

Autism Service

Issue Date	Review Date	Version
November 2019	November 2020	1

Purpose

This Standard Operating Procedure (SOP) provides guidelines for the Derriford Autism Service team members in supporting staff across the organisation to meet the expected national standards and best practice guidance to manage the care of adult patients who are on the Autistic Spectrum. The philosophy of care is for equality of access to services, treatments and clinical care, taking into account the specific needs of individuals.

It will do this by:

- Providing advice to Trust staff on Autism within Acute Care Adult Services
- Developing and providing education and awareness sessions
- Identifying resources for people with Autism, carers and Trust staff
- Identifying people with High Functioning Autism using hospital services by using effective flagging systems.
- Advising on and supporting with Reasonable Adjustments to address individual needs and therefore promoting positive healthcare outcomes.

Who should read this document?

All staff who may come into contact with people with Autism

Key Messages

Derriford Autism Service is an 18 month pilot service which has been set up to improve the experience of adults with High Functioning Autism who do not have a Learning Disability, patients with a Learning Disability and Autism will continue to receive support from the Learning Disability Team.

The key elements are:

- To set up alerts on hospital IT systems to highlight to trust staff the need to consider if Reasonable Adjustments are required
- To educate Trust staff to aim to achieve understanding of how being autistic may affect people within the hospital environment and how individuals with Autism can be supported to have a positive experience
- To develop and provide resources that staff can offer to people with autism to reduce anxiety and improve communication pathways regarding specific needs
- To provide expert advice regarding Autism to Trust staff, and assist with complex issues, supporting staff across the Trust to care for patients with Autism
- To provide a portal between the hospital and the public and other agencies in the community to enhance communication and promote positive health outcomes for people with Autism accessing hospital services.

The Service consists of a Lead Autism nurse, an Autism services assistant, line managed by the Learning Disability and Autism manager, and overseen by the Deputy Chief Nurse.

The Autism service is committed to working in collaboration with autistic people, Derriford Autism Partnership (aDAPt) steering group has been set up and they are involved in the development and promotion of the service to ensure that it is fit for purpose and will serve both the public and workforce.

Core accountabilities

Owner	Autism Lead Nurse
Review	Safeguarding Steering Committee
Ratification	Chief Nursing Officer
Dissemination (Raising Awareness)	Derriford Autism Service team, Matrons and Heads of Departments, Service Leads.
Compliance	Trustwide

Links to other policies and procedures

Version History

1	November 2019	Developed SOP
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The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

**An electronic version of this document is available on Trust Documents.
Larger text, Braille and Audio versions can be made available upon
request.**

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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Standard Operating Procedure (SOP)

Autism Service

1 Introduction

This Standard Operating Procedure (SOP) provides guidelines for the Derriford Autism Service to support managers and clinical staff, to aim to achieve the expected standards to support and manage the care of adult patients who are on the Autistic Spectrum; The philosophy of care is for equality of access to services, treatments and clinical care, taking into account the specific needs of individuals.

Patients with Autism are likely to have additional needs, sometimes complex, which may impact on their clinical condition and access to investigations and treatment. These may include communication needs and sensory sensitivities which have an effect on their ability to self-manage in the hospital environment; this may result in issues regarding consent to treatment, and behaviours that are perceived as challenging.

Use of this SOP should always take account of the requirements of the Equality Duty Act (2010), NICE guidelines for Autism 2014, Human Rights Act 1998, Mental Capacity Act 2005, and the Autism Act (2009).

The basic principle of provision of health services is equal access for all according to need. Healthcare is provided to a range of 'groups' who have different needs, and will use services differently, but need to be able to access the same level of care as the general population.

2 Definitions

Autism is defined as a lifelong, developmental disability that affects how a person communicates with and relates to other people, and how they experience the world around them – Definition from the National Autistic Society (NAS).

3 Regulatory Background

- Mental Capacity Act 2007
- Autism Act 2009
- Equality Act 2009
- *Fulfilling And Rewarding Lives; The Strategy For Adults With Autism In England 2010*
- NICE guidelines for Autism 2014, (quality standards checked 2017)
- National Autistic Society, Think Autism Strategy (2014)
- NHS 10 year Autism Plan / Devon STP Autism Work stream
- NHSI standards 2018

The Government produced a national strategy in 2010 *Fulfilling and rewarding lives; the strategy for adults with autism in England 2010*, based on the requirements of the Autism Act (2009). It was refreshed in 2014, following additional consultation and available evidence, as well as the introduction of the Care Act (2014). There is also a NICE guideline / quality standard for Autism 2014, which was checked in 2017.

The Westminster Commission on Autism - a Spectrum of obstacles 2016 and a Spectrum of harmful interventions for autism 2018 is an independent cross-party group with leaders from the autism sector influencing policy and practice for an autism friendly world.

Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy was produced in 2015. The guidance covers requirements such as the need for:

- Autism awareness training for all staff
- Specialist autism training for key staff
- The appointment of an autism lead
- Clear pathways to diagnosis and assessment for adults with autism
- Commissioning services based on population data
- Preventative support and safeguarding
- Reasonable adjustments and equality
- Supporting people with autism and complex needs
- Employment

Local context

1. The National Autistic Society (NAS) estimates that around 700,000 people may have autism in the UK, or about 1 in 100 of the population. Based on the estimated national prevalence, this suggests that there are currently approximately 10,200 people in Devon with autism.
2. The number of adults aged 18-64 with autistic spectrum disorders in Devon is predicted to increase by 0.4% over the next five years.
3. Many individuals with autism will never come into contact with Local Authority or specialist Health Services. These individuals will not need specialist interventions or support, but may still benefit from less formal support such as peer networks, online / social media groups and other forms of informal social support.
4. Approximately 70% of individuals with autism will experience co-morbid mental health issues. This equates to approximately 7,140 people across Devon.
5. Approximately 430 adults across Devon are currently referred by their General Practitioner for a specialist autism diagnosis per year. The importance of a specialist, high quality assessment is recognised within related evidence and issues such as the misdiagnosis of women with Borderline Personality Disorder are cited as an issue.

4 Key Duties

4.1 The Autism Service

The Autism Service is set up to facilitate the meeting of individual healthcare needs for adults with High Functioning Autism; supporting clinical teams to best meet the needs of individuals by making the required reasonable adjustments. This involves liaising with the community services, community providers, families and acute hospital clinical services to effectively co-ordinate and prioritise referrals of people with Autism to the Autism Service.(see flow chart on page 11).

The Service consists of a Lead Autism nurse, an Autism services assistant, , line- managed by the Learning Disability and Autism manager, and overseen by the Deputy Chief Nurse.

The Autism Service will review patients with Autism admitted to hospital using the Autism care plan sticker (see Appendix 1) to:

- Check and ensure people with Autism are appropriately alerted on IPMS, RAPA caseload, EDIS and CRIS so that any attendance, admission or transfer in hospital will be alerted to the Autism service via electronic messaging and can be seen on SALUS Patient Care Management system on the wards via automated attribute 'AS' and in their medical notes using the Autism alert sticker (Appendix 2)
- Identification of and planning for complex needs; the team will prioritise their workload on those individuals with the most complex needs including the provision of Emergency Summary Plans (ESP's) where deemed appropriate to provide guidance regarding approach to care in the Emergency department and assessment wards. (Appendix 3)
- Support with or advice with clinical decision-making; including use of Mental Capacity act where necessary; and co-ordination of Best Interest meetings or other consent issues
- Support with agreeing appropriate use of the Safeguarding Policy, Supervisions Policy, Restraining Therapies care plan and/or application for Deprivation of Liberty Safeguards, where the care plan restricts a patient's freedom
- Check Reasonable adjustments are made and reviewed to best meet patient's individual needs
- In liaison with the safeguarding team, provide support and give advice regarding safeguarding issues/concerns specifically for patients who have Autism; ensure appropriate alerts are made to the Local Authority where necessary
- Where necessary arrange for appropriate advocate for users with Autism, give advice on the need for a referral to Advocacy services including Care Act Advocates for individuals with capacity, but who need support with communication and Independent Mental Capacity advocate for those individuals who lack mental capacity who have no next of kin or carers who know them well or who are befriended.
- Raise the profile of the health care needs of people with Autism across the acute hospital services; bridging the gap between acute clinical care areas, community services and primary care to enable better communications and access to healthcare.
- Actively promote the Autism service to service users, families, carers and other professionals whilst developing and maintaining networks with partners in primary, community and self-advocacy groups.
- Identify existing/potential barriers in accessing acute services for people with Autism and promote initiatives to overcome these barriers including developing specific care pathways.
- Undertake benchmarking, audit and monitoring against recognised national standards and autism service specification.
- Assist in the development of monitoring of local standards in partnership with people with Autism; through Patient and Liaison Service (PALS), User feedback, Friends and Family Surveys and complaints.

