



Children and Young People's Autism Services Commissioning for Hampshire

Children and Young People's Select Committee 14 November 2023

Current Status in Hampshire

- Caseload of approximately 5,100 children and young people across two services (CAMHS & Psicon Ltd)
- ICS wide caseload (all age, Autism and ADHD) of approximately 18,000 people
- Average waiting time of 13 months
- Across the ICS assessment waiting times range between 12-29 months depending on age range and service area
- Demand in the current structure outstrips funding by approximately 84%
- System-wide diagnosis led culture driving demand
- Provision and timeliness of support services is not consistent across the HIOW footprint
- If assessment demand increases, waiting lists will continue to grow, potentially resulting in risk to patient safety and/or deterioration in health and wellbeing.

ICB Actions

- Recommissioning existing services - focus on quality and safety - whilst undertaking transformation
- Established a new all-age commissioning framework for the entire SE region
- Established a system-wide Improvement Oversight Group to drive forward transformation
- Successfully achieved the increases in Autism Assessment activity from an average of 600-700 assessments per year before 2020 to approximately 1,500 per year from 2021 onwards.
- Secured non-recurrent funding public health for 445 assessments for people aged 16-25 in Hants.
- Developing a dashboard to centrally monitor performance data, demand and capacity
- Supporting professionals, patients and families to understand alternative options (NHS Right to Choose)
- Planning improved engagement with patients and families and professionals
- Secured funding to roll out the NHSE Autism in Schools project across Hampshire
- Worked with HCC, Public Health and Hampshire Autism Partnership to develop a new Local Authority Autism Strategy and Mental Health Wellbeing Strategy, to highlight Inequalities for Autistic people.
- Working with NHSE Region to deliver change at scale and benchmark HLOW

Transformation Plan

Aim: By 2026 we will establish a co-designed, all age transformed pathway model to meet ongoing demand for ADHD and Autism Spectrum condition. The model will be needs led, inclusive and will offer support, assessment and guidance as appropriate as well as meet aspirations of the national and South-East Region Autism Strategy.

Workstream 1: Transformed Service Model – Maintain provision and patient safety

- Stabilise current contract arrangements to ensure no gaps in service
- Secure funding for short term capacity to clear or reduce current waiting lists
- Using the opportunity of a new Fusion organisation, review the assessment pathway and identify opportunities to streamline, define proportionality and anchor to pre and post diagnostic pathways.
- Secure additional funding for long term capacity to meet the 12-week national waiting times target - maximise capacity and minimise waste
- Facilitate the smooth delivery of triage, assessment, diagnosis and prescribing services as well as signposting/referrals onto other services
- Ensure reassuring and safe transition/discharge
- Provide the infrastructure required to maintain safe and equitable shared care which match national policy and are agreed with Primary Care

Workstream 2: Transformed Service Model - Future Proof Services

- Collate and maintain data sets to build a true, dynamic understanding of demand across the ICS
- Using the opportunity of a new Fusion provider, assess the harm and costs of waiting to individuals and system to anchor change
- Design a long-term assessment offer that fully meets current and projected demand and which is response and proportionate to need
- Map the end-to-end pathway (early intervention to crisis) to identify areas of good practice, gaps, and areas of risk
- Codesign support services which meet need and offer evidence-based intervention at the right time - non diagnosis reliant

Workstream 3: Transformed Service Model - System Dependencies (Multi-agency)

- Understand and implement change alongside those people with lived experience as Subject Matter Experts
- Enable access to innovative models of needs-led and accessible support / alternative pathways for individuals across every stage of need, including evidence-based psycho-social interventions
- Identify and mitigate interdependencies between agencies which are historically reliant on diagnosis to access support
- Develop collaborative partnerships (example strategies) for action on local systemic change, to ensure consistency across the ICS

Transformation Governance

