

# Scenarios



**Oliver**

**Sally**

**Sandy**

**Peter**

**The aim of these case studies were to illustrate the possible pathway that would exist locally for people on the Autism Spectrum.**

These case studies were discussed at local multi-agency meetings. Responses were extracted from collective comments made by those attending and aggregated across all areas.

Local variations will not be fully evidenced in the text.

Please note that the desired outcomes have been taken from the Talking Points Outcomes.

## Oliver

Residential placement  
outwith authority

## Sally

Transitional

## Sandy

Adult

## Peter

Child

This case study was discussed in 26 local authority areas. It was discussed by a group of people from a range of local agencies including Social Work, Health and Education.

### Question 1

#### What would happen in your area?

He would already be known to children's services given he is currently accommodated outwith the authority.

The majority of respondents felt that a multi-agency review would be triggered but that the transitions planning process should already have been started. At that stage there were mixed responses as to what age transitions planning would start. Age 14 years to 16 years was the majority response for transitional planning with some of the comments predicated on whether he would stay at school or not and/or whether he was a looked after young person. Some areas reported that transitional planning for specialist provision should start at 14 years.

Respondents mentioned the need for a health and carers assessment to be undertaken.

Several respondents mentioned the difficulty in early engagement of adult services with children's services which has an impact on the planning process.

**Hotspot:**  
Difficulty in engaging adult service in planning

### Oliver's Scenario

Oliver has autism, learning disability and complex needs. His behaviour is increasingly challenging to cope with.

He is in specialist residential care but is due to leave school. Oliver's parents would like to have him living at home but are unsure they could cope with his challenging behaviour.

# Oliver

### Question 2

#### Who would be the lead agency?

By far, the majority of the respondents identified social work as the lead agency (22) with other respondents indicating an option on transitions workers, social work or education depending on the outcomes of the review process.

The responses were as follows.

- > Social work 22
- > Education 1
- > Education or social work 5
- > Social work or Health 1
- > Health 1
- > Transitions group 2
- > Education 1
- > Not defined 4

### Desired Outcomes

- > Living where you want/as you want
- > Staying as well as you can
- > Feeling safe
- > Having things to do

### Question 3

#### Who else would be involved?

The majority of responses related to the core services being involved in Oliver's review i.e. Social Work, Education and Health.

A significant number of respondents mentioned input from psychologists, CAMHS and SALT.

Additional people mentioned as being involved included independent organisations who could offer carers support, specialist knowledge of autism; Local Area Co ordinators and the possible use of Self Directed Support.

Advocacy was identified as an element of support needed for Oliver and his family.

Oliver and his family were noted as being important to include in the process by 8 respondents.

### Additional Comments

There was a general feeling in the comments about what **should** happen and what actually **would** happen in reality, mainly in relation to the planning process between Children and adult services.

GIRFEC was mentioned as the possible process that would underpin the multi-agency review.

**Hotspot:**  
Gap between what happens and the reality

### Question 4

#### Who would co-ordinate support?

Significantly social work (18) was identified as the agency which would coordinate the support for Oliver.

Transitions workers (8) were also identified as possibly coordinating support however, there was no definition of them being from Social Work Children and Families or Adult Services or from Education. Many comments illustrated that the person to coordinate in terms of transitions may be determined by the outcome of the multi-agency review.

Two respondents identified the family as the possible coordinators of Oliver's support in the case where Self Directed Support would have been put in place.

4 respondents could not identify who would coordinate support.

Advocacy services were identified as a resource needed to support the family through the process.

There were only a few references to what Oliver would do post school. These included referring to employability service, community learning and Further Education as possibilities



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# Sally

## Question 1

### What would happen in your area?

Several respondents felt that this would not happen in their area as the youth club provision would extend beyond 16 for her. It was felt that Sally would already be going through transitional planning from school and that it would be important that the issue of the youth club and alternatives were identified as part of this process.

Respondents also spoke about the need to support Sally with understanding why she may have to leave; explore where her peers were going and to help her parents with strategies to support her.

Local Area Coordinators were mentioned as a possible resource to identify other opportunities in the community for her.



#### Hotspot:

Could reasonable accommodation be made to continue to 18 years

## Question 2

### Who would be the lead agency?

The majority of respondents felt that Education (9 respondents) would be the lead but a significant number (6 respondents) were unsure if it would be Social Work or Education or both dependent on other factors:

- > Will she stay at school beyond 16yrs.
- > Is she already known to Social Work.
- > What is her level of need

## Question 3

### Who else would be involved?

- > Her parents and family
- > Educational Psychologist to help with her behaviour.
- > CAMHS team
- > Local Area Coordinators to assist in identifying other options for her.
- > Transitions worker.
- > Children with Disabilities team.

## Question 4

### Who would co-ordinate support?

Most respondents indicated an almost even split between Social Work, Education and a named person. This suggests that GIRFEC/school transitional planning and review process would bring about the identification of the person to coordinate.

## Sally's Scenario

Sally is 16 and has a learning disability and Autism. She is very healthy, sociable and active young girl. She had been attending the same youth club for 4 years and has made lots of friends and has learnt lots of new things. The youth club is only available until the age of 16 and she does not understand why she can't go to the youth club anymore. Sally is now upset, feels isolated, and has not been able to maintain friendships and is becoming increasingly challenging at home and at school. Sally's parents wonder how to explain the situation to Sally so that she understands. Sally would like to attend a youth club and meet her peers.

## Desired Outcomes

- > Having things to do
- > Seeing people
- > Staying as well as you can

## Additional Comments

- > Local Area Co ordinators/Community Connectors were the possible link to identify further community options for Sally.
- > Support needed for Sally's parents.



#### Hotspot:

Mainstream services have a lack of understanding of Autism.