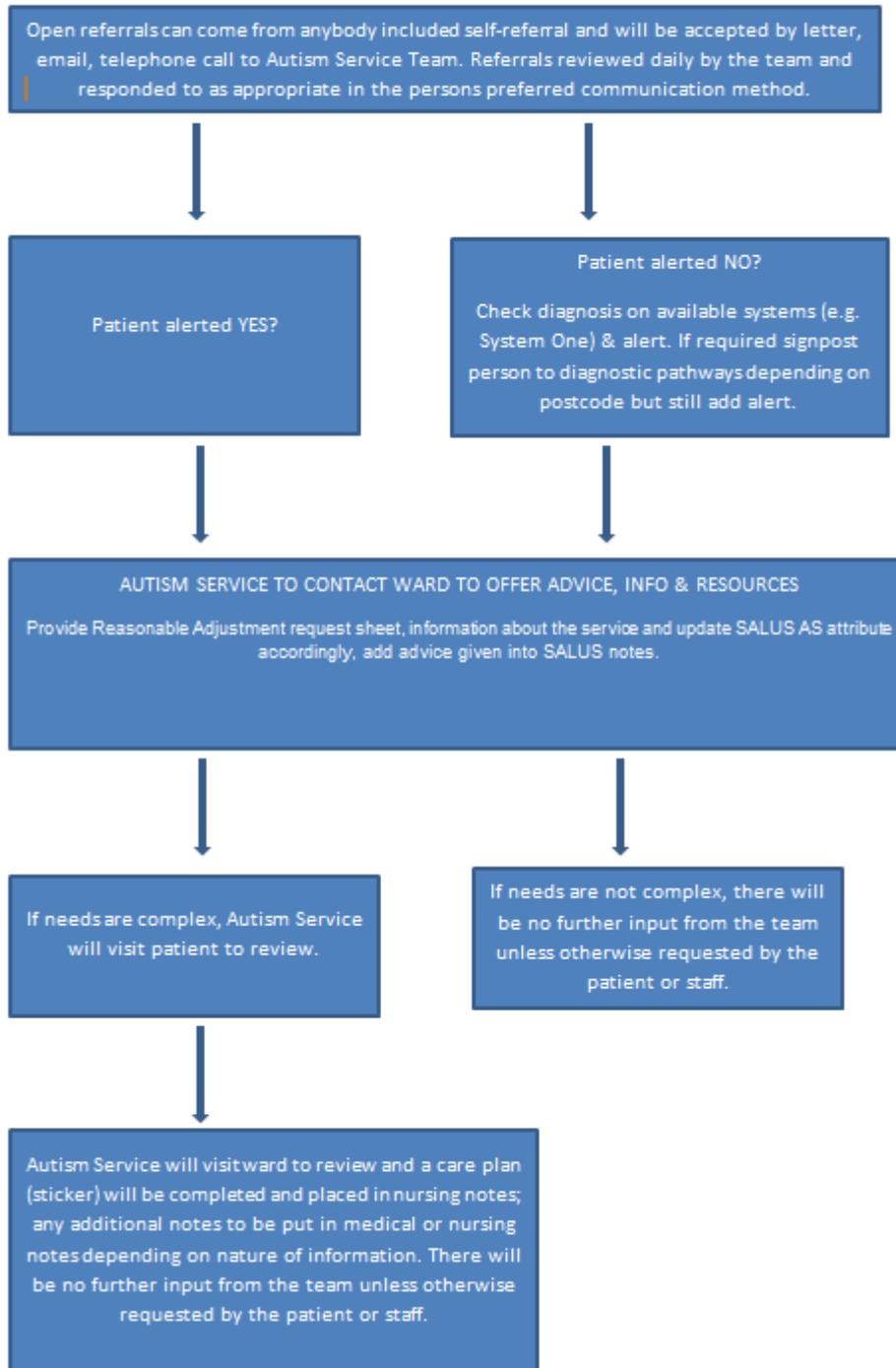
- Provide leadership and co-ordination of the aDAPt work plan (available in G Drive, under Autism Service) and feedback to appropriate hospital department leads, UHP patient experience committee, local Autism action sub groups and Autism partnership boards.
- Promote the early resolution of issues and complaints working closely with appropriate Matrons, Clinical Leads and Service Leads.
- Monitor and report on staff numbers completing Autism awareness e-learning training and other direct training.
- Identify and work with Link Practitioners within UHP to assist with development of the Autism Service and dissemination of information to staff in their clinical area. (Appendix 6)

