strategic outcomes:

- A healthy life with access to services on an equal and timely basis to provide early intervention and support to best meet the needs for individuals and families.
- A life with opportunities to live as an active citizen to support autistic people and their families through continued support in education and employment and as they transition through life stages.
- An independent life with greater understanding and choices which provides opportunity for autistic people to live safe and independent lives within our communities and where they are met with respect and understanding.²⁴⁷

Autism (Amendment) Act (Northern Ireland 2022)

In 2022, the [Autism \(Amendment\) Act \(Northern Ireland\) 2022](#) was passed. The legislation introduces:

- Data collection on how many adults and children are on the autism spectrum.
- Additional components to the autism strategy, including provision for:
 - training for staff of Northern Ireland departments and other public bodies;
 - an autism support and early intervention service;
 - an autism information service.
 - meeting the needs of autistic adults; and
 - reducing diagnostic waiting times.
- Requirements for the strategy to take a cross-departmental approach, be developed with the autism community and include measurable targets.
- A requirement for the Minister to produce a report each financial year on the funding for autism.
- An ‘autism reviewer’ appointed by the department to monitor and report on the effectiveness of the strategy.²⁴⁸

²⁴⁶ Department of Health NI, [Autism – Interim Strategy 2021-2022](#), 8 March 2021

²⁴⁷ Department of Health NI, [Minister of Health publishes cross departmental interim autism strategy](#), 8 March 2021

²⁴⁸ [Autism \(Amendment\) Act \(Northern Ireland\) 2022 \(legislation.gov.uk\)](#)

Autism strategy 2023 to 2028

The Department of Health in Northern Ireland published the [Autism Strategy 2023-2028](#) in December 2023.

It contained five key commitments:

Commitment 1

Through improved regional pathways of care, individuals and families will have access to early intervention and support which can meet emotional health and wellbeing needs.

Commitment 2

We will work in partnership to enable autistic people to feel understood and supported throughout their education, to experience educational environments which are inclusive to their needs and to have a workforce who are equipped with understanding to recognise and respond to the specific needs of autistic pupils and students.

Commitment 3

We will seek opportunity for increased understanding of autism in the workplace to enable individuals to feel supported within employment and enhance career opportunity.

Commitment 4

Through increased understanding of autism, our housing providers will be more equipped to provide supportive engagement and adequately support the needs of autistic people.

Commitment 5

We will work within our community to increase understanding and acceptance of autism and create inclusive environments to support the needs of autistic people and their families and carers.²⁴⁹

An [Autism Strategy - Delivery Plan 2023-25](#) (PDF) was published alongside the strategy.

More information can be found on the [Department of Health NI](#) website.

²⁴⁹ Department of Health NI, [Autism Strategy 2023-2028](#), December 2023

Further reading

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

- [Mental health policy in England](#)
- [Reforming the Mental Health Act](#)
- [Support for children and young people's mental health \(England\)](#)
- [The NHS workforce in England](#)
- [The National Disability Strategy 2021: Content and reaction](#)
- [Disability discrimination](#)
- [Adult Social Care Funding \(England\)](#)
- [Children's social care workforce](#)
- [Adult social care workforce in England](#)
- [The Special Educational Needs and Disabilities and Alternative Provision Improvement Plan](#)
- [Special Educational Needs: support in England](#)
- [Disabled people in employment](#)

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