**This case study was discussed in 14 local authority areas. It was discussed by a group of people from a range of local agencies including Social Work, Health and Education.**



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# Sandy

## Question 1 What would happen in your area?

Respondents questioned who would have diagnosed him which would have an impact on what would happen locally.

Several respondents felt that there would be no follow up to the missed appointments with the psychiatrists and that Sandy would possibly be identified when in crisis as a vulnerable person through Accident and Emergency when presenting with burns.

There was a lack of clarity by many of the responses in relation to Sandy which highlighted that the lack of co morbidity may impact on falling between services and only when he reached crisis would referrals be made.

 **Hotspot:**  
Lack of Early Intervention

## Question 2 Who would be the lead agency?

Respondents were split over who would be the lead. 11 respondents thought it would be health while 12 respondents thought that social work would be the lead. Interestingly there were as many undefined or don't know responses (9).

The role of the GP was ambiguous as many respondents thought Health should lead but were not confident that GP's would pass on information post diagnosis unless there were sufficient concerns around Sandy.

Several respondents mentioned that the eligibility criteria for accessing Social Work services may have an impact on who would lead.

Two respondents did mention that the presence of a One Stop Shop in their area would be the place to assist Sandy.

 **Hotspot:**  
No defined lead

## Question 3 Who else would be involved?

A range of other services were mentioned:

- > Health for assessment
- > Home support for bills and financial management
- > Support from employability services
- > Access to Advocacy and OT services
- > Possible support from family if any
- > Housing
- > Referral to College or Skills Development Scotland for qualifications.
- > One Stop Shops

## Question 4 Who would co-ordinate support?

There was a general lack of clarity from respondents as to who would coordinate Sandy's support. The majority of respondents (12) were unclear or unable to define who would take on this role. 11 respondents did identify social work as having this role but this was predicated on the assumption that Sandy would be assessed as needing a service.

There was a general feel of confusion around Sandy's case and recognition that there was no clear pathway for someone like Sandy.

 **Hotspot:**  
No clear pathway

## Sandy's Scenario

Sandy is an adult with Asperger's which has just been diagnosed. He does not know what this means and is confused by the leaflet that he has been given by his GP. Sandy has missed 4 appointments with his psychiatrist and has been removed from the hospital's patient list. Sandy has difficulty keeping track of appointments and gets anxious when he knows that he has an appointment coming up and has to change his routine. Sandy lives on his own and struggles with house work and paying his bills which has got Sandy into trouble in the past. Sandy is hyposensitive to heat which has resulted in Sandy having burns on his hands and arms. Sandy has always been unemployed but is seeking a job which will make use of his exceptional IT skills.

## Desired Outcomes

- > Feeling Safe
- > Having things to do
- > Staying as well as he can be

## Additional Comments

- > An example of no post diagnostic support service
- > No data collection process in place to identify Sandy although one respondent mentioned the development of a data base from birth to death as part of their autism strategy
- > Confusion about whether Sandy would "fit" into any services and potentially could fall through the net. The issue of eligibility criteria for Social Work support was mentioned throughout.
- > Lack of communication and understanding between the diagnostic person to the role of the GP and how Social Work would be alerted to Sandy's case.
- > One stop Shops and Local Area Co ordinators where they exist were seen as possible routes for Sandy.



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# Peter



## Question 1

### What would happen in your area?

The Police were identified as being the agency that would raise their concerns with the school or School Work by the majority of respondents. This would then instigate a multi agency review. Only 2 respondents mentioned housing however under the GIRFEC process it was acknowledged by several respondents that housing would be part of the multi-agency meetings.



#### Hotspot:

Lack of involvement in multi-agency meetings from housing

## Question 2

### Who would be the lead agency?

By far the majority of the respondents identified Education as the lead agency and from this the lead professional would be identified.

## Question 3

### Who else would be involved?

A significant number of respondents recognised that housing, Social Work, Police and CAMHS would be involved. Support to Peter and his mum was identified through family support and advocacy. Given his sensory issues OT and Telecare would be involved as well. Specialist voluntary organisations were identified as offering support e.g. One Stop Shops, Scottish Autism Advice Line.

## Question 4

### Who would co-ordinate support?

Most respondents thought that Social Work would coordinate the support. However there was a balanced opinion from others that they were unsure or not able to define who would coordinate the support as this would form part of the multi-agency review. Several concerns were raised as to what would happen when Peter reached 16yrs.



#### Hotspot:

Who picks up Peter at 16 years

## Peter's Scenario

Peter has autism and is 15yrs. He lives with his mum and older brother in a tenement building which is near a train line. Peter does not like the sound of the train and picks at his skin and pulls at his hair when the train goes past. He shares a bedroom with his older brother which causes a lot of problems as Peter's older brother comes home late at night and brings people back to the flat which disrupts Peter's routine. When Peter is anxious he will leave the house at any time of the day and wander the streets without telling anyone where he is going. His mum gets anxious when he does this as there are a lot of teenagers in the local area that shout abuse at Peter when he is out in the community. Peter's mum calls the Police when he does not return home which makes Peter even more anxious. Peter would like to live in a quiet home and have his own bedroom.

## Desired Outcomes

- > Living where you want/as you want
- > Feeling Safe
- > Staying as well as he can be

## Additional Comments

- > Respondents recognised that GIRFEC would drive the process and instigate a multi-agency review in relation to Peter's case.
- > Impact of the sensory issues within the house needed to be addressed.
- > Of all the agencies that attended the local multi-agency workshops only 4% of attendees were from housing and so the comments may not fully reflect the role of housing.
- > Opportunities for All may give options for Peter in relation to employability from 16yrs.

This case study was discussed in 10 local authority areas. It was discussed by a group of people from a range of local agencies including Social Work, Health and Education.