4.2 All Clinical Staff

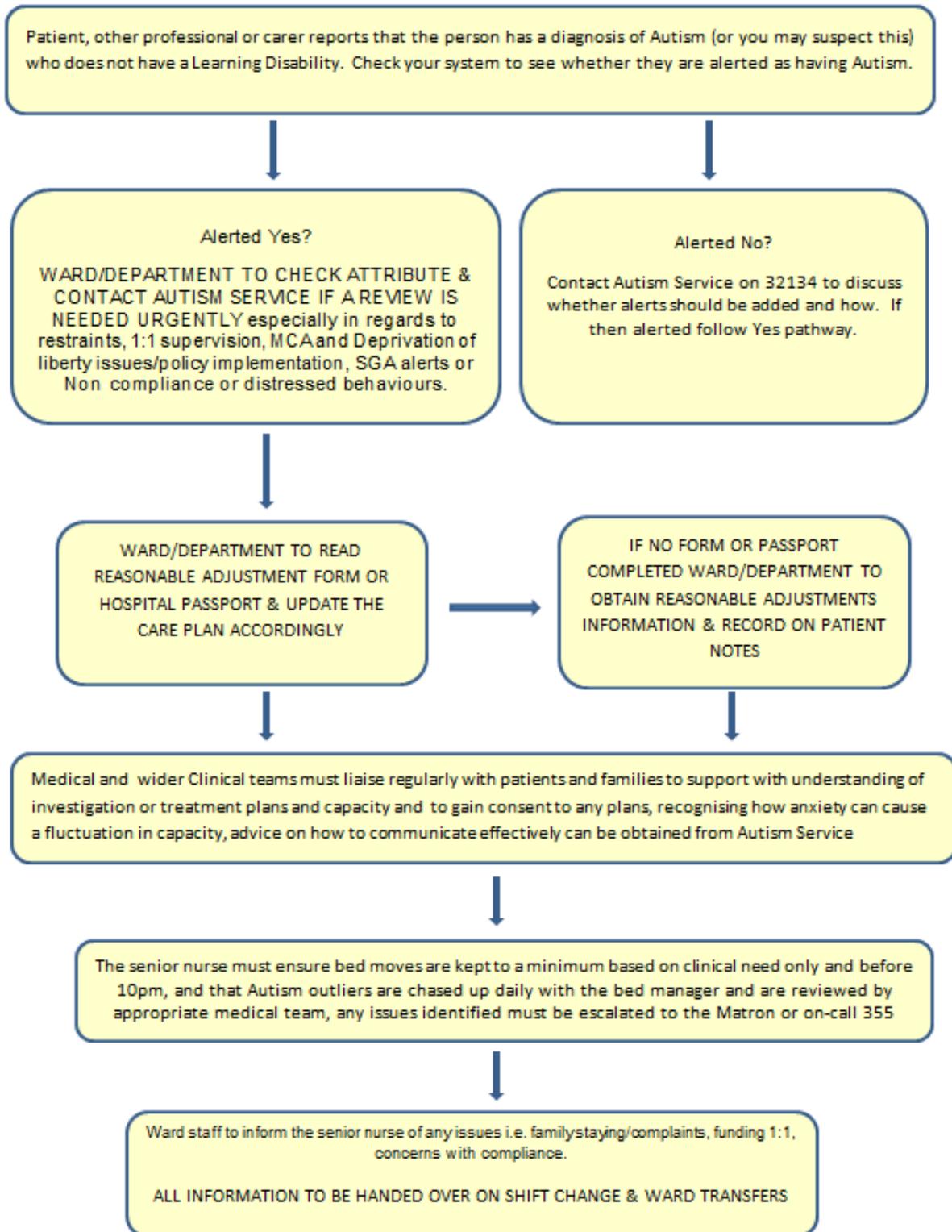
- Identification of autism - check and ensure people with autism are appropriately alerted on IPMS, RAPA caseload, EDIS and CRIS or dependant on the patient management electronic system used so that other staff can be aware of diagnosis and potential need for reasonable adjustments.
- For patients admitted on to a ward you can identify autism attribute from SALUS PCM screens. If a patient is not alerted but Autism is stated or suspected contact the Autism Service (see flow chart on page 12)
- For patients attending the emergency department, or when making appointments for planned admissions or out patients – check if alerted, if not call autism service to confirm appropriateness of alert depending on diagnosis. (See Flow chart on page 15)
- Check if patient has provided information about specific needs, e.g. Reasonable Adjustment request sheet, Autism Hospital Passport (for planned admissions and outpatient appointments the person may needed to be contacted and any information about reasonable adjustments recovered and passed onto other hospital staff involved in their care)
- Offer relevant paperwork/information as provided by Autism Service to support the individual to express their needs.
- Ensure ward care plans reflect the needs of the patient with Autism, making and recording reasonable adjustments made based on information provided by patient.
- Undertake timely and regular risk assessments/reviews of patients, ensuring complete and timely records of all care.
- Consider the needs of individuals as presented through the Reasonable Adjustment Request sheet, (Appendix 7) Hospital Passport and information from patient, formal carers or family carers. This must be evidenced in the care plan or nursing record. Identify and agree any care considered more appropriate to be delivered by known carers/family whilst a patient in hospital.
- Support carers and/or family in the delivery of care; ensuring that they are given regular breaks, information, feedback from clinical investigations and care decisions as per the Trust Carers carer's policy.
- Ensure patients and relatives are made aware of any risks in hospital, plans for investigation/treatment and discharge.

