

Risks Register: Adult Autism Strategy Review

	Priority	Risk Description	Risk owner	Pre Mitigation		Impact Date	Mitigating actions	Assurance Mechanism	Post mitigation	
				Likelihood	RAG				Likelihood	RAG
Barriers to implementing the Autism Strategy										
1.	Medium Term	Progress on driving change through local implementation slows down.	DH	4	R	Ongoing	Get an update on progress and details of possible barriers to progress/solutions. Consider recently published material such as the NAS Push for Action campaign.	Self evaluation exercise for Local Authority areas, the on-line survey for people with autism and views from key stakeholders.	2	A
2.	Imminent	Monitoring progress on improving outcomes for people with Autism There is insufficient information on local delivery and impacts to enable the Autism Programme Board to benchmark current position or assess progress.	DH Public Health England	3	A	Ongoing	The self evaluation exercise is a key tool in monitoring progress Look at how other policy areas such as dementia are developing comparative assessment standards for local authority areas.	The results of the self evaluation exercise. Explore further with delivery and other external partners.	2	A
3.	Imminent	No increased awareness and understanding of autism amongst front line professionals.	DH	4	R	Ongoing	The training of Local Authority and NHS staff is a statutory requirement. The results of the self evaluation exercise, the on-line survey and views from stakeholders will provide information on what other action is	The Autism Programme Board to consider progress. Future evaluation could gauge the following : - How trusting people with autism are of public services, and being	2	A

28/03/2014

							<p>needed during the Review.</p> <p>Work is also looking at the core-curricula for doctors, nurses and other clinicians.</p>	<p>more able to use them.</p> <ul style="list-style-type: none"> - Less stereotyping of people with autism and better provision of services to meet the needs of individuals with autism. - Adjustments being made by professionals in communicating interacting with people with autism. - NHS practitioners being able to identify potential signs of autism, so they can refer for clinical diagnosis if necessary. - Adults with autism feeling more comfortable accessing healthcare services, reducing the likelihood of challenging behaviour in healthcare settings, and enabling their health needs to be identified and addressed earlier. 		
4.	Imminent	No clear, consistent pathways for diagnosis of autism in every area developed, or followed by appropriate support.	DH	4	R	Ongoing	<p>The results of the self evaluation exercise should give up to date data on progress.</p> <p>Working with health, public and voluntary bodies so that a guide can be issued for CCGs by the Joint Commissioning Panel for Mental Health and Learning Disabilities to support the June 2010 NICE guidelines regarding</p>	<p>The Autism Programme Board to consider progress.</p> <p>Future evaluation could gauge the following :</p> <ul style="list-style-type: none"> - Diagnosis being more accessible, enabling better and more consistent access to appropriate interventions. 	2	A

							the recognition, referral, diagnosis and management of adults on the autism spectrum. NICE also to follow up on this issue.	- Better access to diagnosis and appropriate referral should have the effect of preventing deterioration leading to avoidable and inappropriate crisis admissions to services as a result of a severe mental health problem, physical illness, homelessness or coming into contact with the criminal justice system.		
5.	Medium Term	No improved access for adults with autism to the services and support they need to live independently within the community.	DH	4	R	Ongoing	The results of the self evaluation exercise and the on-line survey should give up to date data on progress.	<p>The Autism Programme Board to consider progress.</p> <p>Future evaluation could gauge the following :</p> <ul style="list-style-type: none"> - Reduced delays in diagnosis and treatment of often minor health conditions which could potentially become more damaging. - Adults with autism being able to navigate the benefits system and receive relevant employment advice. - Enabling adults with autism to complete courses and gain qualifications, as well as being involved on the social aspects of college life. - Reducing difficulties people with autism experience in using public transport, and 	2	A

								making it easier for them to access community services and activities.		
6.	Medium Term	Local partners not developing relevant services for adults with autism to meet identified needs and priorities.	DH	3	A	Ongoing	<p>The results of the self evaluation exercise and the on-line survey should give up to date data on progress.</p> <p>The self evaluation exercise asks that the returns be discussed by the Health and Well being Board to support local planning and health needs assessment strategy development.</p>	Initially the feed back from the self evaluation exercise and views of stakeholders.	2	
7.	Medium Term	Not enough focus on personalisation in terms of assessing and responding to the needs of individuals and an over emphasis on which "box" people with autism fall into in service terms (eg learning disability or mental health).	DH	3	A	Ongoing	<p>Work closely with social care transformation programme to address how personalised services can meet the needs of people with autism.</p> <p>NAS (DH funded) 3 year Personalisation brokerage project.</p> <p>Results of self-evaluation exercise.</p>	Key DH officials communicate with stakeholders and reporting back to the Autism Programme Board.	1	G
8.	Imminent	Lack of shared leadership across the NHS and Social Care for the delivery of the strategy.	DH	4	R	Ongoing	<p>Working closely with ADASS and local partnerships to support local leadership and ensure autism is not forgotten within local governance structures.</p> <p>The self evaluation exercise asks that the</p>	DH and ADASS reporting back to the Autism Programme Board	2	A