- Work in a multi-professional way to promote patient independence and maintain abilities with activities of daily living.
- Be aware of and actively use the principles of the Mental Capacity Act (MCA) in decision making.
- If a person lacks capacity to be in hospital consider an urgent Deprivation of Liberty Safeguard (DoLS) request as per Trust policy if the patient is not free to leave.
- Use appropriate patient preference of equipment/communication aids to support care, record this and share to promote patient safety and communication.
- Escalate any concerns regarding patient care to Autism Service, LD/Autism Service manager and/or Matron, or on-call 355.
- Ensure any incidents including DoLS and safeguarding are reported to the Local Authority and if needed via the Datix system ticking the Autism option in the patient information section, (when available).
- Ensure appropriate people are involved in or advised of discharge plans at the earliest convenience. (see flow chart on page 13).
- Ensure robust handover of care for people with Autism returning to ward from other departments, transfers to other departments, residential setting or home environment and record in patient records.

Access to Autism Liaison Services at Derriford Hospital



For all staff – Process to support people with Autism when accessing hospital in-patient services



Discharge

If the patient is likely to have any changes in being able to meet their own day to day needs, then the patient is to be identified to Complex Discharge Team on admission with support from Autism team to support with a possible complex discharge.



Ward nurse must follow the complex discharge process and refer using the 'Data Forms' section on SALUS.



Complex Discharge team and wider must contact the Autism Service to further discuss and plan for discharge needs. Regular communication including updates between the ward and Autism service are vital.



Capacity regarding discharge needs to be ascertained as early as possible so that pre discharge meetings or best interest meetings can be arranged in a timely way. Autism Service must be invited to any meetings concerning patient's with Autism, so that any pertinent information can be shared to aim for a safe discharge.

Planned admissions, Emergency Department and Outpatients appointments

Patient, other professional or carer reports that the person has a diagnosis of Autism (or you may suspect this) who does not have a Learning Disability. Check your system to see whether they are alerted as having Autism.

Alerted Yes?

Ward or Department to contact Autism Service on 32134 if advice required or contact the individual to check whether any Reasonable Adjustments might be required for the appointment. See 'How to support People with Autism' guidance on the Autism Service Website:
<https://www.plymouthhospitals.nhs.uk/autism-resources>

Alerted No?

Contact Autism Service on 32134 to discuss whether alerts should be added and how. If then alerted follow Yes pathway.

If any reasonable adjustments are required by the individual from the Autism Service that are more complex, please consult the team prior to agreeing this. Please inform any other hospital staff involved in their care of the Reasonable Adjustments needed during their planned admissions or outpatient's appointment.

6 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as 1 year (due to it being a pilot service) from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by the Safeguarding Steering Board and ratified by the Chief Nursing Officer

Non-significant amendments to this document may be made, under delegated authority from the Deputy Chief Nurse by the nominated author. These must be ratified by the Deputy Chief Nurse and should be reported, retrospectively, to the Safeguarding Steering Board

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

7 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Chief Nurse and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

8 Monitoring and Assurance

Ongoing review of standards of care and patient experiences for people with Autism will be undertaken via the following:

- Regular audit of care practice through the safeguarding teams annual audit plans
- Standards of care in hospital for people with Autism are reviewed bi-monthly – through reports to the Trust's Safeguarding steering committee. With any risk issues being escalated to the Safeguarding Board This considers the Trust's compliance with specific national standards.
- Ongoing review and reporting of the UHP Autism DASH board via the safe guarding committee.
- Local Patient Surveys are sent out to capture the specific experiences of patients with Autism
- Regular meetings with Derriford Autism Partnership (aDAPt) the steering group comprising of individuals with Autism or with a keen personal interest in autism. (Terms of Reference appendix 8)

- Involvement of Autism Service in any complaint investigation required, regarding concerns with care of patient with Autism; annual review of such complaints and PALS concerns
- Feedback from community services/providers/carers re patient experiences of hospital – to Autism Service
- Six monthly review of service specification and Autism DASH board with clinical commissioners of Autism Service
- Monthly review of work plan with clinical commissioners of Autism Service and senior UHP managers (work plan available on G drive under Autism Service)

All staff will endeavour to resolve any concerns or issues of dissatisfaction as they arise. If the issue cannot be resolved at a local level or with the assistance of the Patient Advice Liaison Service (PALS) and a written complaint is made, the trust will provide an open, fair and accessible complaints process in line with the National Health Service Complaints Procedure that encourages communication on all sides University Hospitals Plymouth NHS Trust is committed to using complaints from patients, their relatives or carers to continuously monitor and improve the services it provides. The Trust does not decide if a complaint should be upheld or not, but treats every complaint as an issue to be resolved.

For further guidance on making a complaint please refer to the Complaints procedure.

9 Reference Material

- Mental Capacity act 2007
- Autism Act 2009
- Equality Act 2009
- NICE guidelines for Autism 2014, (quality standards checked 2017)
- National Autistic Society, Think Autism Strategy (2014)
- NHS 10 year Autism Plan / Devon STP Autism Work stream 2018
- The Westminster Commission on Autism - a Spectrum of obstacles 2016
- The Westminster Commission on Autism - a Spectrum of harmful interventions for autism 2018

Appendices

Appendix

- 1) Care Plan sticker
- 2) Alert sticker
- 3) Emergency Summary Plan
- 4) Training Framework
- 5) Autism Link Practitioner role
- 6) Reasonable Adjustment request form
- 7) aDAPt Terms of reference

Autism Service Plan of Care

- ◆ Alert sticker in front of notes
- ◆ Care needs reviewed—see notes
- ◆ Reasonable adjustments requested—see notes
- ◆ Information provided specific to individual eg Hospital Passport.
- ◆ Complex discharge referral advised DOLS advised

Signature:

Date:

Time:

For further advice you may contact the Autism service on Ext 32134

HRSG no : 1512/1



This patient has Autism

- ◆ Assess and record Mental Capacity as per Mental Capacity Act
- ◆ Be aware of the Autism Act 2009, Nice guidelines for Adults with Autism and UHPNT Autism SOP
- ◆ Familiarise yourself with patients needs by reading information supplied by patient
- ◆ Make Reasonable Adjustments if required—record in patient notes
- ◆ For further advice you may contact the Autism Service on Ext 32134

HRSG no: 1513/1



Appendix 3 – Emergency Summary Plan Needs



Emergency Summary Plan for individuals with Autism		Surname: APPLY
		First Name: PATIENT
		Hospital Number: STICKER
		NHS Number: HERE
		DOB:
Date: Review Date:	IMPORTANT:	

THIS EMERGENCY PATIENT SUMMARY IS DESIGNED TO GIVE YOU IMPORTANT BACKGROUND INFORMATION ON THIS PATIENT - SENIOR REVIEW MUST BE SOUGHT ON ALL OCCASIONS.]

<u>Medical History / Social History/Special Interests</u>

<u>Differences experienced by individual</u>
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<u>Consultant / Nursing Management/ Reasonable Adjustments</u>
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Appendix 3 – Emergency Summary Plan (page 2)



Surname:	APPLY
First Name:	PATIENT
Hospital Number:	STICKER
NHS Number:	HERE
DOB:	

Emergency Patient Summary for individuals with Autism.

General advice - consider the following:

Aim for a calm environment with minimal stimulation

Individual should be seen by clinicians who have awareness regarding people with autism and their needs – aim to keep consistent contact and to minimise amount of clinicians involved directly in their care – read DOH 'How to Support people with Autism' checklist in Autism file/box.

Has individual brought a Hospital Passport or other information? If yes, read it to help inform approach.

Ask if the individual has a specialist interest – may help to calm them to talk about it.

Offering resources from Autism file / box.

The Autism service will be aware of attendance via salus alert, if above advice is not helping then contact Autism Service on x 32134 - available for advice Monday to Friday 8-4, at other times contact the 355 senior manager on call.

Is patient aware of plan? Yes/No Does patient have a copy of plan? Yes/No

People to contact in the event of a hospital attendance:

This Emergency Summary Plan has been agreed on (DATE) with – (enter names and designations of all involved);

University Hospital Plymouth (UHP) Trust Autism training framework

Addressing the Core capability 1 of the Core Capabilities Framework for supporting Autistic People (Health Education England 2019); Understanding Autism.

Tiers 1-4	Learning Outcomes:	Target Staff, method, time
<p><u>Tier 1</u></p> <ul style="list-style-type: none"> Staff that need basic awareness of Autism and resources available within the Trust. 	<ol style="list-style-type: none"> To be aware of the term of Autism and its definition To be aware of Mental Capacity Act and Trust Policy To be aware of the Equality Duty Act (2010) and the term Reasonable adjustments To be aware of what a Hospital Passport is To be aware of Autism Web page on UHP websites To be aware of UHP standard operational procedures for patients with Autism To be aware of the Autism Service and contact details Gain an overall basic understanding of Autism Recognise how Autism affects individuals on an everyday basis 	<ul style="list-style-type: none"> All staff Slide presentation on induction. 10mins Pop up stands regularly around the hospital Micro teach sessions. Voluntary online package 30min – (completion is required prior to attendance of further face to face training).