							<p>returns be discussed by the Health and Well being Board to support local planning and health needs assessment strategy development.</p> <p>DH and partners need to have a clear communication mechanism that provides consistent messages and does not re-enforce unrealistic expectations for organisations and people and their families with autism. There is a need to be clear about the message being given to promote that existing services need to provide reasonably adjusted services and promoting independence and equal access.</p>			
9.	Medium Term	Residual challenges from the health and social care transition, such as structural reform and financial pressures distracting from longer-term goals and disruption of strategic and clinical relationships in localities between organisations.	DH	4	R	Ongoing	Working with NAS and other partnership organisations, with ADASS to support local Autism Leads and to collate local information on challenges to delivery through the self evaluation exercise.	DH, NAS and ADASS reporting back to the Autism Programme Board.	2	A
10.	Medium Term	The Autism Strategy is a culture and whole system strategy. Autism not included in wider planning agendas such as employment, housing, accessing local services etc therefore preventing effective and cost	DH and other relevant Government Departments	4	R	Ongoing	<p>The self evaluation exercise will give up to date information on how far this is being achieved.</p> <p>Further cross Government action can be considered during the Review.</p>	The Autism Programme Board to consider next steps as part of the refresh of the Strategy.	2	A

		efficient solutions.								
Barriers to a successful Review										
11.	Imminent	Barriers to a successful review Key stakeholders do not agree with the direction to emerge from the investigative stage of the Review.	DH	3	A	End of October	Take account of stakeholders views when writing up the results of the review and the implications for delivery of services.	The Autism Programme Board to agree options for moving the Strategy forward, and give advice to Norman Lamb MP (Health Minister for Care and Support)	1	G
12.	Imminent	That people on the spectrum will not be able to make a meaningful contribution to the Review of the Autism Strategy. The voice of people with autism not at the heart of the work or engaged in appropriate ways, and the different needs of individuals, not listened to.	DH	4	R	End of October	The on-line survey will enable many adults with autism who are not comfortable with attending meetings to make a direct in-put to the Review. The survey will be followed up by focus groups and larger events involving people with autism and organised by NAS, Autism Plus and the UK Autism Alliance.	The Autism Programme Board is satisfied that people with autism have played a full part in the Review.	1	G
13.	Imminent	Unresolved issues from the 2012 NAO Memorandum on Progress with Implementing the Autism Strategy, from the February meeting of the Public Accounts Committee and the NAS Push for Action campaign are not addressed in the Review.	DH and relevant Government Departments/public organisations with commitments	3	A	To be considered when preparing the strategy refresh	Issues raised from these sources and which are still unresolved are being considered as part of the Investigative stage of the Review.	The Autism Programme Board is satisfied that these issues have been resolved.	1	G

14.	Imminent	The Autism Programme Board does not have overarching governance of the Autism strategy.	DH	3	A	On-going.	<p>The relationship between the accountability of local and national organisations delivering the Autism strategy and the Autism Programme Board to be reviewed.</p> <p>The relationship between the Autism Programme Board and Other Government Departments (OGDs) that make up the Board and other groups in DH, ie those that look at Social Care Reform or Local Government issues or Learning Disability to be considered.</p> <p>The Autism Programme Board's role in wider strategic issues like integration of health and care to be clarified.</p> <p>The Autism Programme Board must export information and views to other Government Departments and not rely on importing information..</p> <p>Decisions made elsewhere in Government should not have an impact on the autistic community.</p>	Final arrangements agreed by the Health Minister for Care and Support, Norman Lamb MP.	1	G
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15.	Imminent	No clear outcomes from discussions with Other Government Departments (OGDs) re progress on their key elements of the Strategy.	DH	3	A	End of October	DH having discussions with OGDs. OGDs to take part in focus groups and other events to hear issues and will also get feedback from the on-line survey and self evaluation exercise. Senior Officials from OGDs have been asked to attend the next meeting of the Autism Programme Board.	The Autism Programme Board is satisfied that OGDs have acted upon their key elements in the Strategy.	2	A
16.	Imminent	Issues to emerge from work by the devolved administrations on their own strategies not considered.	DH	4	R	End of October	Contact with the devolved administrations. DH had initial discussions with the devolved administrations at the Celtic Nations Autism Partnership event in Belfast in May. Contact to be maintained during the Review and beyond.	The Autism Programme Board is satisfied that good practice from the devolved administration strategies has been considered.	2	A
17.	Imminent	The family carers and self advocates on the Autism Programme Board are not involved in the work of the Review.	DH	3	A	End of October	The family carers and self advocates are supported to play as full as role as they can, allowing for their other commitments.	The family carers and self advocates feel they have played a full role during the Review and their views have been listened to.	1	G
Potential general barriers										
18.	Imminent	Communications Lack of engagement with	DH	3	A	End of October	Work with key stakeholders and partner organisations to advertise	Key partners have been fully consulted within the development of review	1	G

		service users, their families and carers, plus key stakeholders in order to understand and appropriately meet their needs during the review of the strategy.					the review via their websites and networks. DH Comms to provide advice and practical help re the use of blogs, articles and other means of communication during the Review. DH to set up a steering group as the review moves forward to ensure it remains on course.	plans.		
19.	Imminent	Resources Lack of capacity within DH and partners' project resources to carry out robust or effective investigation, review, analysis and engagement.	DH	3	A	End of March 2014	Close watch on capacity. Escalate to SRO or DG if issues start to arise (eg through unexpected absence of key personnel).	SRO in conjunction with Deputy Director and Project Manager.	1	A/G
These risks pertain to DH action and delivery but could be affected by other government programmes – Key interdependencies include: <ul style="list-style-type: none"> • DWP/ODI - Welfare Reform - potential impact on social care provision/ mental health • DWP/ODI - Employment support – potential impact on social care provision/ mental health/ long term conditions • DfE - SEN proposals – impact on transition/ social care / employment • CLG - Local Government Transformation - housing benefit changes, impact on social care provision • MOJ - Criminal Justice – offender health, mental health 										

Note : Pre-mitigation impact scores will be added to the next version of the Risk Register.

Date : 29 January 2014