<p><u>Tier 2</u></p> <ul style="list-style-type: none"> • Staff that need to develop an understanding of Autism and how to meet specific needs in an acute setting • Staff who have the potential to come into contact with Autistic people at work – either as patients or colleagues. • Can be provided as bespoke training to their area, ward or department • Online package <p>30min – (see Tier 1) completion of this is recommended prior to attending Tier 3 training</p> <ul style="list-style-type: none"> • Recommended for all 	<ol style="list-style-type: none"> 1. To commit to promoting the Values and behaviours that are stated in the Core Capabilities Framework for supporting Autistic People (Health Education England 2019) 2. Gain an understanding as to how someone with Autism sees the world and the impact for them and services 3. Identify why people with Autism are vulnerable and may find acute hospital settings challenging 4. Understand the challenges of Sensory Sensitivities experienced by the patient with Autism in the Acute Hospital setting. 5. Identify the importance of communication and explore approaches to effect good communication with people with Autism 6. Explore how anxiety affects patients with Autism, their coping mechanisms and what happens if ‘extreme distress occurs 7. Discuss Reasonable Adjustments and benefits for patients and staff. 	<ul style="list-style-type: none"> • Wards used by Autistic patients, ED, outpatients (across Trust), pre-assessment , therapy and imaging departments • Face to Face with Autism expert trainers (people with Autism) and/or from Autism Service • 1-3 hrs, All Trust Staff can benefit from this training.

<p>staff prior to attending Tier 3</p>	<ol style="list-style-type: none"> 8. Understand how to input and use clinical alerts/flags to identify adults with or who may have Autism 9. Identify health conditions known to be more common in adults with autism and understand the implications of diagnostic overshadowing 10. Understand the importance of listening to and engaging with the person with Autism their family or carers to make choices in their care 11. Recognise usefulness of patient held information such as the Hospital Passport , Reasonable Adjustment Request sheet, Emergency Summary Plan's (used in ED) 12. Demonstrate an understanding of decision making, capacity and best interests in the care of people with autism 13. Gain insight into the experiences of hospital contacts from patients with Autism and their families and carers. 14. Identify gaps in services and discuss implications and options for change 	
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<p><u>Tier 3</u></p> <ul style="list-style-type: none"> • Advised to have completed Tier2 • For Senior staff / key staff groups who need a deeper understanding of Autism, challenges to accessing investigations, treatment and consequences of inequality of care for patients, family/carers and how to share that information with colleagues. 	<ol style="list-style-type: none"> 1. Recap what Autism is; Be aware of the Trusts Autism alert system and know how to ensure appropriate alerts are put on or taken off IPMs and Salus 2. Identify health conditions known to be more common in adults with autism 3. Identify and understand the implications of diagnostic overshadowing and what can be done to prevent this or what to do if this occurs (Reasonable Adjustments); particularly in regards to pain (Human Rights Act 1998). 4. Demonstrate an understanding of the additional physical or emotional care needs of adults with autism, be aware of Trust Autism SOP ,pathways/processes or Reasonable Adjustments for identifying and meeting these (Equality Duty Act 1998) 5. Advanced Communication - Identify and use strategies to communicate effectively with people with Autism and how to build up trust and a good rapport (Accessible information Standard, 2015) – recognising the impact of barriers to communication in respect of people with Autism, explore strategies to overcome these barriers. 6. Sensory sensitivities in Autism – the impact on healthcare and how to support a patient through the hospital pathways to achieve good healthcare outcomes. 	<ul style="list-style-type: none"> • Senior on call and all band 7's/matrons, ED triage nurses. Senior medical clinicians • Face to face expert panel comprising of trainers with autism <ul style="list-style-type: none"> – 2-4 hours • Autism Link or Champion workers • open to all other professionals as voluntary
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	<ol style="list-style-type: none"> 7. Demonstrate an empathetic approach to caring for patients with high levels of Anxiety; explore how to recognise escalation and possible interventions to diffuse undesirable behaviours. 8. Gain an insight into the patient with Autism and family/carers experience in the hospital setting and understand the importance of listening to and engaging with them, family and carers in line with the Trusts Carer's policy 9. Discuss how best to respond to face to face complaints, challenges or distressed family/carers 10. Demonstrate an understanding of decision making, capacity and best interests in the care of people with autism: Explore how to support people to make their own choices and the implementation of the Mental Capacity Act and Deprivation of Liberty as per Trust policy; Problem solve and address the needs of the non-compliant and non-capacitated patient using current Trust guidance and local best practice 11. Identify and understand what a good or bad discharge looks like and your role in promoting or preventing this. 	
<p><u>Plans for Tier 4 in 2020</u></p> <p>To cover relevant sections of Core Capabilities Framework for supporting Autistic People (Health Education England</p>	<p><u>Masterclasses</u> - all staff will need to have a sound knowledge base of Autism – recommendations to have completed tiers 1 and 2.</p>	<p><u>Who is the training for:</u></p> <p>Staff who need to have extended knowledge.</p>

2019)		
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Appendix 5

Roles and responsibilities of the Autism Link Practitioner

The Autism Link practitioner will promote the care and support for individuals and their families – ensuring that other staff are aware of the resources and support available at ward/department level. They will form a vital link between the ward team and Autism Service - specifically in respect of communicating Autism issues and needs.

The Autism Link practitioner will:

1. Liaise with the ward / clinical area manager and the Autism Service for general awareness, resources and communications.
2. Promote and disseminate information of up to date practices / procedures to ALL healthcare staff in their team; alerting the Autism Service of any training needs for members of the team
3. Ensure that patients with Autism are alerted to the Autism Service
4. Provide induction training for new staff or students, re the care of individuals with Autism within the ward setting.
5. Maintain the Autism resource folder or notice boards and ensure staff are aware of this.
6. Attend Autism Link practitioner training / meetings.

Name
DOB



Reasonable Adjustment requests for patients with Autism accessing Hospital services.

This form is for you to highlight what will make your hospital stay easier for you – we will endeavour to make adjustments to the care you receive based on your information, but are unable to guarantee your requests will be made fully – this could be due to a number of factors including your health and safety, the nature of the environment, staffing provision etc.

Please use the headings below as a guide to explain what could help you whilst in hospital.

Please give to your person responsible for your care once completed; they will advise what can reasonably be done to meet your requests.

Anxiety

Sensory

Physical

Communication

Advocacy/support

ALL STAFF PLEASE NOTE -THIS IS GUIDANCE TO HELP COMPLETE THE FORM AND IS AN EXAMPLE ONLY. PLEASE LOOK AT THE OTHER SIDE TO SEE SPECIFIC PATIENT INFORMATION.

Appendix 6 (Page 2)

Completing this form:

You may wish to consider the following suggestions – it is not a prescriptive list, please put down anything that you want others to know;

Anxiety - What causes you to be anxious? How would someone know that you are anxious? How can they help you?

FOR EXAMPLE: WHEN I AM ANXIOUS I OFTEN PUT MY HANDS OVER MY EARS AND SOMETIMES ROCK BACK & FORTH, IT HELPS IF YOU CAN KEEP ME UPDATED/FIND ME A QUIET AREA TO WAIT.

Sensory - Consider if you have difficulties with any visual stimulation (e.g. lights, patterns), hearing (e.g. loud noises, high pitched sounds), touch (e.g. being touched, texture of materials) and tastes/smells – What are they? How will you react?

FOR EXAMPLE: BRIGHT OR FLASHING LIGHTS MAKE ME FEEL PANICKY AND I MIGHT TRY TO COVER MY HEAD.IT HELPS IF I WEAR EARPHONES; HAVE A DARKENED ROOM.

Physical - Is there any physical stimulation that might have a profound effect on you? What sorts of things might cause you distress? What would help?

FOR EXAMPLE: I FEEL PHYSICAL PAIN IF I AM TOUCHED - I WANT TO BE WARNED BEFORE SOMEONE TOUCHES ME OR I MIGHT GET ANGRY OR SHOUT.

Communication – Do you struggle with communication? What aspects of communication do you find difficult? How do you communicate with other people best? How would you prefer other people to communicate with you? How best can people obtain necessary information about you to help care for you?

FOR EXAMPLE: I STRUGGLE TO TAKE INFORMATION IN WHEN THERE IS A LOT GOING ON AROUND ME. PLEASE SPEAK TO ME IN A QUIET ENVIRONMENT; IT WOULD HELP TO GIVE ME TIME TO THINK ABOUT MY ANSWERS.

Advocacy/support – Do you have someone who knows you well, and who you trust to speak up for you on your behalf if you are finding communication difficult? Do you need someone present to help with procedures or explanations?

FOR EXAMPLE: MY BROTHER (NAME) WILL SUPPORT ME WITH APPOINTMENTS WHEN HE CAN. HIS PHONE NUMBER IS ***** AND HE WILL SOMETIMES TALK TO OTHER PEOPLE OVER THE PHONE ON MY BEHALF.

Once this form is completed you can provide the hospital with a copy to place in your notes, you should also bring a copy with you any time you use hospital services, to show to staff if your notes are not immediately available. Although this form is designed for use in the hospital it can be used to inform any service of what Reasonable Adjustments would help you if you wish.

Appendix 7

aDAPt Terms of Reference

Name of group: aDAPt (Derriford Autism Partnership)

Purpose/role of group:

Providing advice, education and identifying resources for people with Autism, carers and Trust staff with the aim of adjusting to individual needs and therefore promoting positive healthcare outcomes.

Membership:

Who is the group open to: A variety of people with experience of Autism

Numbers: No more than 10 members

Period of membership: Ongoing

Accountability:

Any reporting back of activities from the group should be directed to the Chairperson.

Review:

The group will review its relevance and terms of reference annually.

Ways of Working:

The group will use a shared learning approach.

There will no sub-groups convened.

Meetings:

The Admin Assistant will be responsible for arranging meetings & circulating minutes.

Meetings will be monthly initially but this may be reviewed subject to demand.

Non-members may be invited to the group subject to agreement by the Chair.

Sharing of Information:

Information will be shared on the Internet page where appropriate.

The Internet page will be updated by the Admin Assistant.

Confidential/copyright information will be dealt with under Trust procedures.